

Janet T. Mills
Governor

Sara Gagné-Holmes
Commissioner



Maine Department of Health and Human Services
Division of Contract Management
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Augusta, Maine 04333-0011
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April 11, 2025

Via Electronic Mail: dmccluskey@comcareme.org

Community Care
David McCluskey
40 Summer Street
Bangor, ME 04401

SUBJECT: Notice of Conditional Contract Award under RFP #202412212, Pre-Qualified Vendor List for Housing First Support and Stabilization Services

Dear Mr. McCluskey,

This letter is in regard to the subject Request for Proposals (RFP), issued by the State of Maine Department of Health and Human Services, Office of Commissioner for Pre-Qualified Vendor List for Housing First Support and Stabilization Services. The Department has evaluated the proposals received using the evaluation criteria identified in the RFP, and the Department is hereby announcing its conditional award(s) to the following bidder(s):

- Community Care

The bidder(s) listed above have met the requirements for placement on the Pre-Qualified Vendor List. Vendors added to this Pre-Qualified List (PQVL) are not guaranteed a contract within the State of Maine but are eligible to submit bids on projects issued through the PQVL Mini-Bid Process, as defined in the RFP. Any Notice of Conditional Contract Award resulting from a Mini-Bid award is subject to execution of a written contract. As a result, this Notice does NOT constitute the formation of a contract between the Department and the apparent successful vendor(s). The vendor shall not acquire any legal or equitable rights relative to contract services until a contract containing terms and conditions acceptable to the Department is executed. The Department further reserves the right to cancel this Notice of Contract Award and dissolve the Pre-Qualified Vendor List at any time.

As stated in the RFP, following announcement of this award decision, all submissions in response to the RFP are considered public records available for public inspection pursuant to the State of Maine Freedom of Access Act (FOAA). 1 M.R.S. §§ 401 et seq.; 5 M.R.S. § 1825-B (6).

This award decision is conditioned upon final approval by the State Procurement Review Committee and the successful negotiation of a contract.

Any person aggrieved by this award decision may request an appeal hearing. The request must be made to the Director of the Bureau of General Services, in writing, within 15 days of notification of the contract award as provided in 5 M.R.S. § 1825-E (2) and the Rules of the Department of Administrative and Financial Services, Bureau of General Services, Division of Purchases, Chapter 120, § (2) (2).

Thank you for your interest in doing business with the State of Maine.

Sincerely,


Signed by:



EFD18D286BE941B...

Adrienne Leahey
Chief Operating Officer
Office of Behavioral Health

DocuSigned by:



5DC6307B8558482...

Debra Downer
Deputy Director for Competitive Procurement
Division of Contract Management

**STATE OF MAINE
TEAM CONSENSUS EVALUATION NOTES**

RFP #: 202412212

RFP TITLE: Pre-Qualified Vendor List for Housing First Support and Stabilization Services

BIDDER: Community Care

DATE: April 10, 2025

SUMMARY PAGE

Department Name: Health and Human Services

Name of RFP Coordinator: Stacy Martin

Names of Evaluators: Tia Bolduc, Anna Ko, Michael LaBua, Adrienne Leahey, Kerry Polyot-Stefani

<u>Pass/Fail Criteria</u>	<u>Pass</u>	<u>Fail</u>
Section I. Preliminary Information (Eligibility)	N/A	N/A
<u>Scoring Sections</u>	<u>Points Available</u>	<u>Points Awarded</u>
Section II. Organization Qualifications and Experience	50	47.00
Section III. Proposed Services	25	23.00
Section IV. Cost Proposal	25	25.00
<u>Total Points</u>	<u>100</u>	<u>95.00</u>

**STATE OF MAINE
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**OVERVIEW OF SECTION I
Preliminary Information**

Section I. Preliminary Information

Evaluation Team Comments:

N/A

**STATE OF MAINE
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**EVALUATION OF SECTION II
Organization Qualifications and Experience**

	<u>Points Available</u>	<u>Points Awarded</u>
Section II. Organization Qualifications and Experience	50	47.00

Evaluation Team Comments:

Part IV. Section II. Organizational Qualification and Experience
1. Overview of the Organization
<ul style="list-style-type: none">• Held national accreditation through the Council on Accreditation for Children and Families (COA) since 2005, and has been voted as one of the Best Places to Work in Maine six years in a row• The sole awardee of the Youth Homeless Continuum of Care DHHS contract for central and northern Maine. Providing emergency shelter, day programming, residential transitional living, and housing support for young adults up to the age of 21• Providing Targeted Case Management since 2007, many clients referred by the Bangor Area Homeless Shelter as well as the Bangor General Assistance Program• Are an established Maine Continuum of Care (CoC) Homeless Management Information System (HMIS) participating agency• Services are provided in rural and other areas of the State• Has extensive experience providing site-based support for young adults experiencing homelessness who are residing in scattered-site apartments• Has managed residential programs since 1998, including provision of services 24/7/365• Experienced developing effective staffing and scheduling models for 24/7/365 residential programs• Provides other behavioral health services: an outpatient mental health clinic, supportive housing program, residential independent living program, treatment foster care program, emergency shelter, outreach• Has a significant recruitment & retention plan to include but not limited to bonuses, professional marketing, competitive wages, excellent benefits package, and wage increases based on longevity• Included a non-exhaustive list of some collaborations they ‘often draw upon’, with a description on “service provided” next to each indicated organization

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<ul style="list-style-type: none"> • Provided a table indicating common barriers to housing maintenance and their experience mitigating each listed common barrier • Three (3) decades of experience evaluating HRSN through assessments; and they create a service plan in partnership with the individual within the first thirty (30) days, with service plan updated every ninety (90) days • Referred to their Shaw House program as an example of bringing providers on-site for service provision, with the intent of improving access and increasing the likelihood of participation • Approach to Information technology: currently utilizes Department software to provide programmatic and consumer data, maintains HIPAA compliance policies and procedures, trains staff on confidentiality, has policies for infractions of policies, utilizes an electronic medical record (Credible) that can be utilized for HFSSS, use data for decision making • Examples of services they brought on-site include: harm reduction services; mental health counseling; substance use counseling; “partner violence individual and group support”; and support for survivors of trafficking • Recent core administrative procedure improvements are: <ul style="list-style-type: none"> ○ Maximizing direct care staff time in the field by developing workflows to eliminate duplicative work ○ Simplifying purchasing procedures for client assistance fund. ○ Implemented a process for ensuring timely accurate HMIS data entry ○ Updating and improving the electronic medical record (did not elaborate) ○ Updating the payroll system to be more efficient and user friendly (did not elaborate) • Contract with a professional grant proposal writer who has two (2) decades of grant/proposal writing experience in order to identify and pursue potential funding opportunities. Also indicated their freelance grant writer was previously employed by the agency for twenty-seven (27) years and is very familiar with their organization <ul style="list-style-type: none"> ○ Unclear if the professional grant proposal writer is inclusive of private funding opportunities ○ Did not specifically cite experience in raising private funds to cover expenses that exceed publicly funded operating budgets • Provided 3 relevant projects
2. Organizational Chart
<ul style="list-style-type: none"> • Provided, and specifically delineates the anticipated project team for HFSSS, aside from the Homeless Services Director who would oversee HFSSS, Bidder indicated additional staff/positions would include: a Housing Stabilization Program Manager; a Housing Stabilization Coordinator; a Housing Permanency Specialist; and a Housing Engagement Specialist
3. Litigation
<ul style="list-style-type: none"> • Indicates none

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**EVALUATION OF SECTION III
Proposed Services**

	<u>Points Available</u>	<u>Points Awarded</u>
Section III. Proposed Services	25	23.00

Evaluation Team Comments:

Part IV, Section III Proposed Services
1. Services to be Provided
Part II
A. Administrative Requirement
<ul style="list-style-type: none">• Will provide HFSSS with the governing principles of Motivational Interviewing (MI) and the Wraparound Service Delivery model, both of which the Bidder states are grounded in a person-centered, strength-based approach.• Utilization of Motivational Interviewing<ul style="list-style-type: none">○ Individual initiates when it is time for change○ Service provider endeavors to activate the individuals own motivation and desire for change.○ Draw attention to individual's positive motives and resources that may offer options to bring about positive resolutions to dilemmas.• Provided a thorough detailed description of MI and the Wraparound Service Delivery model and included a table illustrating an example "MI based conversation" as compared to a "Non-MI based conversation". The provided "MI based conversation" example demonstrated understanding of a person-centered, strengths-based approach to service delivery and engagement• Wrap around team consists of individuals agreed upon by the individual and will consist of HFSSS staff, external service providers, and other members of the consumer's support system• Utilize a team-based approach, natural supports, convenience for the individual, culturally competent, in delivery of individualized services• Identify, build on, and enhance the capabilities, knowledge, skills, and assets of the individual• Listed the principles of Wraparound that they will integrate into their HFSSS service delivery approach, with a description included for each principle: voice and choice; team based; natural supports; collaboration; community-based; culturally competent; individualized; strengths-based; unconditional; and outcome based

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- Outcome based - goals and strategies of the wraparound/serviced plan include observable or measurable indicators of success, monitoring of progress in terms of these indicators ,and revision of the plan accordingly
- Agrees to meet the Departments requirements to include providing necessary documentation describing position titles of all HFSSS staff, a detailed staffing plan, a detailed realistic implementation plan, detailed and realistic implementation and work plan to capture implementation strategies, a valid certificate of insurance on a standard ACORD form, and CC will agree to invoice the Department for HFSSS based on the Departments rates
- Does not plan to utilize subcontractors/consultants in the implementation of HFSSS
- Referred to prior experience collaborating and taking direction from the Department and indicated they will use their current approach of “how can we be helpful?”, and “coming to the table as a team player” for HFSSS collaboration and direction-taking from the Department
- Have a current MaineCare Provider Agreement
- A current CoC HMIS
- Provided documentation illustrating enrollment as a current TCM agency
- Committed to meeting with the community- partners they engage with to discuss and collaborate on how they will implement these services
- Does not currently hold any formal MOUs, but does provide an extensive list of providers they typically work alongside of
- Will also explore additional collaborations that could provide services to benefit HFSSS participants
- Understand they will be required to provide treatment oversight and care coordination with all providers in the resulting service area that support HFSSSS tenants
- Once notification of acceptance is received, will follow the Departments instructions in a timely manner to ensure readiness for the implementation of HFSSS
- Will discuss strategy with the Department
 - Strategies include creating a program development group to create a staff recruitment and training plan; implementing staffing plan 90 days prior to occupancy date; offer jobs as early as 60 days prior to occupancy date
 - Staff start at least 2 weeks prior to the program start date for new-hire orientation
- With Department approval, they will also reach out to their network of connections/collaborative partners to engage with to provide outreach on the program.
- Has held many State and Federal contracts, and understands each contract will have its own requirements. Upon award, CC will review agency requirements outlined in the contract, expectations identified in the HFSSS program manual,

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and any additional expectations identified by the Department, and will incorporate these requirements in the development of the program

- Will also identify what information needs to be tracked and then will identify a mechanism to run reports and monitor compliance for each category requirement

B. Housing First Support and Stabilization Services (HFSSS)

- Estimates services will require between 9.5-10.5 FTEs.
 - 4 types of direct service positions listed with detailed lists of duties and functions: Housing Stabilization Program Manager, Housing Stabilization Coordinator, Housing Permanency Specialist, and Housing Engagement Specialist
- Current programs with 24/7/365 staffing models that are an additional staffing resource to ensure coverage
- Plans to provide preference to Housing Engagement Specialist (HES) applicants that have lived experience with housing insecurity, mental illness, substance use and/or other similar experiences
- For the Housing Permanency Specialist (HPS) position, plans to include a position requirement that the HPS have lived experience with housing insecurity, mental illness, substance use and/or similar
- Use a trauma-informed approach with transparency, ensuring individuals know what to expect, and what is expected of them, in order to make an appropriate personal assessment on whether the service is a safe option for them to participate in
- Fully inform individuals of expectations and options and accepts when they do not feel safe and adjust services to ensure the individual is in control of their involvement or participation in services
- Staff work alongside the individuals as they navigate through the daily life choices they make, providing support and information
- Supervisory infrastructure includes a Clinical Director who will provide clinical consultation, and stated their Clinical Director holds LCSW and LADC licensure, ensuring capacity to provide staff training on clinical topics such as trauma, substance use, MI, Wraparound and mental health. Stated, their Clinical Director is also on their Management Team, ensuring an opportunity to make sure all HFSSS policies, procedures and day-to-day decision making are trauma informed
- Upon building a trusting relationship with tenants, HFSSS staff will engage each tenant in conversation to assess their needs in these areas, explore their interest in working alongside HFSSS staff to strengthen their skills, and learn from HFSSS staff the community-based resources that are available to help them along their journey
- Will utilize the Rent Smart curriculum and other independent living curriculums
- Independent living skills will include learning strategies for being a good tenant as a first step to increased ability to maintain housing

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- Weave information about community-based services into the relationship building and assist with access when the individual is ready
- Individuals who identify with a need for formalized intervention, these areas will be assisted by the Housing Stabilization Coordinator in identifying the scope of the intervention that most meets the consumer's objective
- Housing Stabilization Program Manager will provide supervision and oversight for the Housing Stabilization Coordinator, Housing Permanency Specialists and Housing Engagement Specialists; with the Housing Stabilization Program Manager supervised by their Homeless Services Director
- Will create programmatic procedures and policy guidelines which will guide HFSSS decision making, program operations, and monitoring
- Accreditation in the Council of Accreditation for Children and Families includes a component to ensure that policies and procedures protect the rights of individuals receiving services and that client/consumer feedback is integrated into program evaluation and practices
- Staff will be trained to appropriately advocate for individuals and will assist them in navigating through barriers that are interfering with reaching their goals
- Many of their board members and management team staff also bring personal experience to the table and are "highly dedicated to ensuring that the rights of individuals are protected and that inequalities are addressed to pave the way to greater opportunity"
- Staff will take an active role in being proactive to ensure the timely availability of services by meeting with current and potential new service providers to explain the HFSSS program and solicit their support to join efforts in supporting this population by creating an efficient referral system and partnering with our team to explore strategies to decrease wait times for services
- Staff will rely upon current collaborations, and forge new collaborations, to create a seamless and efficient referral process for the wide range of services tenants may need including, but not limited to, health care, substance use treatment, legal services, harm reduction services, and mental health care

C. Available HFSSS for Tenants

- Staff will meet with tenants when they move in and discuss the availability of support services and emphasize that the service is voluntary
- Staff will obtain consent in writing on a consent to services form prior to service delivery; and tenants that decline HFSSS will be reassured that they can reach out at any time should they change their mind
- Expectation is that once individuals begin building relationships with staff through informal daily encounters the individuals may act on growing trust to increase the level of engagement and eventually explore the support that is offered.
- ISPs will be provided for all tenants, but the approach may differ depending on the needs and interest of the individual. For tenants with complex mental health or substance use treatment needs and /or are experiencing a significant degree of

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destabilization, a more intense service delivery approach will be utilized, including the possible implementation of the Wraparound model

- ICPs will also be provided during a stabilization period. This will help the staff to gain insight to triggers prior to the tenant experiencing any triggers
- Did not include any reference to assessment(s) being completed
- Are a TCM provider and will provide TCM and/or Behavioral Health/Community Integration services on-site for tenants interested in working with the Bidder for those services
- HFSSS staff will provide hands-on assistance with completing necessary applications and making necessary calls for accessing social services and benefits, as opposed to just providing the tenant with an application or providing tenant with a phone number to contact
- As it pertains to skill development education, plans to help connect tenants to a community-based representative payee, if desired.
- Staff will draw upon connections with SNAP and Bangor Public Health to make basic nutritional material available, organize on-site groups for tenants focused on nutritional counseling, and will link interested tenants to off-site nutritional counseling services.
- Regarding connecting tenants to volunteer opportunities – plans to have HFSSS staff support tenants interested in volunteering with opportunities within the community and within the HFSSS program.
- Staff will draw upon current connections with family reunification programs, family therapy programs, and parenting education programs in situations in which a tenant is seeking family reunification/parenting support/education.
- Plans to have HFSSS staff link interested tenants to formal peer support programs and plans to also explore ways in which tenants can offer peer support services to one another.
- Upon entering into contract, plans to have their Housing Stabilization Program Manager meet with the local crisis provider to discuss the Housing First program and strategize on prevention and intervention strategies that can be used once residency occurs.
- Staff will enlist the support of the Maine Health Employment Coaching Program for their expertise in job search, job retention, interview preparation, and other vocational supports.
- All members of staff will be trained in SOAR, to assist tenants in accessing the Social Security Administration's SSI and SSDI programs. When assisting tenants in accessing social security disability, SOAR trained staff will rely on collaboration with a law firm who can aid the individual in a situation of denial.
- Will offer access to support through the Open Table Model which consists of 4-6 volunteers from the community who come together to offer friendly support to an individual by initiating weekly supportive and encouraging engagement.

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- Should a tenant request a different agency for case management service provision, they will assist the tenant with referring for services outside of the agency.
- Will create a culture of healthy living and a culture that promotes substance use recovery within the housing complex by providing opportunities to participate in a wide range of activities that promote healthy living.
- Plans to have HFSSS staff solicit feedback from tenants on their interests and incorporate groups that are geared toward those interests.
- Plans to have activities facilitated by HFSSS staff, community members, and/or representatives from various organizations.
- Plans to encourage tenants to facilitate activities to share their skills/knowledge; with tenants playing an instrumental role in creation of the calendar of activities.
- Currently collaborates with Bangor Public Health who provides education and training in the use of Narcan. If awarded the HFSSS contract, they will implement a plan to also train/educate HFSSS tenants in the use
- Holds current collaborations with Needle Point Sanctuary and Wabanaki Public Health, referring individuals with their Syringe Service Program. This program will also be extended to HFSSS tenants
- Staff will link tenants with free/low-cost community-based activities as well as linking them with transportation resources as needed to access those activities.
- When scheduling activities, staff will collaborate with tenants to collect feedback as to times that would work best and adjust times accordingly to meet the changing needs of tenants
- Will offers a multitude of on-site activities
- Create opportunities for tenants and their larger communities to come together in a safe, supportive environment to encourage a sense of belonging and support

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**EVALUATION OF SECTION IV
Cost Structure Reimbursement Acknowledgement Form**

	<u>Points Available</u>	<u>Points Awarded</u>
Section IV. Cost Structure Reimbursement Acknowledgement	25	25.00

Evaluation Team Comments:

- | |
|--|
| <ul style="list-style-type: none">• Provided a signed copy as required |
|--|

**STATE OF MAINE
INDIVIDUAL EVALUATION NOTES**

RFP #: 202412212

RFP TITLE: PQVL for Housing First Support and Stabilization Services

BIDDER NAME: Community Care

DATE: 4/9/2025

EVALUATOR NAME: Tia Bolduc

EVALUATOR DEPARTMENT: DHHS - OMS

Individual Evaluator Comments:

Part IV. Section II. Organizational Qualification and Experience	
Overview of the Organization	
<ul style="list-style-type: none">• Non-profit agency established in 1995• CC held national accreditation through the Council on Accreditation for Children and Families (COA) since 2005 and has been voted as one of the Best Places to Work in Maine six years in a row• CC provides a wide range of services to adults, children, and families across a broad geographic area of the state including our most rural counties• CC is the sole awardee of the Youth Homeless Continuum of Care DHHS contract for central and northern Maine. Providing emergency shelter, day programming, residential transitional living, and housing support for young adults up to the age of 21• CC has been providing supportive services to individuals experiencing homelessness since 2007 through their Targeted Case Management program• CC manages several residential programs; this is how they have gained experience in providing 24/7/365 care• In addition to Targeted Case Management, they offer outpatient mental health clinics, Home-based mental health and behavioral support, Supportive Housing Program. Residential Independent Living Program. Treatment Foster Care Program: and Shaw House Program which, in addition to the housing program, includes a day program, emergency shelter, and street outreach.• CC provided a list of service providers they collaborate with regularly• CC maintains a current staffing level of 131 part-time and 95 full-time staff• CC has a significant recruitment & retention plan to include but not limited to bonuses, professional marketing, competitive wages, excellent benefits package, and wage increases based on longevity• CC has a vast knowledge of common barriers to maintaining permanent housing and has even offered up solutions to different scenarios an individual could be facing• CC's TCM program assists individuals in obtaining and retaining benefits such as health insurance• Decades of experience evaluating Health-Related Social Needs through the implementation of a variety of assessments. Re-assessment occurs as needed• CC has extensive experience providing site-based support for young adults experiencing homelessness who are residing in scattered-site apartments	

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- Has experience in partnering with landlords. Landlords prefer to rent to individuals that CC connects to their housing units because the landlords know that CC staff will help to prevent tenant related issues from occurring
- CC has updated the payroll system to be more efficient. CC has updated/improved the electronic medical record. And CC has implemented extensive experience providing site-based support for young adults experiencing
- CC contracts with a professional grant proposal writer to identify and pursue potential funding opportunities

Provided three projects, only two fall within the last five years

- **Organizational Chart**

- Attached and clearly points to the Housing unit

- **Litigation**

- No litigation cases reported

Part IV, Section III. Proposed Services

1. Services to be Provided

Part II

A. Administrative Requirement

- CC will utilize Motivational Interviewing (MI) and Wrap Around Service Delivery model, and provides a very detailed outline of how this works
- CC holds several contracts with DHHS
- CC agrees to meet the Departments requirements to include providing necessary documentation describing position titles of all HFSSS staff, a detailed staffing plan, a detailed realistic implementation plan, detailed and realistic implementation and work plan to capture implementation strategies, a valid certificate of insurance on a standard ACORD form, and CC will agree to invoice the Department for HFSSS based on the Departments rates.
- Additionally, CC states they do not plan to utilize subcontractors/consultants in the implementation of HFSSS
- CC has demonstrated a willingness and ability to collaborate with, and take direction from, the Department throughout our past and current contract awards
- Agreement is attached
- CC Does not currently hold any formal MOUs, but does provide an extensive list of providers they typically work alongside of
- CC understands that as a service provider contracted with the Department to provide HFSSS, we will be required to provide treatment oversight and care

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EVALUATOR DEPARTMENT: DHHS - OMS

coordination with all providers in the resulting service area that supports HFSSS tenants
<ul style="list-style-type: none"> Once notification of acceptance is received, CC will follow the Departments instructions in a timely manner to ensure readiness for the implementation of HFSSS Communication with the Department will be important during this process
<ul style="list-style-type: none"> CC understands this requirement and offers a detailed description of their strategy to hire and train staff, as well as beginning outreach
<ul style="list-style-type: none"> CC has held many state and federal contracts and understands each contract will have its own requirements. Upon award, CC will review agency requirements outlined in the contract, expectations identified in the HFSSS program manual, and any additional expectations identified by the Department, and will incorporate these requirements in the development of the program CC will also identify what information needs to be tracked and then will identify a mechanism to run reports and monitor compliance for each category requirement
B. Housing First Support and Stabilization Services (HFSSS)
<ul style="list-style-type: none"> CC agrees to this term
<ul style="list-style-type: none"> CC provides a detailed description of the four positions created for HFSSS Providing 24/7/365 coverage using the created positions is estimated to require between 9.5-10.5 FTEs. CC will plan to pull staff from other CC programs when necessary
<ul style="list-style-type: none"> CC demonstrates an understanding of person-centered, strengths-based approach
<ul style="list-style-type: none"> CC will utilize the Rent Smart curriculum and other curriculums designed to promote Independent Living skills to assist tenants in strengthening skills around independent living and to assist them in learning strategies to be a responsible tenant Upon building a trusting relationship with tenants, HFSSS staff will engage each tenant in conversation to assess their needs in these areas, explore their interest in working alongside HFSSS staff to strengthen their skills, and learn from HFSSS staff the community-based resources that are available to help them along their journey
<ul style="list-style-type: none"> CC will create programmatic procedures and policy guidelines which will guide HFSSS decision making, program operations, and monitoring

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<ul style="list-style-type: none">• A supervisory structure allows for appropriate oversight to ensure the implementation of programmatic policy and procedures, and ensures contractual expectations are met
<ul style="list-style-type: none">• CC holds national accreditation in COA. A component of COA is to ensure that policies and procedures protect the rights of individuals receiving services and that client/consumer feedback is integrated into program evaluation and practices. HFSSS staff will be trained to appropriately advocate for tenants and will assist them in navigating through barriers that are interfering with reaching their goals
<ul style="list-style-type: none">• HFSSS staff will play an active role in being proactive to ensure availability of services. Staff will rely heavily on current collaborations and will forge new collaborations to ensure the tenants have a wide range of services offered to them
C. Available HFSSS for Tenants
<ul style="list-style-type: none">• CC's HFSSS will meet with tenants when they move in and discuss the availability of support services and emphasize that the service is voluntary• HFSSS staff will obtain full consent from tenants prior to offering support services• Tenants that decline these services will be assured they can outreach for assistance later if/when they are ready to receive these services
<ul style="list-style-type: none">• ISPs will be provided for all tenants, but the approach may differ depending on the needs and interest of the individual. For tenants with complex mental health or substance use treatment needs and /or are experiencing a significant degree of destabilization, a more intense service delivery approach will be utilized, including the possible implementation of the Wraparound model• ICPs will also be provided during a stabilization period. This will help the staff to gain insight to triggers prior to the tenant experiencing any triggers
<ul style="list-style-type: none">• CC demonstrates a willingness to aid tenants with the above categories by clearly explaining how they will assist (detailed explanations offered on all topics)• CC will provide a holistic, comprehensive approach in connecting tenants with needed services or skill development support, either directly or by referral
<ul style="list-style-type: none">• CC will provide case management services through TCM as appropriate for tenants interested in receiving case management services. In situations in which a tenant is requesting a different agency case management provider, CC will assist the tenant in referring for services
<ul style="list-style-type: none">• CC provided a detailed description of harm reduction services that will be provided to HFSSS tenants to include but not limited to cooking classes,

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EVALUATOR NAME: Tia Bolduc

EVALUATOR DEPARTMENT: DHHS - OMS

parenting classes. Support groups, game/movie night, and group outings.
HFSSS staff will also link tenants to free/low-cost community-based activities

- CC currently collaborates with Bangor Public Health who provides education and training in the use of Narcan. If awarded the HFSSS contract, they will implement a plan to also train/educate HFSSS tenants in the use
- CC holds current collaborations with Needle Point Sanctuary and Wabanaki Public Health, referring individuals with their Syringe Service Program. This program will also be extended to HFSSS tenants

Part IV, Section IV. Cost Proposal and Budget Narrative

-

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DATE: 4.3.2025 and 4.4.2025

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EVALUATOR DEPARTMENT: Office of Behavioral Health

Individual Evaluator Comments:

Part IV. Section II. Organizational Qualification and Experience	
1. Overview of the Organization	
<ul style="list-style-type: none">• Non-profit mental health and social service agency with a mission of providing quality, timely, and effective community-based services to promote health, well-being and independence of individuals and families.• Indicated they have held national accreditation through the Council on Accreditation for Children and Families (COA) since 2005 and was voted as one of the Best Places to Work in Maine for six (6) years in a row (specific years not indicated).• Stated they have Maine licensure for “child placing, mental health, residential, emergency shelter, and substance abuse treatment”.• Stated they were established in 1995, with services provided through established service contracts with the Department, Maine State Housing Authority, HUD, and the Administration for Children and Families that oversees the Federal Youth Services Bureau.• Stated they have a MaineCare Provider Agreement to provide services, including Targeted Case Management.• Indicated the services that speak to their ability to provide services as an HFSSS Vendor are their transitional and permanent supportive housing program and their Targeted Case Management program.• Stated they were awarded the Youth Homeless Continuum of Care contract from the Department for central and northern Maine to operate the Shaw House program, serving as an umbrella for youth and young adult homeless services (up to 21). The population served includes those who have experienced both episodic and chronic homelessness.• Stated they are an established Maine Continuum of Care (CoC) Homeless Management Information System (HMIS) participating agency and stated they have demonstrated compliance with HMIS data entry procedures.• Stated they have direct care experience and expertise with supporting individuals in skill development and securing/maintaining housing.	
Clinical Expertise <ul style="list-style-type: none">• Stated they have provided Targeted Case Management (TCM) since 2007.• Indicated the Bangor Area Homeless Shelter has been a consistent referral source, and their close collaboration has resulted in them providing case management services on site at the Shelter.	

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- Stated they also receive adult case management referrals from the City of Bangor's General Assistance Program, with many referred individuals experiencing chronic homelessness.
- Stated up to 40% of their adult TCM program may consist of individuals who are experiencing chronic homelessness, at any given time.

Experiencing providing services in a 24/7/365 setting

- Stated they have managed residential programs since 1998; and continue to operate a residential program in the Bangor area called the Mason Place, an independent living program for young people up to 21 who are experiencing homelessness.
- Indicated each residential program managed by them have a required 24/7/365 staffing schedule and stated they are thus familiar with effective staffing configurations and scheduling structures to provide 24/7/365 services.

Experiencing providing health and behavioral health services to population

- Stated they have provided the following services to individuals experiencing chronic homelessness, including: outpatient mental health clinic; home-based mental health and behavioral support; supportive housing program; residential independent living program; treatment foster care program; and Shaw House Program, which provides day program, emergency shelter and street outreach, in addition to its housing program.

Knowledge of community-based resources in service area, and experience navigating such

- Stated they collaborate with multiple service providers to connect individuals with services and have expertise in community-based resources and benefit programs, including eligibility criteria and referral processes; and work alongside individuals to navigate available programs/services.
- Bidder included a non-exhaustive list of some collaborations they 'often draw upon', with a description on "service provided" next to each indicated organization, they are as follows: City of Bango General Assistance; Penquis Cap; Wabanaki Public Health; Needlepoint Sanctuary; Partners for Peace; Brick Church; Barn; Bangor Public Health; PCHC: Rape Response; Career Center; EMDC; Bangor Learning Center; Mabel Wadsworth; Unlimited Solutions Clubhouse; Eastern Area Agency on Aging; Community Health and Counseling Services; The Together Place; and Pine Tree Legal Services.

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Recruitment and retention policies, and plans to ensure optimal staffing at HF Rental Homes

- Stated they currently maintain a staffing level of one hundred thirty-one (131) part-time and ninety-five (95) full-time staff.
- For recruitment and retention, indicated they utilize: a Prospector Program, where a \$500 bonus is provided to current employees that recruit a new staff member; professional marketing through a contract with Sutherland Weston to assist with their marketing efforts; competitive wages, indicating they keep on top of current wage scales for positions; benefits, with fully paid dental premiums, near fully-paid health insurance and 401k match; wage increase system, based on longevity; collaboration with colleges for speaking engagements, and they have connections with the UMaine Social Work facility allowing them to utilize class presentations to educate students on social work-related issues, including homelessness and supportive housing services, and outreach to students regarding open positions; and supportive supervision, with Bidder stating supervision garners the highest scores for their annual employee surveys, as it pertains to job satisfaction.

Common barriers to maintaining permanent housing and experience helping to mitigate barriers

- Provided a table indicating common barriers to housing maintenance and their experience mitigating each listed common barrier.
- The common barriers indicated are: navigating housing subsidy/voucher programs; locating a safe, affordable housing unit that meets subsidy/voucher requirements; mental health and/or substance use challenges that may jeopardize housing maintenance efforts; abiding by lease requirements, with example provided of allowing others to move into the apartment.
- Bidder's experience mitigating their indicated common barriers to maintaining housing are: providing one-to-one support with subsidy/voucher application process, "from beginning to end"; providing education to landlords/property managers to combat stigma, building upon a network of landlords/property managers; developing relationships with landlords and property managers that rent to individuals in their programs, with case managers providing their phone number to landlords, encouraging them to call with any concerns – allowing for intervention should any tenant-related issues arise; and establishing trusting relationships with individuals and use of Motivational Interviewing to help ensure adherence to lease requirements.

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Experiencing helping navigate maintenance of benefits, including health insurance and housing assistance payment eligibility

- Stated they have supported individuals with accessing benefits, including health insurance, housing assistance, and social security disability for the past three decades through their TCM and homeless youth services programs.

Experience evaluating HRSN and incorporating such into service plan development

- Stated they have three (3) decades of experience evaluating HRSN through assessments; and they create a service plan in partnership with the individual within the first thirty (30) days, with service plan updated every ninety (90) days.
- Stated they re-assess throughout the individual's participation in the program, as needed, and to assist with assessing progress.
- Response to experience evaluating HRSN lacked detail.

Experience with effective interagency coordination

- Bidder referred to the chart they provided regarding their knowledge of community-based resources in their service area, that indicated some organizations they collaborative with, including service provided by each organization.
- Stated their staff, including their Director of Homeless Services and their Program Director that oversees TCM, are often "called upon to speak at college classes due to their extensive knowledge about the service delivery system".
- Stated their staff also serve as active participants on statewide and regional committees/networking forums, allowing them to stay up to date on new programs, rules and regulations, and "to advocate for greater access".
- Indicated an example of their active involvement "is the extent of the role of the Director of Homeless Services played in the creation of the statewide Coordinated Entry System" (further description of exact role was not provided).

Experience working on-site in affordable housing developments

- Stated they have extensive experience providing site-based support to young adults experiencing homelessness that are residing in scattered-site apartments through their housing program.
- Stated they provide on-site support to tenants within their apartment, and support includes, but is not limited to: helping tenants get settled; maintaining their apartment; assistance with navigating any day-to-day challenges that may arise; assisting tenants with reaching their goals; mediating any conflicts that

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may arise with neighbors; and providing assisting with facilitating effective communication between the tenant and the landlord.

Experience working collaboratively with landlords and property managers

- Stated they have extensive experience partnering with landlords and property managers and referred to their response to A.6 of the Organization Qualifications and Experience Form.
- Stated their relationships with landlords and property managers have resulted in landlords renting to participants, despite concerns they may have from the outset, as they feel assured that they can rely on Bidder's staff to assist with addressing any issues as they arise.
- Stated they have heard from landlords that they prefer to rent to individuals connected with the Bidder's organization as they trust the additional assistance from Bidder's staff to assist with preventing tenant-related issues and help with addressing issues when they arise.

Experience collaborating and partnering with other providers, ensuring services are provided on-site or in the community

- Stated they have three (3) decades of experience with building reliable collaborations within the community, and they have a network of service providers they can refer to and work alongside to explore strategies for modifying service delivery to better meet individual needs (e.g., streamlining of referral services and on-site service provision).
- Referred to their Shaw House program as an example of bringing providers on-site for service provision, with the intent of improving access and increasing the likelihood of participation.
- Stated examples of services they brought on-site include: harm reduction services; mental health counseling; substance use counseling; "partner violence individual and group support"; and support for survivors of trafficking.

Approach to handling core administrative functions (financial, IT, and compliance)

- For financial administrative functioning – stated they have a financial procedures manual to ensure financial accountability, including written procedures for various finance-related processes; and they have an accounting program to track and manage each funding separately, with ability to report on each funding source, track actual outlays against budget projections per program, and ensure their payroll costs are assigned to the appropriate program.

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- For financial - Stated their accounting system is accrual based, and they have an external audit that assesses their accounting practices, prepare financial statements, prepare specific required financial statements and apply standards in a consistent manner to all accounting practices; with the Executive Director overseeing the finance team, and Board of Directors responsible for fiscal performance and financial monitoring.
- For IT – Stated they have contract programs that interact with the Department’s secured network, including the Family Visitation Program and Early Childhood Consultation Program; and indicated they are adept at ensuring their agency network infrastructure allows for connectivity between their agency and Department technology systems, and ensuring that their IT requirements align with Department IT requirements.
- For IT – stated they use AES-256 strength encryption; have policies, and train all staff on HIPAA and confidentiality, with supervisors responsible for ensuring compliance with HIPAA and confidentiality and a dedicated HIPAA privacy officer position in the agency.
- For IT – stated they use Credible for their electronic medical record, which will also be used for HFSSS, with HFSSS staff required to enter service documentation in the system within twenty-four (24) hours. Bidder also described their processes upon receiving an award for a service contract.
- Stated their Director of Quality Improvement partners with their management team for maintenance of a working Quality Improvement Plan, where performance data is collected for each program semi-annually and an evaluation report is provided to the management team for performance assessment of each program.
- Stated each Program Director, including the Program Director for HFSSS, serves on the agency management team, and upon contract award they will modify their Quality Improvement Plan to capture the HFSSS-required performance outcomes and deliverables, and will fold HFSSS into their current evaluation process.
- For compliance – stated their Director of Quality Improvement (DQI) is a member of their management team and works alongside Program Directors to monitor compliance with licensing requirements through conducting of in-house audits and ongoing monitoring.
- DQI leads communication with licensing staff to arrange site visits, and ensures staff have sufficient information prior to, during and after each site visit.
- Indicated, when a corrective action plan is needed, their DQI partners with the Program Director and Executive Director to create a plan and communicate

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correction needs to licensing, with all required follow up reports submitted, as necessary.

- Stated they contract with Berry Dunn for their external audits.
- Stated they monitor compliance with each service contract, and their DQI reports compliance findings to their management team semi-annually and works alongside other team members to change oversight and/or program practices to address any deficiency areas.

Examples of core administrative procedural improvements over the last three (3) years

- Stated they developed workflows that allow administrative employees to enter information into the administrative care organization's approval system and avoid double data entry by direct care employees.
- Stated, for their grant to aid individuals at risk of or experiencing homelessness, they shifted their purchasing procedures to increase efficiency and be less burdensome in getting support to those in need.
- Stated they implemented a multistep process to ensure documentation entered into a Department database is accurate, and one of the steps in the process is utilization of a software program they built to review data for duplication errors which has saved hours of staff time each month.
- Stated they have updated/improved their agency's electronic medical record and they have updated their payroll system to be more efficient and user friendly.

Experience raising private funds to cover expenses exceeding publicly funded operating budgets

- Stated they contract with a professional grant proposal writer who has two (2) decades of grant/proposal writing experience in order to identify and pursue potential funding opportunities. Also indicated their freelance grant writer was previously employed by the agency for twenty-seven (27) years and is very familiar with their organization.
- Unclear to this evaluator if applying for grant projects is inclusive of private funding opportunities.

Project 1:

- Referred to their TCM provision, which they have been providing to adults since 2007; and indicated up to forty percent (40%) of their program participants, at any given time, have experienced or are currently experiencing chronic homelessness.

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- Stated the work alongside the Shelter Plus Care Housing Specialist through Bangor Public Health and Community Services to meet adult case management needs and the Specialist often refers individuals to their TCM program, including individuals that are experiencing chronic homelessness.

Project 2:

- Referred to their operation of a transitional and permanent housing program which provides access to scattered-site transitional housing apartments and rental assistance for permanent housing to young adults.
- Stated their programming includes a Youth Transition Coordinator that works alongside each participant to support them with reaching their goals and maintaining housing.
- Bidder included a recipient of their Supportive Housing Services for the "Reference Contact Person", and indicated permission was provided by the individual to utilize them as a reference.

Project 3:

- Referred to their work developing a housing support program, where they were awarded a HUD Youth Homelessness Demonstration Project (YHDP TH/RRH) in 2021 for Transitional/Rapid-rehousing, which Bidder indicated was also the first YHDP TH/RRH grant in Maine.
- Stated after award receipt, they partnered with the Maine State Housing Authority (MSHA), Youth Advisory Board, HUD, and the southern Maine YHDP recipient to create a robust YHDP housing program across the state.
- Stated their "Reference Contact Person" is the YHDP Project Lead for Preble St, who received the same HUD grant to serve the southern part of the state and can attest to Bidder's experience and expertise around developing a housing support program.

2. Organizational Chart

- Provided, and specifically delineates the anticipated project team for HFSSS, aside from the Homeless Services Director who would oversee HFSSS, Bidder indicated additional staff/positions would include: a Housing Stabilization Program Manager; a Housing Stabilization Coordinator; a Housing Permanency Specialist; and a Housing Engagement Specialist.

3. Litigation

- Bidder wrote "NONE".

Part IV, Section III. Proposed Services

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1. Services to be Provided
Part II
A. Administrative Requirement
<ul style="list-style-type: none">• Stated they will provide HFSSS with the governing principles of Motivational Interviewing (MI) and the Wraparound Service Delivery model, both of which the Bidder states are grounded in a person-centered, strength-based approach.• Bidder provided a thorough detailed description of MI and the Wraparound Service Delivery model and included a table illustrating an example “MI based conversation” as compared to a “Non-MI based conversation”. The provided “MI based conversation” example demonstrated understanding of a person-centered, strengths-based approach to service delivery and engagement.• Stated their supervisors have all attended Stephen Andrew’s advanced training on MI and they have incorporated MI into their agency training curriculum, with training provided internally by their Clinical director.• Stated HFSSS staff will receive MI training during their new hire orientation and will complete refresher training on an ongoing basis.• Stated their program supervisor will utilize individual and group staff supervision to redirect focus onto MI principles, and will present alternative approaches, as needed, to assist staff in ensuring effectiveness in their approach.• Stated they have integrated the principles of Wraparound, as described by the National Wraparound Initiative, into their service delivery with all populations.• Stated they plan to use the intensive supportive Wraparound team approach in situations where an individual’s mental health needs are “substantial and when the consumer is interested in this higher level of care coordination and support.”• Listed the principles of Wraparound that they will integrate into their HFSSS service delivery approach, with a description included for each principle: voice and choice; team based; natural supports; collaboration; community-based; culturally competent; individualized; strengths-based; unconditional; and outcome based.• Stated all HFSSS staff will be trained on Wraparound during their new hire orientation and will also receive ongoing training on Wraparound.
<ul style="list-style-type: none">• Stated they currently hold several contracts with the Department.• Indicated they will enter into a standard service contract with the Department six (6) months prior to the Property becoming available for tenancy, or at a time

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<p>identified by the Department, and will comply with all pre-contract requirements when selected as part of a Housing First Team as an HFSSS service provider.</p> <ul style="list-style-type: none">• Bidder stated they do not plan on utilizing subcontractors/consultants for HFSSS, but should that decision change, they will provide the required description regarding how they will ensure oversight for subcontractors/consultants.
<ul style="list-style-type: none">• Referred to prior experience collaborating and taking direction from the Department and indicated they will use their current approach of “how can we be helpful?”, and “coming to the table as a team player” for HFSSS collaboration and direction-taking from the Department.
<ul style="list-style-type: none">• Provided a copy of their MaineCare Provider Agreement.
<ul style="list-style-type: none">• A current CoC HMIS participating agency.
<ul style="list-style-type: none">• Provided documentation illustrating enrollment as a current TCM agency.
<ul style="list-style-type: none">• Stated they have created an expansive network of collaborations over the last three (3) decades, with partnerships that allow for efficient referrals and seamless access to care.• Stated they are members of various statewide and local networking committees, with new collaborations readily formed and their list of collaborators constantly growing.• Stated they don’t currently hold any formal MOUs with providers but do partner with other organizations to meet consumer needs.• Included a non-exhaustive list of providers that they often partner with to meet consumer needs, including the service provided for each organization listed (same list as provided for the Organization Qualifications and Experience section).• Stated, upon entering into contract as an HFSSS service provider, they will meet with the listed partner organizations to discuss ways they can assist with meeting HFSSS consumer needs.• Stated they will also explore additional collaborations that could provide services to benefit HFSSS participants (specific additional collaborations not described).• It is unclear whether Bidder intends on establishing and maintaining a formal relationship (e.g., contract or MOU) with other providers to deliver services beyond HFSSS’ scope.
<ul style="list-style-type: none">• Stated they understand they will be required to provide treatment oversight and care coordination with all providers in the resulting service area that support HFSSSS tenants.

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<ul style="list-style-type: none">• Indicated they will provide treatment oversight and care coordination through incorporation of the Wraparound model described in response to Part II A. 1.
<ul style="list-style-type: none">• Upon award notification, will follow any subsequent instructions from the Department in a timely and efficient manner to ensure HFSSS implementation readiness for when the Property is ready for occupancy.• Stated communication will be key, and they will attend all scheduled meetings with the Department, stay updated on issued communications regarding HFSSS, and will follow Department lead for each development stage.• Stated plan to begin preparatory work for HFSSS as soon as possible, despite occupancy potentially not occurring for months and/or years after contract initiation. Provided an example that, until an occupancy date is announced, they will not hire staff, however, they will begin development of a recruitment strategy ahead of time.• Stated communication and pre-planning for program development and implementation will be their core strategy for ensuring readiness.
<ul style="list-style-type: none">• Referred to prior experience on ensuring readiness for start-up through implementation for state and federal contracts.• Stated they will collaborate with the Department to discuss strategy to ensure HFSSSS readiness upon tenants' residency.• Provided their anticipated strategy to hire, train staff and begin outreach for HFSSS, this includes: creation of a program development group upon award notification; staff recruitment plan implementation ninety (90) days prior to residency or HFSSS start up; interviewing to begin within seventy-five (75) days of program start-up; job offers to be provided as early as sixty (60) days prior to program start up, with start date to occur two (2) weeks prior to program start-up; new hire orientation two (2) weeks prior to start-up, inclusive of "in-seat training and job shadowing in established programs with a similar target population"; begin weekly program staff meetings during the 2-week start up period by the Program Director (current employee); and they will join the Department and Housing First Team for identification of outreach strategies and provision of implementation assistance.• Stated, with Department approval, they will also reach out to their network of connections/collaborative partners to engage with to provide outreach on the program.
<ul style="list-style-type: none">• Stated, upon award, they will review agency requirements outlined in the contract, expectations identified in the program manual, and any additional Department-identified expectations and will incorporate all requirements in their program development.

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- Stated, for each requirement, they will identify items that need to be tracked to ensure compliance and will identify a mechanism to run reports for compliance monitoring of each requirement category. Stated that this delineation of requirements and mechanism identification will be completed during their program development phase of program start-up.

B. Housing First Support and Stabilization Services (HFSSS)

- Stated they will provide HFSSSS on site at the Property 24/7/365.
- Response lacked detail as to how the vendor will ensure all HFSSS are provided on site, 24/7/365.
- Stated they are anticipating four (4) positions for HFSSS staff: a Housing Stabilization Program Manager; Housing Stabilization Coordinator (HSC); Housing Permanency Specialist (HPS); and a Housing Engagement Specialist (HES).
- Plans to provide preference to HES applicants that have lived experience with housing insecurity, mental illness, substance use and/or other similar experiences.
- For the Housing Permanency Specialist (HPS) position, plans to include a position requirement that the HPS have lived experience with housing insecurity, mental illness, substance use and/or similar.
- Stated the HSC positions will require completion of a four (4) year degree in social services, or a related field.
- A description of the roles and duties for each position was also provided.
- Stated they estimate 24/7/365 coverage using the four (4) anticipated positions would require between 9.5 to 10.5 FTEs.
- Stated that they currently operate programs using a 24-hour on-site service delivery model and their alternative programs will be an additional resource to pull from as/if needed for ensuring coverage.
- Plans to use Motivational Interviewing (MI) and Wraparound principles, as described in response to Part II. A.1; and indicated Wraparound principles include use of a person-centered, strengths-based approach.
- Stated they use a trauma-informed approach with transparency, ensuring individuals know what to expect, and what is expected of them, in order to make an appropriate personal assessment on whether the service is safe option for them to participate in.
- Stated their approach ensures individuals are “in the driver’s seat” for reassurance of being in control of their involvement in service participation; with further detail provided demonstrating an understanding of the person-centered approach and use of the trauma-informed informed approach.

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- Stated HFSSS staff will work alongside tenants as they navigate daily life choices, will provide tools to assist with gaining momentum and staff will understand that decisions for tenants “are not as simple as they are for those who may be viewing the situation from a place of greater privilege”.
- Stated their supervisory infrastructure includes a Clinical Director who will provide clinical consultation, and stated their Clinical Director holds LCSW and LADC licensure, ensuring capacity to provide staff training on clinical topics such as trauma, substance use, MI, Wraparound and mental health. Stated, their Clinical Director is also on their Management Team, ensuring an opportunity to make sure all HFSSS policies, procedures and day-to-day decision making are trauma informed.

- Plans to use the Rent Smart curriculum and other curriculums designed to promote independent living skills and assist with learning strategies “to be a responsible tenant”, thus assisting with ensuring housing maintenance and reaching life goals.
- Stated, after building a trusting relationship with tenants, their HFSS staff will engage each tenant in conversation to assess needs, explore interest in working with HFSSS staff and provide information on community-based resources available to assist the tenant in their journey, including assisting the tenant with accessing indicated service(s).
- Stated their Housing Permanency Specialist (HPS) role will provide scaffolded and/or hands-on support to individuals in order to master “foundational skills that will directly contribute to their success with maintaining housing permanency”.
- Stated alternatively, or in conjunction with HPS work, individuals that identify a need for formalized intervention will be assisted by the Housing Stabilization Coordinator to identify the scope of intervention that most meets the consumer’s objective.

- Stated they will create programmatic procedures and policy guidelines to guide HFSSS decision making, program operations and monitoring.
- Stated their program procedures and policy guidelines will be created upon contract execution with the Department and/or when requested by the Department.
- Stated their Housing Stabilization Program Manager will provide supervision and oversight for the Housing Stabilization Coordinator, Housing Permanency Specialists and Housing Engagement Specialists; with the Housing Stabilization Program Manager supervised by their Homeless Services Director.

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<ul style="list-style-type: none">• Stated their Homeless Services Director “is a long-standing employee” who is highly familiar with program oversight, and their Executive Director oversees the Homeless Services Director.
<ul style="list-style-type: none">• Reiterated their current national accreditation from the Council of Accreditation for Children and Families (COA).• Stated a component of the COA accreditation process requires ensuring policies and procedures protect the rights of individuals receiving services and requires client/consumer feedback be integrated into program evaluation and practices.• Stated many of their board members and management team staff also bring personal experience to the table and are “highly dedicated to ensuring that the rights of individuals are protected and that inequalities are addressed to pave the way to greater opportunity.”• Stated HFSSS staff will be trained to advocate appropriately advocate for tenants and will assist tenants with navigating barriers that are interfering with them reaching their goals.
<ul style="list-style-type: none">• Stated HFSSS staff will utilize current collaborations, create new collaborations and create a seamless and efficient referral process for services tenants may need, including but not limited to, health care, substance use treatment, legal services, harm reduction services and mental health care.• Stated HFSSS staff will take an active role to proactively ensure timely availability of services by meeting with current and potential new service providers to explain the HFSSS program and solicit support to join their efforts in supporting the population to create an efficient referral system, and partner with their team to explore strategies on decreasing service wait times.
C. Available HFSSS for Tenants
<ul style="list-style-type: none">• Stated they understand that not all tenants will be interested in HFSSS.• Plans to have HFSSS staff meet with tenants when they move in and discuss availability of HFSSS, including emphasizing that the service is voluntary.• Stated their staff will obtain consent in writing on a consent to services form prior to service delivery; and tenants that decline HFSSS will be reassured that they can reach out at any time should they change their mind.• Stated they are hopeful that once relationship building with HFSSS staff begins (through informal daily encounters) that tenants “may begin to test the waters and lean into the support that is offered”.
<ul style="list-style-type: none">• Stated for tenants that consent to HFSSS, they will use a different approach for each tenant, dependent on tenant’s needs and interests.

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RFP TITLE: PQVL for Housing First Support and Stabilization Services

BIDDER NAME: Community Care

DATE: 4.3.2025 and 4.4.2025

EVALUATOR NAME: Anna Ko

EVALUATOR DEPARTMENT: Office of Behavioral Health

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| <ul style="list-style-type: none">• Stated tenants with complex mental health or substance use treatment needs and/or are experiencing “a significant degree of destabilization” will be provided with “a more intense service delivery approach”, “including the possible implementation of the Wraparound model”.• Stated, “For those tenants who require a higher level of support services, HFSSS• will work alongside the tenant to create a service plan and individual crisis plan.” It is unclear to this evaluator if this means individual service plans and individual crisis plans will only be developed with “tenants who require a higher level of support services”.• Stated HFSSS staff will become aware of triggers and reactions for each tenant and can assist in intervening prior to the individual entering “a crisis state”.• Plan to have HFSSS staff consist of dedicated, support staff that tenants can lean on to help avoid crisis states and staff will be there for the tenants should they enter crisis, to ensure “they are not going it alone”.• Stated service plans and individual crisis plans will be completed in partnership with tenants, signed by tenants and will be part of the tenant’s chart.• Plans to use Credible, their electronic medical record software, for documentation of each service plan and crisis plan. |
| <ul style="list-style-type: none">• Plans to provide a holistic, comprehensive approach for connecting tenants with needed services or skill development support, directly or through referral.• Stated HFSSS staff will link tenants with MaineCare services through assisting the tenant with making a referral phone call and/or filling out any required referral form.• Stated they are a TCM provider and will provide TCM and/or Behavioral Health/Community Integration services on-site for tenants interested in working with the Bidder for those services.• Stated HFSSS staff will provide hands-on assistance with completing necessary applications and making necessary calls for accessing social services and benefits, as opposed to just providing the tenant with an application or providing tenant with a phone number to contact.• Stated all members of their HFSSS team will be trained in SOAR and able to assist tenants with accessing SSI and SSDI programs.• Stated, when helping with accessing social security disability, they will rely on their existing collaboration with a law firm to aid the individual in case of denial. |

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- For tenant/landlord communication support – plans to have HFSSS staff offer assistance to the tenant, including offering to participate on landlord communications to assist with navigating through challenging conversations.
- For skill development – plans to have HFSSS staff utilize the Rent Smart curriculum and other skill development curriculums to assist with strengthening skills around budgeting/financial management; money management; income management training; and other independent living skill areas, including time management and organization skills.
- As it pertains to skill development education, plans to help connect tenants to a community-based representative payee, if desired.
- For nutritional services/counseling – plans to have HFSSS staff draw upon their connections with SNAP and Bangor Public Health to ensure availability of basic nutritional material, organization of on-site groups for tenants focused on nutritional counseling, and they will link interested tenants to off-site nutritional counseling services.
- For family reunification support – plans to have HFSSS staff draw upon their current connections with family reunification programs, family therapy programs and parenting education programs for tenants seeking family reunification, parenting support or education.
- For employment/vocational support – plans to have HFSSS staff “enlist the support of the Maine Health Employment Coaching Program” for job searching, job retention, interview preparation and other vocational supports (including volunteering); and HFSSS staff will also provide support to tenants in these areas as well.
- Regarding connecting tenants to volunteer opportunities – plans to have HFSSS staff support tenants interested in volunteering with opportunities within the community and within the HFSSS program.
- Stated HFSSS staff will maintain 24/7/365 presence on-site at the Housing First Property and will provide support services.
- For new tenant orientation and move-in assistance – plans to have HFSSS staff meet with each new tenant to explain HFSSS and explore tenant’s interest in support services. HFSSS staff will also assist new tenants with moving in and settling into their apartment, to the extend desired by each tenant.
- For mediation services for resident disputes – plans to train HFSSS staff in conflict resolution and staff will use those skills to assist residents with resolving disputes.
- For peer support services – plans to have HFSSS staff link interested tenants to formal peer support programs and plans to also explore ways in which tenants can offer peer support services to one another.

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| <ul style="list-style-type: none">• For crisis intervention – upon entering into contract, plans to have their Housing Stabilization Program Manager meet with the local crisis provider to discuss the Housing First program and strategize on prevention and intervention strategies that can be used once residency occurs.• For motivational interviewing – referred reader to their response to Part II. A. I of their proposal where it was indicated staff would be trained in motivational interviewing and will be utilizing such in all service provision and interactions.• For ensuring safety – plans to work alongside other Housing First team members to create detailed procedures that govern practices geared towards ensuring safety within the Housing First Property.• Plans to utilize an “Open Table Model” for accessing support. Stated they have been operating the Open Table Model, a promising practice that includes four to six (4-6) volunteers from the community who come together to support a consumer, with the volunteers referred to as “friends” in the model. Stated the model includes weekly meetings with the consumer where support is offered, with ‘friends’ connecting with the consumer outside of the meeting to assist, as desired. Bidder also provided an example of how this may look for a consumer seeking assistance with applying for jobs, where one of the ‘friends’ from the team would make plans with the consumer to pick them up, get coffee, then create a game plan on their job search plans for the day, and will also drive the consumer around to businesses and offer assistance with completing applications. |
| <ul style="list-style-type: none">• Plans to provide case management services through TCM, as appropriate, for tenants interested in receiving case management from the agency.• Should a tenant request a different agency for case management service provision, they will assist the tenant with referring for services outside of the agency. |
| <ul style="list-style-type: none">• Plans to “create a culture of healthy living and a culture that promotes substance use recovery within the housing complex”, with the plan to accomplish such through providing opportunities to participate in a wide range of activities that promote healthy living.• Plans to have HFSSS staff solicit feedback from tenants on their interests and incorporate groups that are geared toward those interests.• Plans to have activities facilitated by HFSSS staff, community members, and/or representatives from various organizations.• Plans to encourage tenants to facilitate activities to share their skills/knowledge; with tenants playing an instrumental role in creation of the calendar of activities. |

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- Stated activities may include but will not be limited to: cooking classes/menu planning to be offered by SNAP; on-site exercise classes; parenting classes; support groups on various topics; game/movie nights; groups that teach skills in hobby-related areas (e.g., quilting, painting and crocheting); and group outings.
- In addition to ensuring access to “healthy activities” on-site, plans to have HFSSS staff also link tenants with free or low-cost community-based activities, including linking tenants to transportation resources, as needed, in order to access off-site community-based activities.
- Plans to have HFSSS staff collaborate with tenants to collect feedback on times that would work best for them for scheduling purposes and will adjust times accordingly to meet tenants’ changing needs. With an example provided where, should there be a scheduled activity with good turnout where other tenants are unable to attend due to their schedule, HFSSS staff would ensure the next time the activity is scheduled will be at a time that meets the needs of those unable to attend during the first iteration of the activity.
- Demonstrated an understanding of the importance of creating opportunities for members to come together in order to facilitate creation of a pro-social, supportive culture founded on “healthy norms”; and indicated the intent to create a culture, in partnership with tenants, that provides a safe and support environment where individuals feel a sense of belong and support in order to thrive toward desired goals.
- Stated they currently collaborate with Bangor Public Health to provide Narcan and education on its use to their employees. Upon contract award, Bidder will meet with Bangor Public Health to discuss HFSSS and enlist their support with providing on-site education to tenants on overdose, drug poisoning and instructions on how to use Narcan, while also distributing Narcan to HFSSS staff and tenants, and inclusion of other harm reduction items such as medication locked boxes.
- Unclear if Bidder intends on ensuring 24/7/365 naloxone accessibility on-site at the Housing First Property, in addition to distribution of Narcan to staff and tenants.
- As it pertains to Syringe Service Program (SSP) referrals, stated they currently hold collaborations with Needle Point Sanctuary and Wabanaki Public Health to refer individuals to their SSPs. Stated upon contract award, they will meet with Need Point Sanctuary and Wabanaki Public Health to explore ability to provide SSP services on-site within the Housing First Property to ensure ease of access for tenants.

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<i>Part IV, Section IV. Cost Proposal and Budget Narrative</i>

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| <ul style="list-style-type: none">• Provided, signed by the Executive Director. |
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EVALUATOR NAME: Michael Labua

EVALUATOR DEPARTMENT: DHHS-OBH

Individual Evaluator Comments:

I Part IV. Section II. Organizational Qualification and Experience	
1. Overview of the Organization	
<ul style="list-style-type: none">• Mission is to provide quality community-based services that are timely and effective promoting the health, well-being, and independence of individuals and families.• 20 consecutive years of accreditation from the Council on Accreditation for Children and Families (COA)• P - Holds several licenses for service provision in many categories including Targeted Case Management.• Providing Targeted Case Management since 2007, many clients referred by the Bangor Area Homeless Shelter as well as the Bangor General Assistance Program.• P - Successful in engaging with chronically homeless persons and assisting in obtaining housing.• Experienced supporting individuals in skill development and obtaining and maintaining housing.• Contracts with DHHS, MaineHousing, HUD, and other federal programs to provide services.• Provides services to adults, children, and families.• P - Services are provided in rural and other areas of the State.• Operates a homeless program for youth and young adults.• Experienced with HMIS utilization and adheres to procedures.• P - Has managed residential programs since 1998, including provision of services 24/7/365• Experienced developing effective staffing and scheduling models for 24/7/365 residential programs.• Provides other behavioral health services: an outpatient mental health clinic, supportive housing program, residential independent living program, treatment foster care program, emergency shelter, outreach• Provides adequate staff training and supervision• Listed approx. 20 collaborative organizations to meet the needs of the individuals served. Broad knowledge of what these agencies provide and how they assist individuals with securing the services.• Currently has 131 part-time and 95 full-time staff.• Strategies for staff recruitment and retention are cash bonuses to current employees who recruit a new staff member, marketing consultant to increase	

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visibility, competitive wages, generous benefits, longevity pay increases, outreach to colleges students, quality supervision.

- P - 4 barriers to maintaining housing and mitigation efforts were described:
 - Complicated housing subsidy application process – mitigated by fully educating staff on the process and engaging in 1:1 support of individuals throughout the process.
 - Identifying safe appropriate housing that accepts tenant-based housing subsidies – mitigated by educating landlords and property managers to remove stigma of housing subsidies and homelessness
 - Chronically homeless individuals may be completely unconnected to services which can take time to reestablish. During this time, individuals may make decisions that jeopardize housing plans – mitigated by establishing close communications with all entities assisting the individual.
 - Adhering to leases (e.g. unauthorized household members) – mitigated by establishing trusting relationships with individuals and using motivational interviewing to help individuals reach other objectives (helping a homeless friend) without jeopardizing their own housing.
- Decades of experience assisting individuals with accessing health insurance, housing assistance, social security disability.
- Utilizes a variety of assessments for evaluating Health Related Social Needs to drive creation of a service plan with the consumer. Needs are reassessed at least every 3 months.
- Provides on-site support and stabilization services for young adults moving into individual apartments, including adjusting to the structure and freedom provided by stable permanent housing.
- P - Builds reliable collaborations and networks of service providers to refer to and collaborate with. Encourages community providers to provide service on-site or in the community rather than having individuals go to the provider.
- P - Approach to financial accounting: detailed financial procedures manual, tracking and managing funding sources independently, adherence to the Maine Uniform Accounting and Auditing Practices for Community Agencies, external audits including many statements of Financial Accounting Standards, separation of oversight of the finance and fiscal performance and monitoring teams between the Executive Director and the Board of Directors.
- Approach to Information technology: currently utilizes Department software to provide programmatic and consumer data, maintains HIPAA compliance policies and procedures, trains staff on confidentiality, has policies for

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<p>infractions of policies, utilizes an electronic medical record (Credible) that can be utilized for HFSSS, use data for decision making.</p> <ul style="list-style-type: none">• Approach to compliance: Dedicated Quality Improvement Director to monitor compliance with licensing requirements including internal audits and resolution of identified deficiencies.• Recent core administrative procedure improvements are:<ul style="list-style-type: none">• Maximizing direct care staff time in the field by developing workflows to eliminate duplicative work.• Simplifying purchasing procedures for client assistance fund.• Implemented a process for ensuring timely accurate HMIS data entry.• Updating and improving the electronic medical record (did not elaborate)• Updating the payroll system to be more efficient and user friendly (did not elaborate)• Contracts with a grant proposal writer to pursue potential funding opportunities but did not specifically cite experience in raising private funds to cover expenses that exceed publicly funded operating budgets.• N - Three projects reflecting experience and expertise in performing relevant functions:<ol style="list-style-type: none">1. Bangor Public Health and Community Services Rental Assistance Program: the bidder's Targeted Case Managers collaborate with the City's Shelter Plus Care Housing Specialist (project began in 2007)2. Supportive Housing recipient of services: provides access to traditional housing apartments and permanent rental assistance along with support from a Youth Transition Coordinator.3. Preble Street: partnered with the Maine State Housing Authority (MSHA), Youth Advisory Board, HUD, and the southern Maine YHDP recipient to create a robust YHDP housing program across the state.
2. Organizational Chart
<ul style="list-style-type: none">• Provided an organizational chart that did not clearly identify the project team proposed to meet the requirements of this RFP.
3. Litigation
<ul style="list-style-type: none">• Reports no litigation.

Part IV, Section III. Proposed Services
1. Services to be Provided
Part II
A. Administrative Requirement
<ul style="list-style-type: none">• P- Utilization of Motivational Interviewing

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<ul style="list-style-type: none">• Individual initiates when it is time for change• Service provider endeavors to activate the individuals own motivation and desire for change.• Draw attention to individual's positive motives and resources that may offer options to bring about positive resolutions to dilemmas. <ul style="list-style-type: none">• P - Utilization of Wraparound Service Delivery Model - implemented in situations where the individual's mental health needs are substantial and when the consumer is interested in this higher level of case coordination and support• P - Perspectives of the consumer will be elicited and prioritized.• P - Wrap around team consists of individuals agreed upon by the individual and will consist of HFSSS staff, external service providers, and other members of the consumer's support system.• Utilize a team-based approach, natural supports, convenience for the individual, culturally competent, in delivery of individualized services• P - Identify, build on, and enhance the capabilities, knowledge, skills, and assets of the individual• P - When faced with challenges or setbacks, the team will continue to work towards meeting the needs of the individual and towards achieving the goals in the wraparound/service plan.• P - Outcome based - goals and strategies of the wraparound/serviced plan include observable or measurable indicators of success, monitoring of progress in terms of these indicators ,and revision of the plan accordingly.
<ul style="list-style-type: none">• Has experience under several contracts with the Department.• Will enter into a standard service contract six-months prior to the property becoming available for tenancy or at the schedule/time identified by the Department and comply with all pre-contract requirements.• Will provide the requested documentation and submit invoicing as directed by the Department or in accordance with established Department processes.
<ul style="list-style-type: none">• Recognizes the Departments authority to manage program implementation and will maintain the perspective of the service provider while collaborating with the Department on all aspects of the program.
<ul style="list-style-type: none">• Provided documentation
<ul style="list-style-type: none">• Not applicable as is a MaineCare provider.
<ul style="list-style-type: none">• Current participating agency.
<ul style="list-style-type: none">• Currently providing Targeted Case Management
<ul style="list-style-type: none">• Maintains an expansive network of partners that allow efficient referrals and seamless access to care (provided list of about 20 entities)

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<ul style="list-style-type: none"> • P – Committed to meeting with the community- partners they engage with to discuss and collaborate on how they will implement these services.
<ul style="list-style-type: none"> • Incorporation of the Wraparound model will ensure treatment oversight and care coordination with all providers in the resulting service area that support HFSSS tenants.
<ul style="list-style-type: none"> • When noticed of acceptance as a vendor will follow the Departments instructions in a timely and efficient manner to ensure readiness for implementation of services at a program property as soon as it is ready for occupancy. • Commitment to frequent communication with the Department. • Support the Departments priorities.
<ul style="list-style-type: none"> • Will discuss strategy with the Department • P -Strategies include creating a program development group to create a staff recruitment and training plan; implementing staffing plan 90 days prior to occupancy date; offer jobs as early as 60 days prior to occupancy date • Staff start at least 2 weeks prior to the program start date for new-hire orientation.
<ul style="list-style-type: none"> • Understands that Department requirements must be adhered to and will ensure compliance with all regulations and expectations identified • Will ensure service delivery plan is designed to meet expectations and requirements including mechanisms for tracking information, and program monitoring.
B. Housing First Support and Stabilization Services (HFSSS)
<ul style="list-style-type: none"> • Will provide services on-site 24/7/365. Details in response to the next question.
<ul style="list-style-type: none"> • Estimates services will require between 9.5-10.5 FTEs. • 4 types of direct service positions listed with detailed lists of duties and functions: Housing Stabilization Program Manager, Housing Stabilization Coordinator, Housing Permanency Specialist, and Housing Engagement Specialist. • Has current programs with 24/7/365 staffing models that are an additional staffing resource to ensure coverage.
<ul style="list-style-type: none"> • Will use Motivational Interviewing and the principles of the Wraparound principles. • Understands the importance of establishing a trusting relationship with individuals at the initiation of services. • Services will include a trauma-informed approach

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<ul style="list-style-type: none">• Fully inform individuals of expectations and options and accepts when they do not feel safe and adjust services to ensure the individual is in control of their involvement or participation in services.• Staff work alongside the individuals as they navigate through the daily life choices they make, providing support and information.• Services will include clinical consultation by the agency's clinical director (LCSW and LADC) who will provide training on clinical topics such as trauma, substance• abuse, MI, Wraparound, and mental health• Management team ensures all policies, procedures, and day-to-day decision making are trauma-informed.
<ul style="list-style-type: none">• Will utilize the Rent Smart curriculum and other independent living curriculums.• Independent living skills will include learning strategies for being a good tenant as a first step to increased ability to maintain housing.• Relationship building will be the avenue to learning about the individuals' strengths and skills, other needs, and plans and goals.• Weave information about community-based services into the relationship building and assist with access when the individual is ready.• Over time build on foundational skills including helping the individual acknowledge their own growth and potential.• Individuals who identify with a need for formalized intervention these areas will be assisted by the Housing Stabilization Coordinator in identifying the scope of the intervention that most meets the consumer's objective.
<ul style="list-style-type: none">• Will create programmatic procedures and policy guidelines upon the execution of a contract with the Department and/or when requested by the Department• The Housing Stabilization Program Manager will provide supervision and oversight of the Housing Stabilization Coordinator, Housing Permanency Specialists, and Housing Engagement Specialists and will be supervised by the Homeless Services Director (who is overseen by the Executive Director)
<ul style="list-style-type: none">• Accreditation in the Council of Accreditation for Children and Families includes a component to ensure that policies and procedures protect the rights of individuals receiving services and that client/consumer feedback is integrated into program evaluation and practices.• Staff and management are dedicated to ensuring the rights of individuals are protected and inequalities are addressed.• P - Staff will be trained to appropriately advocate for individuals and will assist them in navigating through barriers that are interfering with reaching their goals.

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- P - Staff will rely upon current collaborations, and forge new collaborations, to create a seamless and efficient referral process for the wide range of services tenants may need including, but not limited to, health care, substance use treatment, legal services, harm reduction services, and mental health care.
- P - Staff will take an active role in being proactive to ensure the timely availability of services by meeting with current and potential new service providers to explain the HFSSS program and solicit their support to join efforts in supporting this population by creating an efficient referral system and partnering with our team to explore strategies to decrease wait times for services.

C. Available HFSSS for Tenants

- Understanding that not all tenants within the Site-based Housing First Property will be interested in HFSSS.
 - Staff will meet with tenants when they move in and discuss the availability of support services and emphasize that the service is voluntary.
 - Staff will obtain full consent in writing on a consent to services form before proceeding with service delivery. For tenants who decline support services, they will be reassured they can reach out at any time if they change their mind.
 - P - Expectation is that once individuals begin building relationships with staff through informal daily encounters the individuals may act on growing trust to increase the level of engagement and eventually explore the support that is offered.
- Individuals who consent to services will be approached differently depending on the strengths, existing support, needs, and interests.
 - Individuals who have complex mental health or substance use treatment needs and/or are experiencing a significant degree of destabilization may require a more intense service delivery approach, including the possible implementation of the Wraparound model.
 - Individuals who require a higher level of support services will have program staff working alongside to create a service plan and individual crisis plan.
- Q - Staff will link tenants with MaineCare services by assisting the tenant in making the referral phone call and/or filling out any referral form.
 - Will provide TCM and/or Behavioral Health/Community Integration services on-site for those tenants interested in selecting CC as their provider.
 - Will provide hands on assistance in completing necessary applications and making necessary phone calls – versus handing out an application or giving a tenant a number to call.

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- Q - All members of staff will be trained in SOAR, to assist tenants in accessing the Social Security Administration's SSI and SSDI programs. When assisting tenants in accessing social security disability, SOAR trained staff will rely on collaboration with a law firm who can aid the individual in a situation of denial.
- Staff will offer assistance for tenants including offering to join in on landlord communications to assist in navigating through challenging conversations
- Staff will utilize the Rent Smart curriculum and other skill development curriculums to help tenants strengthen skills around budgeting/financial management, money management, income management training and other areas of independent living skills including time management and organization skills. Included in this education will be helping tenants connect to a community-based representative payee if they desire.
- Staff will draw upon connections with SNAP and Bangor Public Health to make basic nutritional material available, organize on-site groups for tenants focused on nutritional counseling, and will link interested tenants to off-site nutritional counseling services.
- Staff will draw upon current connections with family reunification programs, family therapy programs, and parenting education programs in situations in which a tenant is seeking family reunification/parenting support/education.
- Staff will enlist the support of the Maine Health Employment Coaching Program for their expertise in job search, job retention, interview preparation, and other vocational supports.
- Main offices are in close proximity to Maine Health, which has created seamless access to services for TCM clients.
- Staff will provide support to tenants in connecting tenants to volunteer opportunities both within the community and within the HFSSS program.
- Staff will maintain 24/7/365 presence on-site and will provide support services including
 - Meeting with each new tenant to explain HFSSS and explore the tenant's interest in support services.
 - Assisting new tenants in moving in and settling into their apartment, to the extent that the tenant is interested.
 - Staff trained in conflict resolution and will utilize these skills to assist residents in resolving disputes.
 - Staff will link interested tenants to formal peer support programs and will explore ways in which tenants can offer peer support services to one another.

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<ul style="list-style-type: none">• Upon entering a contract as an HFSSS Service Provider, the Housing Stabilization Program Manager will meet with the local crisis provider to discuss the Housing First program and strategize prevention and intervention strategies that can be drawn upon once residency within the property occurs.• Will work alongside other Housing First team members to create detailed procedures to govern practices geared towards ensuring safety within the Housing First Property.• Will offer access to support through the Open Table Model which consists of 4-6 volunteers from the community who come together to offer friendly support to an individual by initiating weekly supportive and encouraging engagement.
<ul style="list-style-type: none">• P - Will provide case management services through TCM as appropriate for tenants interested in receiving case management services and will assist the tenant in referring for services in situations in which a tenant is requesting a different agency case management provider.
<ul style="list-style-type: none">• Will create a culture of healthy living and a culture that promotes substance use recovery within the housing complex by providing opportunities to participate in a wide range of activities that promote healthy living.• Staff will solicit feedback from tenants on their interests, and incorporate groups geared towards those interests.• Activities will be facilitated by program staff, members of the community, and/or representatives from various organizations.• Tenants themselves will be encouraged to facilitate activities to share their skills/knowledge• As the community forms, tenants will play an instrumental role in creating the calendar of activities.• Activities may include cooking classes/menu planning offered by SNAP; On-site exercise classes; Parenting classes; Support groups on various topics; Game/movie nights; Groups to teach skills in various hobby-related areas (i.e. quilting, painting, crocheting, etc.); and group outings.• Staff will also link tenants with free/low-cost community-based activities as well as linking them with transportation resources as needed to access those activities.• When scheduling activities, staff will collaborate with tenants to collect feedback as to times that would work best and adjust times accordingly to meet the changing needs of tenants• Create opportunities for tenants and their larger communities to come together in a safe, supportive environment to encourage a sense of belonging and support

**STATE OF MAINE
INDIVIDUAL EVALUATION NOTES**

RFP #: 202412212

RFP TITLE: PQVL for Housing First Support and Stabilization Services

BIDDER NAME: Community Care

DATE: 4/3/2025 and 4/7/2025

EVALUATOR NAME: Michael Labua

EVALUATOR DEPARTMENT: DHHS-OBH

- Collaborate with Bangor Public Health for provision of Narcan and education on the proper use of Narcan for CC employees and enlist their support in providing on-site education for tenants on overdose, drug poisoning, and instructions on how to use Narcan – while also distributing Narcan to both program staff and tenants, as well as other harm reduction items such as medication locked boxes.
- Collaborate with Needle Point Sanctuary and Wabanaki Public Health, referring individuals with their Syringe Service Program and explore their ability to provide this service on-site within the housing complex for ease of access for tenants.

Part IV, Section IV. Cost Proposal and Budget Narrative

- Cost Structure Reimbursement Acknowledgement Form was submitted.

**STATE OF MAINE
INDIVIDUAL EVALUATION NOTES**

RFP #: 202412212

RFP TITLE: PQVL for Housing First Support and Stabilization Services

BIDDER NAME: Community Care

DATE: 4.10.25

EVALUATOR NAME: Adrienne Leahey

EVALUATOR DEPARTMENT: OBH / DHHS

Individual Evaluator Comments:

Part IV. Section II. Organizational Qualification and Experience	
1. Overview of the Organization	
<ul style="list-style-type: none">• national accreditation through the Council on Accreditation for Children and Families (COA) since 2005 and has been voted as one of the Best Places to Work in Maine six years in a row• non-profit mental health and social service agency• State of Maine licensure in the categories of child placing, mental health, residential, emergency shelter, and substance abuse treatment.• Established in 1995• MaineCare Provider Agreement to deliver several services including, but not limited to, Targeted Case Management.• transitional and permanent supportive housing program, and Targeted Case Management Program• Shaw House program which serves as the umbrella for all homeless services for youth and young adults• Homeless Management Information System (HMIS) participating agency and has demonstrated compliance with all HMIS data entry procedures.• providing supportive services for individuals experiencing chronic homelessness through our adult Targeted Case Management program since 2007• holds the Youth Homeless Continuum of Care contract for central/northern Maine, providing emergency shelter, day programming, residential transitional living, and housing support for young adults up to the age of 21.• Each residential program that has been, and is currently, managed by CC has required a 24/7/365 staffing schedule• Other services include:<ul style="list-style-type: none">• Outpatient MH clinic• Home-based mental health and behavioral support;• Supportive Housing Program;• Residential Independent Living Program;• Treatment Foster Care Program; and• Shaw House Program which, in addition to the housing program, includes day program, emergency shelter, and street outreach.• P: Provided long, specific list of community collaborations• CC maintains a current staffing level of 131 part-time and 95 full-time staff,	

**STATE OF MAINE
INDIVIDUAL EVALUATION NOTES**

RFP #: 202412212

RFP TITLE: PQVL for Housing First Support and Stabilization Services

BIDDER NAME: Community Care

DATE: 4.10.25

EVALUATOR NAME: Adrienne Leahey

EVALUATOR DEPARTMENT: OBH / DHHS

- Good recruitment and retention programs
- Good chart about causes and mitigations of homelessness; did not address MH or SUD issues
- three decades of experience evaluating Health-Related Social Needs through the implementation of a variety of assessments, and creating a service plan in partnership with the consumer within the first 30-days, and updated every 90-days. Re-assessment occurs throughout the individual's participation in the program as needed and to assist in assessing progress.
- site-based support for young adults experiencing homelessness who are residing in scattered-site apartments through CC's housing program. support includes, but is not limited to, helping them to get settled into their apartment, maintaining their apartment, assisting in navigating day-to-day challenges that may arise, assisting the tenant in reaching their goals, mediating conflicts that may arise with neighbors, and assistance in facilitating effective communication between the tenant and landlord. Does not address MH / SUD issues.
- Shaw House: on-site services include harm reduction services, mental health counseling, substance use counseling, partner violence individual and group support, and support for trafficking survivors.
- Financial, IT, and Compliance section meets requirement
- Admin improvement examples meet requirement
- Fundraising section talks about grant writer, but does not provide details about successful efforts, % of budget that is not grant-related, etc.
- Projects: (1) TCM in Bangor; still using "Shelter Plus Care" language instead of PSHP (2) scattered site housing program; using a recipient of services as reference (3) HUD Youth Homeless Demonstration Project (YHDP TH/RRH) grant for Transitional/Rapid-rehousing

2. Organizational Chart

- Provided;

3. Litigation

- No litigation

Part IV, Section III. Proposed Services

1. Services to be Provided

Part II

A. Administrative Requirement

**STATE OF MAINE
INDIVIDUAL EVALUATION NOTES**

RFP #: 202412212

RFP TITLE: PQVL for Housing First Support and Stabilization Services

BIDDER NAME: Community Care

DATE: 4.10.25

EVALUATOR NAME: Adrienne Leahey

EVALUATOR DEPARTMENT: OBH / DHHS

<ul style="list-style-type: none"> • HFSS will be provided by the governing principles of Motivational Interviewing (MI) and the Wraparound Service Delivery Model, intervention models which are grounded in a person -centered, strength-based approach • Excellent description of both models
<ul style="list-style-type: none"> • Response meets requirement
<ul style="list-style-type: none"> • Has a MaineCare Provider Agreement
<ul style="list-style-type: none"> • Is a CoC HMIS
<ul style="list-style-type: none"> • CC does not currently hold any formal MOUs with providers • Provided a good list of providers with whom CC often partners to meet the needs of consumers
<ul style="list-style-type: none"> • CC will design the program to gear up for service delivery to the level possible while staff would not be hired until an occupancy date was announced, a recruitment strategy will be developed. • Communication and pre-planning around program development and implementation will be core strategy to ensure readiness.
<ul style="list-style-type: none"> • Good, detailed plan.
<ul style="list-style-type: none"> • CC will identify what needs to be tracked for information to ensure compliance and will identify a mechanism to run reports to monitor compliance to each requirement category. This step will be completed in the program development phase of program start-up.
B. Housing First Support and Stabilization Services (HFSSS)
<ul style="list-style-type: none"> • Agrees, but does not provide the detail requested
<ul style="list-style-type: none"> • Detail from above provided here • Providing 24/7/365 coverage using the above positions is estimated to require between 9.5-10.5 FTEs. Community Care is a large and nimble organization that currently operates programs using a 24-hour on-site service delivery model. • Good description of roles and 24/7/365 coverage
<ul style="list-style-type: none"> • Motivational Interviewing and the principles of Wraparound to provide services in a person-centered, strengths-based approach. • Good recognition of the need to apply a trauma-informed approach • Meets requirement
<ul style="list-style-type: none"> • Will use Rent Smart curriculum and other curriculums designed to promote IL skills • Housing Permanency Specialist and Housing Stabilization Coordinator roles
C. Available HFSSS for Tenants

**STATE OF MAINE
INDIVIDUAL EVALUATION NOTES**

RFP #: 202412212

RFP TITLE: PQVL for Housing First Support and Stabilization Services

BIDDER NAME: Community Care

DATE: 4.10.25

EVALUATOR NAME: Adrienne Leahey

EVALUATOR DEPARTMENT: OBH / DHHS

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| <ul style="list-style-type: none">• Will obtain full consent in writing on a consent to services form before proceeding with service delivery. For tenants who decline support services, they will be reassured they can reach out at any time if they change their mind |
| <ul style="list-style-type: none">• Service plans and individual crisis plans will be completed in partnership with the tenant, signed by the tenant, and will become part of the tenant's chart.• I: No discussion of an assessment |

<i>Part IV, Section IV. Cost Proposal and Budget Narrative</i>
<ul style="list-style-type: none">• MaineCare agreement provided; Signed cost proposal provided

**STATE OF MAINE
INDIVIDUAL EVALUATION NOTES**

RFP #: 202412212

RFP TITLE: PQVL for Housing First Support and Stabilization Services

BIDDER NAME: Community Care

DATE: 04/08/2025

EVALUATOR NAME: Kerry Polyot-Stefani

EVALUATOR DEPARTMENT: DHHS/OBH

Individual Evaluator Comments:

Part IV. Section II. Organizational Qualification and Experience
1. Overview of the Organization
<ul style="list-style-type: none">• P-Established in 1995• P-Services delivered to adults, children and families across the state• P-Service contracts with variety of entities that include Maine Housing, DHHS, Maine State Housing Authority, HUD and Administration of Children and Families• P-Bidder notes a transitional and permanent supportive housing program and Targeted Case Management program.• P-Sole awardee of the Youth Homeless Continuum of Care DHHS contract for Central and Northern Maine, operating a program for all homeless services for youth and young adults.• P-Bidder is established CoC (Continuum of Care) Homeless Management Information System (HMIS) participating agency.• P-Bidder has experience providing 24/7/365 care at residential program• Bidder is familiar with community services in the service area• Bidder is familiar with barriers in the service area• P-Bidder has provided Targeted Case Management since 2007.• N-Bidder only provided two projects within the last five years.
2. Organizational Chart
<ul style="list-style-type: none">• Bidder provided Org chart specifying positions related to Housing
3. Litigation
<ul style="list-style-type: none">• Bidder response, None

Part IV, Section III. Proposed Services
1. Services to be Provided
Part II
A. Administrative Requirement
<ul style="list-style-type: none">• Bidder explains using a Motivational Interviewing approach and Wraparound Service Delivery Model.• Staff will attend MI training, all supervisors have gone to the advanced training for MI and this is built into the training curriculum.• All HFSSS staff will be trained on Wraparound during the initial new hire orientation and will be ongoing.
<ul style="list-style-type: none">• Bidder is a current holder of several contracts with DHHS.

**STATE OF MAINE
INDIVIDUAL EVALUATION NOTES**

RFP #: 202412212

RFP TITLE: PQVL for Housing First Support and Stabilization Services

BIDDER NAME: Community Care

DATE: 04/08/2025

EVALUATOR NAME: Kerry Polyot-Stefani

EVALUATOR DEPARTMENT: DHHS/OBH

<ul style="list-style-type: none">• Bidder agrees to meet the following requirements that were outlined to include, a document to provide the position titles of all HFSSS positions, a detailed staffing pattern, and submitting valid certification.• Bidder agrees to invoice the Department for HFSSS based on established reimbursement rates.
<ul style="list-style-type: none">• Bidder acknowledged past and current collaboration with the Department.• Bidder “comes to the table with the attitude of ‘How can we be helpful?’”• Bidder will take the same approach with being a team player and contributing towards the HFSSS program vision.
<ul style="list-style-type: none">• Bidder is a current MaineCare provider and holds a current MaineCare provider Agreement
<ul style="list-style-type: none">• Bidder is a current CoC HMIS participating agency.
<ul style="list-style-type: none">• Bidder is currently providing Targeted case Management Services.
<ul style="list-style-type: none">• Bidder does not currently hold any formal MOU’s with providers.• Bidder provided list of local agencies and resources.• Bidder would meet with the identified agencies to discuss ways of collaboration with services upon entering into a contract with the Department for HFSSS.
<ul style="list-style-type: none">• Bidder has implemented both state and federal service delivery contracts over the past three decades.• Bidder acknowledged the requirement to provide treatment oversight and care coordination with HFSSS tenants.• Bidder will incorporate the Wraparound model (provided description)
<ul style="list-style-type: none">• Bidder will follow instructions issued by the Dept upon notification of acceptance as a vendor of HFSSS• Bidder acknowledged that communication with the Department will be key, will attend meetings scheduled by the Dept. and will follow the lead of the Dept with each stage of development.• Bidder provided example that staff may not be hired until an occupancy date was announced, a recruitment strategy would be developed.• Bidder provided that communication and pre-planning around the program development and implementation will be a core strategy to ensure readiness.
<ul style="list-style-type: none">• Bidder provided outline of implementation for staff hire and training• Upon the notification of approval as a HFSSS vendor, the bidder will create a program development workbook. This will create a staff recruitment plan, group will also formalize a training plan for HFSSS.• 90 days before residency/HFSSS start-up, bidder will implement the staff recruitment plan.

**STATE OF MAINE
INDIVIDUAL EVALUATION NOTES**

RFP #: 202412212

RFP TITLE: PQVL for Housing First Support and Stabilization Services

BIDDER NAME: Community Care

DATE: 04/08/2025

EVALUATOR NAME: Kerry Polyot-Stefani

EVALUATOR DEPARTMENT: DHHS/OBH

<ul style="list-style-type: none"> Bidder outlined time frames of 90 days, 75 days will start interviews, job offers as early as 60 days prior to program start. Start date being 2 weeks prior to program start-up. Bidder will provide new hire orientation 2 weeks prior to opening.
<ul style="list-style-type: none"> Bidder will review agency requirements outlined in the contract. Bidder will identify what information needs to be tracked to ensure compliance and will identify a mechanism to monitor compliance to each compliance category. Bidder identifies that this will be completed in the program development phase.
B. Housing First Support and Stabilization Services (HFSSS)
<ul style="list-style-type: none"> Bidder acknowledges that they will provide HFSSS on site at the Housing First Property 24/7/365. Bidder did not provide detail of how they will ensure HFSSS on site
<ul style="list-style-type: none"> Bidder has created four positions for staff, Housing Stabilization Program Manager, Housing Stabilization Coordinator, Housing Permanency Specialist, and Housing Engagement Specialist. Bidder provided detailed job descriptions for the four positions. These positions will provide the 24/7/365 coverage. Estimate 9.5-10.5 full time employees.
<ul style="list-style-type: none"> Bidder provided explanation of Motivational Interviewing, trauma informed approach Supervisory structure includes a Clinical Director who will consult with all of the programs including HFSSS.
<ul style="list-style-type: none"> Bidder will utilize RentSmart curriculum which focuses on independent living skills. HFSSS staff work with tenants to strengthen relationships and continue to work on encouraging skills and identifying community-based resources. Staffing identified, Housing Permanency Specialist and Housing Stabilization Coordinator will work together with the tenants to identify interventions that meet the consumer's objective. (Consumer or tenant?)
<ul style="list-style-type: none"> Bidder will create procedures for programming and policy guidelines. These will guide the decision making, program operations and monitoring of the HFSSS program. The four identified program staff will be supervised by the Homeless Services Director who is supervised by the Executive Director.
<ul style="list-style-type: none"> Bidder holds accreditation in the Council of Accreditation for Children and Families (COA).

**STATE OF MAINE
INDIVIDUAL EVALUATION NOTES**

RFP #: 202412212

RFP TITLE: PQVL for Housing First Support and Stabilization Services

BIDDER NAME: Community Care

DATE: 04/08/2025

EVALUATOR NAME: Kerry Polyot-Stefani

EVALUATOR DEPARTMENT: DHHS/OBH

<ul style="list-style-type: none">• Component of the COA accreditation process is to ensure that policies and procedures protect the rights of individuals receiving services and that their feedback is integrated into the program evaluation and practices.
<ul style="list-style-type: none">• Bidder will utilize current collaborations and look to develop new collaborations to create a referral process for the variety of services tenants may need, this includes health care, substance use treatment, legal services, harm reduction services and mental health care.
C. Available HFSSS for Tenants
<ul style="list-style-type: none">• Bidder acknowledges that not all tenants will be interested in HFSSS.• HFSSS staff will meet with the tenants and discuss the availability of support services and emphasize that this is a voluntary service.• If tenants decline services, HFSSS staff will let tenants know that this can be discussed at anytime if they decide to seek services.
<ul style="list-style-type: none">• HFSSS staff will develop an approach that will be different depending on the needs and interests of the tenant.• For tenants that have complex mental health or co-occurring needs, a more intense service delivery can be utilized, including the Wraparound model.
<ul style="list-style-type: none">• Bidder provides Targeted Case Management Services,• Bidder provided assisting clients with navigating services, providing assistance with communication between tenant/landlord.• Bidder provided brief explanations of how they will meet the need of services identified.
<ul style="list-style-type: none">• Bidder is currently providing Targeted Case Management Services, tenants will be offered this service if interested.• Bidder can also access TCM services with another agency.
<ul style="list-style-type: none">• Bidder identified providing harm reduction services by providing opportunities for participation in healthy activities and frequency that meets the need of the tenant.• Program staff will ask for feedback from tenants on their interest and will incorporate this into groups/activities.• Bidder provided example list of groups.• Naloxone will be available 24/7/365, collaborates with Bangor Public Health.• Collaboration with Needle Point Sanctuary and Wabanaki Public Health. If selected as HFSSS provider will collaborate with agencies to provide on-site services.

Part IV, Section IV. Cost Proposal and Budget Narrative

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**STATE OF MAINE
DEPARTMENT OF HEALTH AND HUMAN
SERVICES**

**Janet T. Mills
Governor**

**Sara Gagné-Holmes
Acting Commissioner**

AGREEMENT AND DISCLOSURE STATEMENT

RFP #: 202412212

RFP TITLE: PQVL for Housing First Support and Stabilization Services

I, Tia Bolduc, accept the offer to become a member of the Request for Proposals (RFP) Evaluation Team for the State of Maine Department of Health and Human Services. I do hereby accept the terms set forth in this agreement AND hereby disclose any affiliation or relationship I may have in connection with a bidder who has submitted a proposal to this RFP.

Neither I nor any member of my immediate family have a personal or financial interest, direct or indirect, in the bidders whose proposals I will be reviewing. "Interest" may include, but is not limited to: current or former ownership in the bidder's company; current or former Board membership; current or former employment with the bidder; current or former personal contractual relationship with the bidder (example: paid consultant); and/or current or former relationship to a bidder's official which could reasonably be construed to constitute a conflict of interest (personal relationships may be perceived by the public as a potential conflict of interest).

I have not advised, consulted with or assisted any bidder in the preparation of any proposal submitted in response to this RFP nor have I submitted a letter of support or similar endorsement.

I understand and agree that the evaluation process is to be conducted in an impartial manner without bias or prejudice. In this regard, I hereby certify that, to the best of my knowledge, there are no circumstances that would reasonably support a good faith charge of bias. I further understand that in the event a good faith charge of bias is made, it will rest with me to decide whether I should be disqualified from participation in the evaluation process.

I agree to hold confidential all information related to the contents of Requests for Proposals presented during the review process until such time as the Department formally releases the award decision notices for public distribution.

Signed by:

Tia Bolduc

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Signature

Feb-10-2025

Date



**STATE OF MAINE
DEPARTMENT OF HEALTH AND HUMAN
SERVICES**

**Janet T. Mills
Governor**

**Sara Gagné-Holmes
Acting Commissioner**

**AGREEMENT AND DISCLOSURE STATEMENT
RFP #: 202412212**

RFP TITLE: PQVL for Housing First Support and Stabilization Services

I, Anna Ko, accept the offer to become a member of the Request for Proposals (RFP) Evaluation Team for the State of Maine Department of Health and Human Services. I do hereby accept the terms set forth in this agreement AND hereby disclose any affiliation or relationship I may have in connection with a bidder who has submitted a proposal to this RFP.

Neither I nor any member of my immediate family have a personal or financial interest, direct or indirect, in the bidders whose proposals I will be reviewing. "Interest" may include, but is not limited to: current or former ownership in the bidder's company; current or former Board membership; current or former employment with the bidder; current or former personal contractual relationship with the bidder (example: paid consultant); and/or current or former relationship to a bidder's official which could reasonably be construed to constitute a conflict of interest (personal relationships may be perceived by the public as a potential conflict of interest).

I have not advised, consulted with or assisted any bidder in the preparation of any proposal submitted in response to this RFP nor have I submitted a letter of support or similar endorsement.

I understand and agree that the evaluation process is to be conducted in an impartial manner without bias or prejudice. In this regard, I hereby certify that, to the best of my knowledge, there are no circumstances that would reasonably support a good faith charge of bias. I further understand that in the event a good faith charge of bias is made, it will rest with me to decide whether I should be disqualified from participation in the evaluation process.

I agree to hold confidential all information related to the contents of Requests for Proposals presented during the review process until such time as the Department formally releases the award decision notices for public distribution.

Signed by:

A handwritten signature in blue ink, appearing to read 'Anna Ko', written over a blue line.

6020F14BF802423...

Signature

Feb-10-2025

Date



**STATE OF MAINE
DEPARTMENT OF HEALTH AND HUMAN
SERVICES**

**Janet T. Mills
Governor**

**Sara Gagné-Holmes
Acting Commissioner**

**AGREEMENT AND DISCLOSURE STATEMENT
RFP #: 202412212**

RFP TITLE: PQVL for Housing First Support and Stabilization Services

I, Michael LaBua, accept the offer to become a member of the Request for Proposals (RFP) Evaluation Team for the State of Maine Department of Health and Human Services. I do hereby accept the terms set forth in this agreement AND hereby disclose any affiliation or relationship I may have in connection with a bidder who has submitted a proposal to this RFP.

Neither I nor any member of my immediate family have a personal or financial interest, direct or indirect, in the bidders whose proposals I will be reviewing. "Interest" may include, but is not limited to: current or former ownership in the bidder's company; current or former Board membership; current or former employment with the bidder; current or former personal contractual relationship with the bidder (example: paid consultant); and/or current or former relationship to a bidder's official which could reasonably be construed to constitute a conflict of interest (personal relationships may be perceived by the public as a potential conflict of interest).

I have not advised, consulted with or assisted any bidder in the preparation of any proposal submitted in response to this RFP nor have I submitted a letter of support or similar endorsement.

I understand and agree that the evaluation process is to be conducted in an impartial manner without bias or prejudice. In this regard, I hereby certify that, to the best of my knowledge, there are no circumstances that would reasonably support a good faith charge of bias. I further understand that in the event a good faith charge of bias is made, it will rest with me to decide whether I should be disqualified from participation in the evaluation process.

I agree to hold confidential all information related to the contents of Requests for Proposals presented during the review process until such time as the Department formally releases the award decision notices for public distribution.

DocuSigned by:

Michael LaBua

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Signature

Feb-10-2025

Date



**STATE OF MAINE
DEPARTMENT OF HEALTH AND HUMAN
SERVICES**

**Janet T. Mills
Governor**

**Sara Gagné-Holmes
Acting Commissioner**

**AGREEMENT AND DISCLOSURE STATEMENT
RFP #: 202412212**

RFP TITLE: PQVL for Housing First Support and Stabilization Services

I, Adrienne Leahey accept the offer to become a member of the Request for Proposals (RFP) Evaluation Team for the State of Maine Department of Health and Human Services. I do hereby accept the terms set forth in this agreement AND hereby disclose any affiliation or relationship I may have in connection with a bidder who has submitted a proposal to this RFP.

Neither I nor any member of my immediate family have a personal or financial interest, direct or indirect, in the bidders whose proposals I will be reviewing. "Interest" may include, but is not limited to: current or former ownership in the bidder's company; current or former Board membership; current or former employment with the bidder; current or former personal contractual relationship with the bidder (example: paid consultant); and/or current or former relationship to a bidder's official which could reasonably be construed to constitute a conflict of interest (personal relationships may be perceived by the public as a potential conflict of interest).

I have not advised, consulted with or assisted any bidder in the preparation of any proposal submitted in response to this RFP nor have I submitted a letter of support or similar endorsement.

I understand and agree that the evaluation process is to be conducted in an impartial manner without bias or prejudice. In this regard, I hereby certify that, to the best of my knowledge, there are no circumstances that would reasonably support a good faith charge of bias. I further understand that in the event a good faith charge of bias is made, it will rest with me to decide whether I should be disqualified from participation in the evaluation process.

I agree to hold confidential all information related to the contents of Requests for Proposals presented during the review process until such time as the Department formally releases the award decision notices for public distribution.

Signed by:

A handwritten signature in black ink, appearing to read 'Adrienne Leahey', written over a blue line.

EF010B2206DE0410...

Signature

Feb-14-2025

Date



**STATE OF MAINE
DEPARTMENT OF HEALTH AND HUMAN
SERVICES**

**Janet T. Mills
Governor**

**Sara Gagné-Holmes
Acting Commissioner**

**AGREEMENT AND DISCLOSURE STATEMENT
RFP #: 202412212**

RFP TITLE: PQVL for Housing First Support and Stabilization Services

I, Kerry Polyot-Stefani, accept the offer to become a member of the Request for Proposals (RFP) Evaluation Team for the State of Maine Department of Health and Human Services. I do hereby accept the terms set forth in this agreement AND hereby disclose any affiliation or relationship I may have in connection with a bidder who has submitted a proposal to this RFP.

Neither I nor any member of my immediate family have a personal or financial interest, direct or indirect, in the bidders whose proposals I will be reviewing. "Interest" may include, but is not limited to: current or former ownership in the bidder's company; current or former Board membership; current or former employment with the bidder; current or former personal contractual relationship with the bidder (example: paid consultant); and/or current or former relationship to a bidder's official which could reasonably be construed to constitute a conflict of interest (personal relationships may be perceived by the public as a potential conflict of interest).

I have not advised, consulted with or assisted any bidder in the preparation of any proposal submitted in response to this RFP nor have I submitted a letter of support or similar endorsement.

I understand and agree that the evaluation process is to be conducted in an impartial manner without bias or prejudice. In this regard, I hereby certify that, to the best of my knowledge, there are no circumstances that would reasonably support a good faith charge of bias. I further understand that in the event a good faith charge of bias is made, it will rest with me to decide whether I should be disqualified from participation in the evaluation process.

I agree to hold confidential all information related to the contents of Requests for Proposals presented during the review process until such time as the Department formally releases the award decision notices for public distribution.

Signed by:

Kerry Polyot-Stefani

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Signature

Feb-10-2025

Date