



## **New York City Administration for Children's Services**

### **Alternative to Placement and Aftercare Services**

### **Request for Proposals (RFP)**

**EPIN: 06826P0005**

#### **Table of Contents**

**01 – Alternative to Placement and Aftercare Services RFP**

Section 1 – Program Background

Section 2 – Scope of Work and Program Expectations

Section 3 – Payment Structure

Section 4 – Basis for Contract Award and Procedures

**02 – Proof of Experience Form**

**03 – Proposal Budget Template**

**04 – Instructions for Responding to the RFP**

**05 – General Provisions Governing Contracts for Consultants, Professional, Technical, Human, and Client Services**

**06 – General Requirements for Health & Human Services Contractors**

**07 – General Information and Regulatory Requirements**

**08 – ACS Prevention Services Standards and Indicators (2021) Quick Access User Guide**

**09 – Labor Peace Agreement (LPA) Rider, LPA Certification, and LPA Attestation**

**10 – Community Hiring Rider**

To respond to this RFP and all other Human/Client Services RFPs, organizations must have an account and an approved HHS Prequalification Application in PASSPort. Proposals and Prequalification applications will ONLY be accepted through PASSPort.

If you do not have a PASSPort account or an approved HHS Prequalification Application in PASSPort, please visit [www.nyc.gov/passport](http://www.nyc.gov/passport) to get started.

## 01 – Alternative to Placement and Aftercare Services RFP

### Basic Information

|                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
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| <b>RFP Release Date</b>                          | October 16, 2026                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>Proposal Due Date</b>                         | November 23, 2026, at 2:00 pm                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>Agency Contact Email</b>                      | <a href="mailto:ATP-RFP@acs.nyc.gov">ATP-RFP@acs.nyc.gov</a>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Pre-Proposal Conference Information</b>       | <p><b>The Pre-Proposal Conference is scheduled for:</b></p> <p><b>Date and time:</b><br/>Thursday, October 29, 2026, 2:00 PM   (UTC-04:00) Eastern Time (US &amp; Canada)</p> <p><b>Join link:</b><br/><a href="https://nycacs.webex.com/nycacs/j.php?MTID=m1de9061961c532516d3baf2c31b3846f">https://nycacs.webex.com/nycacs/j.php?MTID=m1de9061961c532516d3baf2c31b3846f</a></p> <p><b>Webinar number:</b><br/>2332 934 9797</p> <p><b>Webinar password:</b><br/>zqRtnXeJ863 (97786935 when dialing from a phone or video system)</p> <p><b>Join by phone:</b><br/>+1-646-992-2010 United States Toll (New York City)<br/>+1-408-418-9388 United States Toll</p> <p><b>Access code:</b><br/>2332 934 9797</p> |
| <b>Anticipated Contract Term</b>                 | <ul style="list-style-type: none"> <li>7/1/2027 – 6/30/2030 with options to renew for two (2) additional three (3) year terms.</li> <li>ACS reserves the right to determine the length of the initial contract term.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Anticipated Funding and Payment Structure</b> | <ul style="list-style-type: none"> <li>Anticipated total maximum available funding is \$16,543,326 (\$5,514,442 per year).</li> <li>Estimated number of contracts: Three (3).</li> <li>Payment structure: Contractor will be reimbursed using a line-item payment structure, with payments made for expenses incurred against an approved budget.</li> <li>ACS reserves the right to modify the payment structure in the future.</li> <li>Contracts resulting from this RFP may be subject to increases or decreases driven by performance using utilization, quality, and outcome metrics set</li> </ul>                                                                                                       |

|                                             | by ACS. Such metrics may include staff training goals, program utilization data, quality of engagement, stakeholder outreach and post-services outcomes.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                             |                          |                          |                          |                           |                      |                                   |             |                           |                      |                                   |             |                     |     |    |           |        |  |                                     |             |
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| Competition Pools                           | <p>Proposers wishing to apply for multiple competition pools must submit separate and complete proposals, including all required documents, for each competition pool. Proposers should clearly indicate which competition pool they are applying for.</p> <table><tr><th>Competition Pools<br/>(Borough(s)<br/>Served)</th><th>Interventions</th><th>Youth Served<br/>Annually</th><th>Maximum<br/>Annual Budget</th></tr><tr><td>1. Bronx and<br/>Manhattan</td><td>MST-Psych<br/>and MST</td><td>72 (32 MST-<br/>Psych &amp; 40<br/>MST)</td><td>\$2,286,956</td></tr><tr><td>2. Brooklyn<br/>and Queens</td><td>MST-Psych<br/>and MST</td><td>72 (32 MST-<br/>Psych &amp; 40<br/>MST)</td><td>\$2,286,956</td></tr><tr><td>3. Staten<br/>Island</td><td>MST</td><td>30</td><td>\$940,530</td></tr><tr><td>TOTALS</td><td></td><td>174 (64 MST-<br/>Psych &amp; 110<br/>MST)</td><td>\$5,514,442</td></tr></table> <ul style="list-style-type: none"><li>The number of “Youth Served Annually” listed in the chart above is the number of slots that will be awarded for each competition pool; however, ACS reserves the right to award less than the total number of slots noted and reallocate the number of slots among competitions when ACS determines that such action is in the best interests of the City.</li></ul> <p><b>PLEASE NOTE:</b></p> <ul style="list-style-type: none"><li>With the latest PASSPort upgrade, vendors are now limited to working on one proposal at a time. If you wish to submit proposals for more than one competition pool, you must first submit your initial proposal before beginning work on the next one.<ul style="list-style-type: none"><li><b>Single Proposal Rule:</b> Only one proposal can be worked on in PASSPort at a time.</li><li><b>Submission Before Duplication:</b> You must submit your proposal before duplicating it for another competition pool.</li></ul></li></ul> | Competition Pools<br>(Borough(s)<br>Served) | Interventions            | Youth Served<br>Annually | Maximum<br>Annual Budget | 1. Bronx and<br>Manhattan | MST-Psych<br>and MST | 72 (32 MST-<br>Psych & 40<br>MST) | \$2,286,956 | 2. Brooklyn<br>and Queens | MST-Psych<br>and MST | 72 (32 MST-<br>Psych & 40<br>MST) | \$2,286,956 | 3. Staten<br>Island | MST | 30 | \$940,530 | TOTALS |  | 174 (64 MST-<br>Psych & 110<br>MST) | \$5,514,442 |
| Competition Pools<br>(Borough(s)<br>Served) | Interventions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Youth Served<br>Annually                    | Maximum<br>Annual Budget |                          |                          |                           |                      |                                   |             |                           |                      |                                   |             |                     |     |    |           |        |  |                                     |             |
| 1. Bronx and<br>Manhattan                   | MST-Psych<br>and MST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 72 (32 MST-<br>Psych & 40<br>MST)           | \$2,286,956              |                          |                          |                           |                      |                                   |             |                           |                      |                                   |             |                     |     |    |           |        |  |                                     |             |
| 2. Brooklyn<br>and Queens                   | MST-Psych<br>and MST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 72 (32 MST-<br>Psych & 40<br>MST)           | \$2,286,956              |                          |                          |                           |                      |                                   |             |                           |                      |                                   |             |                     |     |    |           |        |  |                                     |             |
| 3. Staten<br>Island                         | MST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 30                                          | \$940,530                |                          |                          |                           |                      |                                   |             |                           |                      |                                   |             |                     |     |    |           |        |  |                                     |             |
| TOTALS                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 174 (64 MST-<br>Psych & 110<br>MST)         | \$5,514,442              |                          |                          |                           |                      |                                   |             |                           |                      |                                   |             |                     |     |    |           |        |  |                                     |             |

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|                                   | <ul style="list-style-type: none"> <li>○ If you attempt to duplicate an "In Progress" proposal, the system will cancel it to start a new proposal.</li> </ul> <p>For detailed instructions, please refer to <b>Document 04 - Instructions for Responding to the RFx</b>, which provides an updated step-by-step guide on how to submit a proposal in PASSPort.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| <b>Subcontracting Information</b> | <p>Subcontracting for direct services to youth is allowed subject to ACS approval and the following conditions:</p> <ul style="list-style-type: none"> <li>• The contractor must directly deliver the core Multisystemic Therapy (MST) service component, including all MST therapists, MST supervision, and MST model fidelity and licensing requirements. This component may not be subcontracted or assigned.</li> <li>• Subcontracting of ancillary and supportive services — including but not limited to pro-social and recreational activities, tutoring and academic support, workforce development, and similar enrichment services — is permitted and encouraged where it strengthens program quality and community linkage.</li> <li>• Subcontracted services <b>may not exceed twenty-five percent (25%)</b> of the total contract value. Proposals reflecting subcontracting above this threshold may be deemed non-responsive. ACS may waive this limit at its sole discretion where the proposer demonstrates that doing so materially improves service delivery.</li> <li>• All subcontractors and subcontracts are subject to ACS approval before any expenses are incurred or any payments are made to them by the prime contractor and must be reported using the City's PASSPort System.<br/><a href="https://www.nyc.gov/site/mocs/passport/articles/passport-subcontract.page">https://www.nyc.gov/site/mocs/passport/articles/passport-subcontract.page</a></li> <li>• Services provided by the subcontractor must be integrated into the overall program design. Prime contractors will be permitted to propose to subcontract with qualified community-based organizations to provide pro-social activities that include educational support and/or career development. However, all prime contractors will be required to staff a Crisis Worker (for MST-Psych) or an Education and Employment Specialist (for MST). These staff must be employed by the prime contractor and have expertise in resolving challenging educational issues, identifying pro-social activities for youth, and encouraging referrals to support programs. They will also be responsible for identifying employment opportunities for youth and caregivers. Additionally, all prime contractors will be required to have experience operating juvenile justice or diversion programs that support the development of justice involved youth. Subcontractors will require prior experience working with justice involved youth but not experience delivering MST.</li> </ul> |

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|                                    | <ul style="list-style-type: none"> <li>Notwithstanding the participation of subcontractors, prime contractors must provide consistent adult staff engagement with youth throughout the program in order to promote participation in activities that align with identified interest and strengths.</li> </ul> <p><b>Note:</b> Subcontractors are not required to be nonprofit organizations. The NYC Online Directory of Certified M/WBE Businesses is available at <a href="http://www.nyc.gov/sbs">www.nyc.gov/sbs</a>, as sources for its purchases of goods, supplies, services, and equipment using funds obtained through the Agreement. Contractors may also utilize businesses and individual proprietors owned/operated by people with disabilities as sources for its purchases of goods, supplies, services, and equipment using funds obtained through this agreement.</p>                                                                                                                                                                                                                                         |
| <b>Minimum Qualifications</b>      | <p>Proposers that do not meet ALL the following requirements might be found non-responsive and will not move to evaluation:</p> <ul style="list-style-type: none"> <li>The proposer must have at least three (3) years of demonstrable experience (within the last five (5) years) working with youth offenders and their families and successfully implementing evidence-based or evidence-informed program models that address issues commonly faced by youth and families who are involved in the juvenile justice system.</li> <li>The proposer must have a minimum of one (1) year of experience (within the last three (3) years) delivering community-based, intensive services to justice-involved youth, including alternative-to-placement (ATP) and/or aftercare services, with the ability to engage youth and families in their homes and communities.</li> <li>The proposer must have experience delivering evidence-based models, specifically Multisystemic Therapy. A signed letter from MST Services, the model developer, confirming the dates proposer was engaged with the model is required.</li> </ul> |
| <b>Labor Peace Agreement (LPA)</b> | <p>Beginning November 16, 2021, City agencies are required to include the attached Labor Peace Agreement (LPA) Rider, LPA Certification, and LPA Attestation to Human Service solicitations.</p> <p>New York City Administrative Code §6-145(e)(2) requires City agencies to state in each solicitation for a City Services Contract that the resulting City Service Contract shall include:</p> <p>(a) a requirement that the Contractor comply with all applicable requirements under Ad. Code §6-145 and any rules promulgated pursuant thereto, and that such requirements constitute a material term of the contract;</p> <p>(b) the certification; and</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                              |

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|                         | <p>(c) a provision providing that (i) failure to comply with the requirements of Ad. Code §6-145 may constitute a material breach by the Contractor of the terms of the city service contract; (ii) such failure shall be determined by the agency; and (iii) if the city service Contractor and/or subcontractor receives written notice of such a breach and fails to cure such breach within 30 days of such notice or a longer time period established pursuant to the terms of the city service contract, the City shall have the right to pursue any rights or remedies available under the terms of the city service contract or under applicable law, including termination of the contract.</p> <p>The Labor Peace Agreement (LPA) Rider, LPA Certification, and LPA Attestation are hereby made part of the solicitation as attachments.</p>                                                                                                                                                                                 |
| <b>Community Hiring</b> | <p>Pursuant to Section 3502 of the New York City Charter, the Contract to be awarded from this solicitation will be subject to the Community Hiring requirements set forth in the rules promulgated under Title 74 of the Rules of the City of New York ("Community Hiring Rules"). The Contracts awarded under said Contract with a cumulative value in excess of three million dollars (\$3,000,000) will require the contractor to make best efforts to employ Income-Based Community Hires as defined under Section 1-02 of the Community Hiring Rules, in order to meet the workforce goal (the "Community Hiring Goal").</p> <p>The Community Hiring Goal is to hire one Income-Based Community Hire for every five hundred thousand dollars (\$500,000) in the cumulative value of the contracts awarded. For credit towards the Community Hiring Goal, the Income-Based Community Hire, hired by the contractor, does not need to perform services under this Contract to be credited towards the fulfillment of the goal.</p> |

## Proposal Submission Instructions

|                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
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| <p><b>General Guidelines</b></p>                                                | <ul style="list-style-type: none"> <li>• To respond to this RFP and all other Human/Client Services RFPs, organizations must have an account and an approved HHS Prequalification Application in PASSPort. Proposals and Prequalification applications will ONLY be accepted through PASSPort. If you do not have a PASSPort account or an approved HHS Prequalification Application in PASSPort, please visit <a href="http://www.nyc.gov/passport">www.nyc.gov/passport</a> to get started.</li> <li>• Proposals received after the proposal due date and time will be considered late and will not be accepted, except as provided under New York City's Procurement Policy Board Rules, Section 3-16(o)(5).</li> <li>• Please allow sufficient time to complete and submit proposals, which includes entering information, uploading documents, and entering login credentials. The PASSPort system will only allow proposers to submit proposals prior to the proposal due date and time.</li> <li>• Proposers must examine the RFP documents carefully and before submitting a proposal, must request of ACS via the Agency Contact in writing by e-mail for an interpretation, clarification, or correction of every patent ambiguity, inconsistency, or error in the RFP documents which should have been discovered by a reasonably prudent proposer no later than the date Final Questions are due listed in PASSPort.</li> <li>• Only the written interpretation, clarification, or correction issued by ACS shall be binding.</li> <li>• If a proposer fails to discover and to raise an ambiguity, inconsistency, or error in the RFP documents and to seek an interpretation, clarification, or correction before the date for submission of Final Questions are due, then the proposer is bound by ACS's interpretation of the RFP documents.</li> <li>• Providers are responsible for the timely electronic submission of proposals. <b>ACS strongly recommends that proposers complete and submit their proposals at least 24 hours in advance of the proposal due date and time.</b></li> <li>• Resources such as user guides and videos are available on <a href="http://www.nyc.gov/passport">www.nyc.gov/passport</a>. For assistance submitting a proposal through the PASSPort system, please submit an inquiry to <a href="http://www.nyc.gov/mocshelp">www.nyc.gov/mocshelp</a>.</li> <li>• Proposers should review the 21-OCFS-ADM-04 Qualified Residential Treatment Programs (QRTPs) and Q RTP Exceptions in New York State in its entirety. <a href="http://www.nyc.gov/21-OCFS-ADM-04.pdf">21-OCFS-ADM-04.pdf (ny.gov)</a></li> </ul> |
| <p><b>Required Attachments to be uploaded in the PASSPort Documents Tab</b></p> | <ul style="list-style-type: none"> <li>• Document 02 – Proof of Experience Form.</li> <li>• Document 03 – Proposal Budget Template.</li> <li>• A letter from MST Services, the model developer, that confirms the proposer is licensed in the model and includes the date of licensure.</li> <li>• Life of a Case: A document that describes a case from beginning to end including, but not limited to the case acceptance process, initial and ongoing engagement of youth and caregivers, supervision activities, communication and collaboration with court stakeholders, service referrals, case closure, and post-closing supports.</li> <li>• Implementation Timeline: A timeline with activities that will be undertaken in the first year of the contract including, but not limited to hiring and training staff, implementing program components, and quality assurance.</li> <li>• A hiring and onboarding business process (with timelines) from the point of identifying the need to hire, to creating and posting a job description, and through</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

|                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|-----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                         | initial onboarding trainings (including trainings provided by ACS, as well as required by MST).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| <b>Minimum Qualification Question 1</b> | <ul style="list-style-type: none"> <li>Upload in the PASSPort Documents tab a copy of Document 02 – Proof of Experience Form which provides the proposer’s three (3) or more years of experience (within the past five (5) years) working with youth offenders and their families and successfully implementing evidence-based or evidence-informed program models that address issues commonly faced by youth and families who are involved in the juvenile justice system.</li> </ul> <p>Provide the names of organizations served, contact information, dates of service, locations served (full addresses), age ranges of participants, and a description of the scope of services.</p> |
| <b>Minimum Qualification Question 2</b> | <ul style="list-style-type: none"> <li>Upload in the PASSPort Documents tab a copy of Document 02 – Proof of Experience Form which provides the proposer’s minimum of one (1) year (within the past three (3) years) delivering community-based, intensive services to justice-involved youth, including alternative-to-placement (ATP) and/or aftercare services, with the ability to engage youth and families in their homes and communities.</li> </ul> <p>Provide the names of facility or facilities served, contract or engagement periods, types of youth served (including behavioral, emotional, or educational needs), addresses, and contact information.</p>                   |
| <b>Minimum Qualification Question 3</b> | <ul style="list-style-type: none"> <li>Upload in the PASSPort Documents tab, a copy of a signed letter from MST Services, the Model Developer, on their letterhead, which confirms the proposer’s current licensure as an MST Provider or an MST Network Partner Training Organization.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Questions Regarding this RFP</b>     | <ul style="list-style-type: none"> <li>Questions regarding this RFP must be transmitted in writing to the Agency Contact Person listed on the View RFx screen in PASSPort.</li> <li>Substantive information/responses to questions addressed at the conference and those received subsequently will be released in an addendum to the RFP to all organizations that are prequalified to propose to this RFP in PASSPort, unless in the opinion of the Agency, the question is of proprietary nature.</li> <li>ACS cannot guarantee a timely response to written questions regarding this RFP received less than one week prior to the proposal due date.</li> </ul>                         |

## **Section 1 – Program Background**

### **A. OVERVIEW**

The Administration for Children’s Services (ACS) protects and promotes the safety and well-being of New York City’s children and families by providing child welfare, juvenile justice, and primary prevention services, as well as administering childcare funding. ACS’ Division of Youth and Family Justice (DYFJ) provides juvenile justice services with a focused strategy to place youth on the path toward school, employment, stable housing, and successful adulthood. DYFJ is responsible for Secure, Specialized Secure, and Non-Secure Detention and Non-Secure and Limited Secure Placement (Close to Home) as well as other citywide preventive juvenile justice services that promote public safety and improve the well-being of youth, families, and communities. DYFJ is charged with understanding the needs of youth in the justice system and ensuring quality care by creating youth-centered opportunities to help young people become positive, contributing members of society. ACS contracts with leading non-profit organizations to support the needs of children and families by working closely with them in their communities.

DYFJ’s Community-Based Alternatives (CBA) unit is a subdivision of DYFJ that manages ACS’ continuum of juvenile justice prevention programs that serve court-involved and at-risk youth. CBA’s continuum includes the Juvenile Justice Initiative (Alternative to Detention and Placement); the Family Assessment Program (Persons in Need of Supervision (PINS) diversion and Raising the Lower Age (RTLA) differential response program); and Crossover Youth work that supports youth who are dually involved in juvenile justice and child welfare. The Juvenile Justice Initiative (JJI) was launched in 2006 to provide intensive, home-based, evidence-based services to youth involved in the juvenile justice system. JJI’s Alternative-to-Placement (ATP) and Aftercare Program is both an intensive dispositional alternative for delinquent youth who would otherwise serve time in institutional settings, and an Aftercare Program for youth transitioning from non-secure placement and limited secure placement back into the community. This Request for Proposals (RFP) seeks to continue JJI’s commitment to providing high quality, evidenced-based interventions for youth at the highest level of need in the juvenile delinquency system - those being recommended for out-of-home placement and those exiting placement and reentering the community.

Consistent with ACS’ focus on race equity, this RFP seeks to safely reduce the disproportionate number of youth of color in the child welfare and juvenile justice system. ACS is committed to delivering services in a socially just and culturally competent manner. Our experience demonstrates that a community-based approach to services furthers this commitment. Community-based providers have experience with the nuances of their individual communities and can most effectively respond to the unique challenges presented in those communities.

### **B. PROGRAM PURPOSE AND GOALS**

ACS is seeking to contract with highly experienced service providers to provide both ATP and placement aftercare services to youth ages 12 to 17 (up to age 17.5 at time of referral) and their families using targeted and specific evidence-based interventions. JJI serves youth who have been or are in the process of adjudication in New York City (NYC) juvenile courts. Intensive services allow them to remain at home while receiving support in the community, instead of being remanded to a

juvenile justice setting. JJJ services can be put in place for youth when leaving a juvenile justice non-secure or limited secure placement and transitioning back to the community. ACS is seeking providers with expertise in working with delinquent youth and their families and successfully implementing evidence-based program models that address issues commonly faced by youth and families who are involved in the juvenile justice system.

ACS is committed to helping to stabilize families and enable youth to remain safely in or return to family settings. To achieve these goals, this program will provide high-quality, intensive ATP services and aftercare services to youth using evidence-based treatment, along with an education/employment specialist for additional support in identifying and securing necessary resources to support long-term economic security. Recognizing the challenges in serving this population, ACS is seeking providers who can offer their own expertise, creativity, and experience in developing and operating these types of services that achieve desired outcomes and meet both ACS' and the proposed program model's standards. ACS is specifically looking to procure and implement the Multisystemic Therapy (MST) and the Multisystemic Therapy Psychiatric adaptations (MST-Psych) through this RFP. MST and MST-Psych are established, evidence-based treatment models proven to work with this population.

The goals of the ATP program are to:

- a. Avoid the use of residential placement for youth who can be appropriately served in the community;
- b. Reduce the number of youth in residential placement facilities and reduce the amount of time in placement for those in ACS non-secure or limited secure placement;
- c. Support youth compliance with probation terms and dispositional orders to avoid violations and encourage successful completion of probation;
- d. Serve youth and their families in their own neighborhoods;
- e. Improve individual and family functioning, including relationships between youth and their parents/caregivers;
- f. Reduce recidivism;
- g. Reduce truancy, substance misuse, curfew non-compliance, and other youth-specific maladaptive behaviors;
- h. Improve school performance; and
- i. Ensure a successful transition for youth from placement back to home or alternative placement to probation.

### **C. SERVICE AREAS**

ACS anticipates awarding three contracts through this RFP to serve up to 87 youth at a time and 174 youth annually. JJJ serves youth at six-month intervals. Therefore, each "slot" can serve up to two youth per year.

There are three competition pools for this RFP. Proposers can apply for more than one competition pool but must submit a separate and complete proposal for each competition pool.

| Competition Pool   | Point in Time Slots          | Annual Slots                 | Model                                          | Annual Funding Amount |
|--------------------|------------------------------|------------------------------|------------------------------------------------|-----------------------|
| 1. Bronx/Manhattan | 36<br>(20 MST; 16 MST-Psych) | 72<br>(40 MST; 32 MST-Psych) | Multi-Systemic Therapy (MST) & MST-Psychiatric | \$2,286,956           |
| 2. Brooklyn/Queens | 36<br>(20 MST; 16 MST-Psych) | 72<br>(40 MST; 32 MST-Psych) | Multi-Systemic Therapy (MST) & MST-Psychiatric | \$2,286,956           |
| 3. Staten Island   | 15 MST                       | 30 MST                       | Multi-Systemic Therapy (MST)                   | \$940,530             |

## **Section 2 – Scope of Work and Program Expectations**

### **A. EXPERIENCE (20%)**

#### **1. Program Expectations**

- a. Contractor would have at least three years (within the last five years) of successful, relevant experience in the following areas:
  - i. Operating child welfare or juvenile justice preventive or diversion programs that supervise and serve court-involved youth and families in New York City. Proposers should have experience working with court stakeholders in the borough(s) they are proposing to serve;
  - ii. Providing alternative-to-placement and/or aftercare services to families with youth aged 12 to 17 who are involved in the juvenile justice system;
  - iii. Implementing and providing relevant, fully licensed Multisystemic Therapy to families with youth aged 12 to 17 with maladaptive behaviors, substance misuse histories, or who are facing other issues common to youth and families involved in the juvenile justice system;
  - iv. Establishing relationships with community-based organizations that can provide youth with pro-social activities, including educational support, tutoring, and career development.
  - v. Delivering human and/or economic and social services and concrete resources to families experiencing poverty, racial inequities, mental health challenges, housing instability, domestic violence, substance misuse, family conflict, and/or other challenges that make parenting difficult; and
  - vi. Program design and development, planning for program implementation, basic program data collection and monitoring, and engaging in continuous quality improvement activities.

#### **2. Evaluation**

- a. This section will be evaluated based on the quality of the experience providing services based on the criteria in this section. It is worth a maximum of **20 percent** in the proposal evaluation.

### **B. TARGET POPULATION (10%)**

#### **1. Program Expectations**

- a. Contractors would serve youth aged 12 to 17 (up to age 17.5 at the time of referral). Exceptions can be made to serve 11-year-old youth after consultation between ACS, the contractor, and the MST consultant.
- b. Contractors would serve youth referred by ACS who:
  - i. Have been adjudicated a 'juvenile delinquent' under an active delinquency case in New York City Family Court and are at risk of out-of-home placement, as indicated by an Exploration of Alternatives (EOA) ordered by the Court, and have subsequently been placed on probation with orders to comply with the JJI program; or
  - ii. Have been placed in an ACS non-secure placement or limited secure placement facility and are eligible for aftercare services; or

- iii. Meet other specifications set by ACS such as having a case pending in the Youth Part or other Supreme Court Part, exhibiting behaviors that place them at risk of entering the justice system, or other circumstances.
- c. The typical youth targeted for this intervention may:
  - i. Have antisocial behaviors and/or multiple arrests;
  - ii. Associate with delinquent and/or substance-using peers;
  - iii. Have problems at school or does not attend;
  - iv. Be abusing substances; and/or
  - v. Have a family with multiple needs and a high level of conflict.
- d. The MST exclusionary criteria will apply so the following youth will NOT be served by this program:
  - i. Youth living independently, or youth for whom a primary caregiver cannot be identified;
  - ii. Youth who are actively suicidal, actively homicidal, and/or actively psychotic;
  - iii. Youth referred primarily for sex offenses (in the absence of other antisocial/delinquent behaviors); and
  - iv. Youth with pervasive developmental delays or with an IQ of 67 or less.
- e. Brief Description of target populations for each intervention:

| Model                              | Target Population                                                                                                                                                                                                                                                                    | Age   |
|------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|
| Multi-Systemic Therapy             | <ul style="list-style-type: none"> <li>• Youth at risk of out of home placement due to serious behavior problems and/or substance misuse problems.</li> <li>• Families with a high level of conflict.</li> </ul>                                                                     | 12-17 |
| Multi-Systemic Therapy-Psychiatric | <ul style="list-style-type: none"> <li>• Youth with delinquent/challenging behaviors and concurring mental health symptoms such as thought disorder, bipolar affective disorder, depression, anxiety, and impulsivity.</li> <li>• Families with a high level of conflict.</li> </ul> | 9-17  |

- f. Contractors would accept all referrals from ACS and have a no reject/eject policy. ACS would be the only referral source for these services. Contractors would not accept direct referrals or transfers from other programs without ACS approval. If a contractor thinks a referral was erroneously made by ACS, the contractor may appeal the referral to ACS.
- g. Contractors would respect the diversity of potential participants and caregivers and can offer resources and linkages to services in various languages, as necessary.
- h. Contractors would adhere to best practices and ACS' policies and procedures related to promoting a safe and respectful environment for Lesbian, Gay, Bisexual, Transgender, and Questioning (LGBTQ) youth and their families, and all applicable federal, state, and local laws concerning the care and custody of youth who identify as LGBTQ.
- i. Contractors would demonstrate an awareness of the systemic forces that impact youth involved in the justice system, including poverty and racism, and how they have resulted in the disproportionate representation of youth of color in the justice system.
- j. Contractors would be flexible in their ability to meet the different needs of younger and older youth.
- k. Contractors would recognize the constraints that youth and their families may have that would require the program to be flexible in provision of services, including challenges

accessing reliable transportation or the inability to travel to certain neighborhoods due to safety concerns.

## **2. Evaluation**

- a. This section will be evaluated based on the quality of the program plan for providing services based on the criteria in this section. It is worth a maximum of **10 percent** in the proposal evaluation.

## **C. PROGRAM MODEL AND APPROACH (25%)**

### **1. Program Expectations**

- a. ACS seeks contractors to effectively provide Multisystemic Therapy (MST) and/or Multisystemic Therapy - Psychiatric (MST-Psych). Evidence-Based Models (EBM) have a body of clinical research that demonstrates the effectiveness of the proposed service with the population to be served. EBM contractors would serve families who align with the model's criteria or as otherwise referred by ACS for services. Contractors would implement the EBMs with fidelity to the design that has been demonstrated to be effective, apart from length of service noted in C.1.b.
- b. Contractors are expected to provide a course of MST treatment to each youth and family for a minimum of six months, even though model-adherent course of MST treatment is three to five months.
- c. Contractors applying for Competition Pool 1 (Bronx/Manhattan) and Competition Pool 2 (Brooklyn/Queens) to provide MST and MST-Psych will maintain separate treatment teams for each adaptation (see staffing structure for each model in Section D.1.a.).
- d. Contractors shall strictly adhere to the MST and MST-Psych model and fulfill all programmatic requirements. Any deviation from the model (other than the length of service exception above) without direct approval from both ACS and the model developer is not permissible. Adherence includes full compliance with the clinical, administrative, and quality assurance requirements of the model and the therapeutic approach set forth in the model.
  - i. Clinical requirements include, but are not limited to, specific education, certification, licensing, training, screening, and other qualifications for staff.
  - ii. Administrative requirements may include, but are not limited to, staff attendance at required training courses and the provision of appropriate technology, such as laptops and cellular phones, to clinicians who are providing home-based treatment.
  - iii. Quality assurance requirements may include, but are not limited to, input of case data into databases operated by the model provider(s), regular and frequent supervision to support direct service staff and guide their ongoing practice, regular and frequent consultation with therapeutic consultants selected by the model providers, and recording of therapeutic sessions to reinforce model adherence by staff.
- e. The primary goals of MST are to (a) reduce youth criminal activity, (b) reduce other types of antisocial behavior, such as drug abuse, and (c) achieve these outcomes at a cost savings by decreasing rates of incarceration and out-of-home placements. MST aims to achieve these goals through a series of interventions that address risk factors in a comprehensive, individualized, and integrated approach and that empower families to enhance protective factors. The salient features and requirements of the MST models are described below:
  - i. MST is an intensive family-and community-based treatment that addresses the multiple influences that contribute to serious antisocial or illegal behavior in youth aged 12-17

years. The MST approach views individuals as being part of, and influenced by, a complex network of interconnected systems that encompass individual, family, and extrafamilial (peer, school, neighborhood) factors. In MST, this “ecology” of interconnected systems is viewed as the “client.” To achieve successful outcomes with these youth, interventions are generally necessary within and among a combination of these systems.

- ii. MST addresses multiple factors known to be related to juvenile delinquency across the key settings, or systems, within which youth are embedded. MST uses the strengths of each system (e.g., family, peers, school, neighborhood, indigenous support network) to promote behavior change in the youth’s natural environment.
  - iii. The goal of MST is to empower parents, that is, assure they have or develop the skills and resources needed, to address the difficulties that arise in raising children and adolescents and to similarly empower youth to cope with family, peers, school, and neighborhood problems. This is done in part through the mobilization of indigenous (i.e., naturally occurring or preexisting) child, family, and community resources that support the long-term generalization and maintenance of changes that take place during MST treatment.
  - iv. MST teams address substance misuse with evidence-based interventions, including drug testing if needed. Teams may receive the Contingency Management booster, or another substance misuse booster, depending on the caseload and clinical needs of the team.
- f. MST-Psychiatric (MST-Psych) includes the addition of a crisis caseworker and child psychiatrist to the MST team to address mental health symptoms in youth and family members. Contractors would fulfill all programmatic requirements and follow all requirements set forth in the ACS Prevention Services Standards and Indicators (2021) (Document - 08); all federal, state, and local laws, rules, and regulations pertaining to preventive services and aftercare for juvenile justice; and follow any ACS guidelines and procedures associated with or developed for this program.
- g. Contractors would make swift, appropriate, and accessible outreach to families. Contractors would be prepared and have the processes in place to receive referrals from ACS and provide swift outreach to youth and their families. ACS staff will conduct a prompt assessment of every youth and family referred by the New York Family Court, by non-secure or limited secure placement providers, or by other referral sources and will refer appropriate families to the contractor. Once a referral is received, contractors would assign a therapist within 72 hours.
  - i. For Alternative to Placement referrals, the contractor’s staff will meet the family at the dispositional hearing and accompany the youth and family to the probation intake meeting and sign necessary intake forms.
  - ii. For other referrals, contractor will assign a therapist within 72 hours and schedule to meet with the family to describe the intervention and complete necessary intake forms.
- h. Contractors would provide prompt, targeted, effective, time-limited, model-adherent services that directly address the challenges and needs of youth and families being served under this intervention. Services would be provided for a minimum of six months, unless a youth’s placement ends prior to program completion. Youth with an aftercare placement of less than six months may be referred to the program on a case-by-case basis.
- i. Contractors would be available 24 hours a day and seven days a week and therapeutic sessions are held a minimum of two times per week, unless the therapist makes an intentional decision to reduce sessions in an effort to assess family independence and the generalization of treatment gains. This decision must be appropriately documented. Since

family crises do not always occur during regular business hours, contractors must respond to youth and families outside of regular business hours, including weekends and holidays. Contractors would organize staff coverage schedules to minimize the risk of staff burnout while appropriately meeting the needs of youth and families in crisis.

- j. Contractors would seek to provide services that facilitate strengthened youth and family functioning and improved outcomes in key areas, including school, health, mental health, stable housing, stable income, and justice system involvement.
- k. Contractors are required to collaborate with juvenile court stakeholders, including the Department of Probation, youth attorney's, ACS' Division of Youth and Family Justice staff (including JJI and Close to Home), and non-secure and limited secure placement staff.
- l. Contractor's staff may be required to testify in court.
- m. Contractors will design a comprehensive incentive program that motivates youth to meet the expectations of the court, the Department of Probation, Close to Home workers, parent/caregivers, or others. Incentive program must include a \$500 stipend issued to each youth at a schedule set at the beginning of treatment, when youth achieve set goals (such as attending a set number of school days or other activities), other goals set by the parent/caregiver, and at the completion of the program. ACS must review and approve contractors' incentive guidelines, and contractor must maintain comprehensive records detailing stipend distribution. These incentives will not be attached to the MST clinical intervention.
- n. Contractors will provide additional support to these youth and families to improve educational outcomes and strengthen participation in pro-social activities and address housing and economic stability by:
  - i. Staffing an Education and Employment Specialist (EES) for MST or Psych Crisis Worker for MST-Psych who has expertise in resolving challenging educational issues, identifying pro-social activities for youth, and encouraging referrals to support programs. Support programs can include other ACS CBA programs, such as the Mentoring and Advocacy program (MAAP) or Fair Futures, a long-term coaching program that supports youth's educational and career goals, as well as community-based organizations. They would also be responsible for identifying employment opportunities for youth and caregivers. The EES will be expected to work in collaboration with ACS's Education and Re-entry units;
  - ii. Establishing relationships with community-based organizations that can provide youth with pro-social activities, including educational support and/or tutoring. Formal linkage agreements are not required; however, contractors would have referral processes in place to link youth to pro-social activities, educational supports, and/or tutoring; and
  - iii. Assessing and addressing youth and families' housing and economic circumstances to establish and/or strengthen household stability, enabling youth to safely remain in or return to family settings. This may include, but not be limited to, working directly with the youth and family to secure needed resources and referring families to community-based organizations with the demonstrated capacity to connect families to economic and concrete resources and services. Formal linkage agreements are not required; however, contractors would have processes in place to make effective referrals and collaborate with community-based organizations to monitor and support securing needed economic and concrete resources and services.

## 2. Evaluation:

- a. This section will be evaluated based on the quality of the program plan for providing

services based on the criteria in this section. It is worth a maximum of **25 percent** in the proposal evaluation.

#### **D. STAFF QUALIFICATIONS AND TRAINING (15%)**

##### **1. Program Expectations**

###### **a. Required Staff:**

- i. **Program Director:** Responsible for program oversight and management, oversight of the treatment team(s), all reporting, attendance at meetings, stakeholder engagement, financial reporting, etc.
- ii. **Supervisor:** Responsible for supervision and oversight of up to four MST or MST-Psych therapists, the Education and Employment Specialist, and the Crisis Case worker (for MST-Psych team). The supervisor is responsible for communication and collaboration with the child psychiatrist (for MST-Psych team). A supervisor can only supervise therapists assigned to one of the two MST models. Supervisors and therapists must be assigned to an MST or MST-Psych team. Each team must remain separate. Supervisors are responsible for the submission of required compliance reports and completing all required ACS and MST documentation.
- iii. **Therapist:** Responsible for providing either MST or MST-Psych to families and completing all required ACS and MST documentation. MST therapists will have a caseload of four to six families, with an average of five families. MST-Psych therapists will have a caseload of up to four families.
- iv. **Education Employment Specialist:** Responsible for providing support in resolving outstanding educational issues (e.g., requesting records, enrolling students in appropriate schools, and updating individualized education programs [IEPs]) and identifying pro-social and job training/skill building activities for youth. The education/resource specialist is expected to work in collaboration with the ACS' Office of Education Support and Policy Planning, participating in their core advocacy training and ongoing trainings. They will also work closely with the ACS Re-entry unit on workforce development supports.
- v. **Crisis Worker:** Responsible for supporting the MST-Psych team with case management. The crisis worker is able to support the family with immediate needs and maintains resources to connect youth and families to critical supports such as food assistance, medical care, housing, financial support, and other tangible resources. They conduct some clinical assessments and interventions, including crisis response, and participate in group supervision and weekly consultation sessions.
- vi. **Child Psychiatrist:** The Child Psychiatrist's primary responsibility is to function as an integral part of the MST-Psych team providing psychiatric and medical expertise to the team's ongoing assessment and intervention strategies in ways that facilitate adherence to the MST treatment model; psychiatric evaluations of all youth and some family members; liaison and collaboration with other treating medical providers. The child psychiatrist will be trained in the MST-Psych treatment model and must attend one group team meeting per week and be available to meet with the MST experts during site visits for quarterly training boosters.

| Program Competition Pool                    | Slots | Staffing Structure                                                                                                                                                                                                | Maximum Supervisor to Therapist Ratio | Maximum Therapist to Caseload Ratio |
|---------------------------------------------|-------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-------------------------------------|
| <b>1. Bronx/Manhattan</b><br>MST-Psych/MST  | 36    | 1 Program Director<br>1 MST-Supervisor<br>1 MST-Psych Supervisor<br>4 MST-Therapists<br>4 MST-Psych Therapists<br>1 MST-Psych Crisis Worker<br>.2 MST-Psych Psychiatrist<br>1 Education and Employment Specialist | MST & MST-Psych 1:4                   | MST 1:6<br>MST-Psych 1:4            |
| <b>2. Brooklyn/Queens</b><br>MST- Psych/MST | 36    | 1 Program Director<br>1 MST-Supervisor<br>1 MST-Psych Supervisor<br>4 MST-Therapists<br>4 MST-Psych Therapists<br>1 MST-Psych Crisis Worker<br>.2 MST-Psychiatrist<br>1 Education and Employment Specialist       | MST & MST-Psych 1:4                   | MST 1:6<br>MST-Psych 1:4            |
| <b>3. Staten Island</b><br>MST              | 15    | .5-Program Director<br>1 MST-Supervisor<br>3 MST-Therapists<br>1 Education and Employment Specialist                                                                                                              | MST 1:4                               | MST 1:6                             |

b. Staff Qualifications:

- i. Contractors' staff would have the experience and skills necessary to implement the clinical practices and concepts that underlie the program model being used.
- ii. Program Director would have a Master's in Social Work or equivalent degree, experience and skills with the concept and practices of family therapy and behavior management techniques, mental health treatment, as well as knowledge of and experience providing treatment for domestic violence issues and substance misuse issues.
- iii. MST Clinical Supervisors would be highly skilled Masters-prepared clinicians with training in behavioral and cognitive behavioral therapies and pragmatic family therapies (i.e., Structural Family Therapy and Strategic Family Therapy).
- iv. MST Therapists would be Masters-prepared (clinical-degreed) professionals.
- v. MST-Psych psychiatrists are child psychiatrists with M.D. or D.O., board certification or eligibility in Child and Adolescent Psychiatry.
- vi. MST-Psych Crisis Worker would have specific experience working with families in community-based settings and a knowledge of behavioral theory and application along with knowledge of child development preferred. A Bachelor's degree in Psychology, Social Work, Childhood Education, or a related subject area is required.
- vii. The Education and Employment Specialist would have experience in navigating the NYC Department of Education, resolving challenging educational issues, identifying pro-social activities for youth and connecting youth to skill building/employment opportunities.
- viii. Contractors would adhere to all staff qualifications and experience requirements listed in the ACS Prevention Services Standards and Indicators (2021) (Document - 08).

- ix. Contractors would adhere to the specific staff qualification requirements of the MST or MST-Psych program model.
- x. The contractors' staff members would have experience working with youth and have knowledge of the juvenile justice system.
- c. Staff Hiring and Management:
  - i. The contractors' staff members must be cleared with the Statewide Central Register of Child Abuse and Maltreatment (SCR) and the Vulnerable Persons Central Register (VPCR) and complete a criminal background check before providing services to a youth or a youth's family.
  - ii. Contractors would ensure that culturally and linguistically competent services are provided through staff who are responsive to the culture and character of the population served and are fluent in the languages spoken by participating youth and family members.
  - iii. Contractors would ensure that staff are aware of resources to support families living in poverty as well as the impact of poverty, toxic stress, and housing insecurity on family dynamics and child development. Contractors would guide staff to have high expectations for families and what they can achieve, ensuring that families are counseled about career ladders, educational opportunities, financial mobility, and goals for the future of their families.
  - iv. Contractors will utilize established MST staffing resources (recruitment and interview tools) and collaborate with their MST or MST-Psych expert on the qualifications and readiness of applicants.
- d. Staff Training:
  - i. Prior to the provision of services to youth and families, contractors would verify that all appropriate staff receive, and satisfactorily complete, initial training as described below. Contractors would also verify that all appropriate staff members participate in all required activities related to supervision, consultation, fidelity assessment, quality assurance and model adherence, training refreshers, and monitoring.
  - ii. All members of the MST and MST-Psych teams will receive training through MST Services or licensed MST Network Partner Training organizations. This training will include both pre-service and ongoing in-service training and consultation.
    - 1. All staff who will engage in treatment and/or clinical supervision of MST and MST-Psych cases will receive intensive MST Orientation Training and Supplemental MST-Psych Orientation Training.
    - 2. One- and one-half day booster sessions provided by the assigned MST and MST-Psych expert shall occur on a quarterly basis. Treatment teams and supervisors shall receive weekly telephone consultation from trained MST and MST-Psych experts.
    - 3. Supervisors are also required to attend the MST Supervisor Orientation Training.
    - 4. Education and Employment Specialists and Crisis Caseworkers are required to attend the MST Orientation training to understand the treatment families are receiving. In addition, they will be required to attend trainings and meetings conducted by ACS related to education and career development.
  - iii. Contractors are required to complete all required trainings set by the ACS Prevention Services Standards and Indicators (2021), outlined in Document - 08. This includes the ACS-mandated onboarding training and annual requirements. Contractors would use the ACS Workforce Institute course registration and course approval system.
  - iv. Contractors would require staff to attend all training required by ACS and DYFJ including training on:

1. The juvenile justice system, including the court process and testimony preparation;
  2. The provision of neighborhood-based services, including training on community characteristics, resources, and needs, and how to successfully negotiate services for children within a neighborhood-based context; and
  3. Understanding and undoing implicit bias.
- v. Contractors would provide worker safety training to all therapeutic staff and supervisors.
  - vi. Contractors would incorporate a supervisory system into their staff training that supports direct-service staff and guides their ongoing practice.
  - vii. In designing staff training, contractors would engage and encourage the participation of representatives from community-based service providers who provide culturally appropriate and linguistically-supported programs, including services for LGBTQ youth, such as local hospitals, police precincts, and drug treatment centers, as well as community residents.

## 2. Evaluation

- a. This section will be evaluated based on the quality of the program plan for providing services based on the criteria in this section. It is worth a maximum of **15 percent** in the proposal evaluation.

## E. PROGRAM LOCATIONS, ACCESSIBILITY, AND INCLUSIVITY STANDARDS (10%)

### 1. Program Expectations

- a. Contractors would operate a program office that is within one or both boroughs they are awarded to serve. Program offices do not have to be identified in the proposal; however, contractors must demonstrate site control (e.g., ownership or an executed lease) before the contract start date. Given that most services will be home-based, ACS may approve proposals from proposers who have offices located outside the specific borough(s) they are proposing to serve. However, these sites must be in New York City and easily accessible (under 30 minutes) by public transportation from the borough the contractor is proposing to serve. All sites are subject to ACS approval and must comply with ACS policies.
- b. Contractors would provide all therapeutic services in each youth's home unless provision of home-based services would cause hardship to the family or preclude or compromise the safety of the youth, family, and/or the therapist. Under these circumstances, therapeutic services would take place at an alternative location within the community as determined by the family and the program. Alternative locations may include the youth's school, community-based mental health clinics, community-based after-school programs, and other community settings that are not the contractor's program offices or facilities.
- c. Contractors will be required to collaborate with juvenile justice stakeholders and attend any necessary court hearings, ACS meetings, probation appointments, school conferences, and non-secure or limited secure placement transition meetings.
- d. Contractors would provide services during the hours of operation that are designed to meet the needs of the youth and families being served and as required by MST Services. This strategy must include flexible hours to accommodate school hours and working family members in a manner that is least disruptive to youths' and families' daily life including, religious activities, medical and health-related conditions, and neighborhood safety

conditions. In addition, staff would be on-call and available 24 hours a day, seven days per week to address any crisis that arises.

- e. Contractors would assess the communication skills of each youth and family to be served and address all identified family literacy limitations so that both oral and written communications occur at an appropriate level to enable the youth's and family's full participation in and understanding of the services being offered.
- f. Contractors would provide culturally and linguistically competent services through staff who are representative of the population served and fluent in the languages spoken by participating youth and families. If translation services are needed, contractors would provide translation services at no additional cost to ACS.
- g. Contractors would have a strategy to guide staff in balancing the task of delivering program content with being responsive to a family's cultural beliefs and immediate circumstances.
- h. Contractors would make services accessible to clients with physical disabilities, which may include, but are not limited to, offering Telecommunication Device for the Deaf (TDD) services; raising staff awareness about serving people with disabilities; using large-print informational reading materials; and establishing referral protocols to programs that serve people with disabilities.
- i. Contractors would recognize and work to redress the historical legacy of current racial inequities that result in differences in the application of practices, policies, and experiences of families involved in the child welfare and juvenile justice systems. Contractors would examine the factors that drive these disparities and implement strategies to address them. Strategies could include, but are not limited to, establishing a racial equity committee within the organization, conducting ongoing assessments of equity, and developing strategies to address equity in hiring practices and advancement opportunities.
- j. Contractors would adhere to ACS's policies and procedures regarding the equitable and sensitive treatment of Lesbian, Gay, Bisexual, Transgender, and Questioning (LGBTQ) youth and their families, and all applicable federal, state, and local laws concerning the care and custody of youth who identify as LGBTQ.

## 2. Evaluation

- a. This section will be evaluated based on the quality of the program plan for providing services based on the criteria in this section. It is worth a maximum of **10 percent** in the proposal evaluation.

## F. MONITORING, QUALITY ASSURANCE, AND REPORTING (10%)

### 1. Program Expectations

- a. Case Record and Recordkeeping:
  - i. Contractors would comply with the specific policies and procedures regarding assessment, case documentation, evaluation, and quality assurance measures for the evidence-based service model being used, including the use of databases provided and operated by the model provider, and would make these data available to ACS and other parties for monitoring and evaluation.
  - ii. Contractors would maintain adequate case files and fiscal records and ensure that staff follow appropriate recordkeeping practices and procedures, in a manner compliant with all existing federal, state, and local laws, rules, and regulations. Recordkeeping also must be consistent with policies, procedures, and standards promulgated by ACS,

including the utilization of electronic data management systems such as the New York State system of record for all child welfare cases, CONNECTIONS (CNNX) and ACS's system for tracking the provision of prevention services, the Preventive Organization Management Information System (PROMIS), and any successor systems of record.

- iii. Contractors would collect and maintain data to report to ACS and model developers on program performance. This data would be used to measure the program's performance in delivering the expected outcomes outlined in this RFP. Contractors would be fully responsible for ensuring completeness of this data and for the maintenance of any internal systems used to collect and maintain the data. Contractors performing evidence-based models would utilize any information systems required by the model developer(s). ACS will work collaboratively with contractors to ensure that the data being collected will effectively track.
- iv. Monthly and quarterly data reports will be submitted to ACS as requested.
- v. Contractors would provide sufficient information to ACS and any applicable evidence-based program consultants to enable them to collect data on and monitor additional performance indicators as appropriate and as part of a full evaluation process.
- b. Quality Assurance:
  - i. Contractors would comply with ACS and any proposed evidence-based program policy and procedures regarding evaluations, best practices, and improvement strategies as appropriate.
  - ii. Contractors would work with ACS and any applicable evidence-based program consultant and Preventive Scorecard consultants and monitors to ensure performance standards are maintained, including, but not limited to, scheduling site visits, access for case record reviews and evaluations, and attendance at pertinent meetings and trainings. In addition, contractors would fully comply with the requirements of Document – 08, ACS Prevention Services Standards and Indicators (2021).
- c. Expected Outcomes:
  - i. Contractors would design interventions to promote ACS's goals for youth and families and should include a built-in capacity for providers to maintain data that tracks individual performance and outcomes and to use this data to facilitate a continuous quality improvement process.
  - ii. Contractors would comply with ACS policies, procedures, and systems regarding assessment, monitoring, evaluation, quality assurance, compliance, best practices, improvement strategies, and technical assistance and would provide all information necessary to allow ACS to fulfill these responsibilities.
  - iii. Contractors would track and report outcomes to demonstrate effectiveness throughout the contract term. Contractors would strive for and must be able to demonstrate quantitative and qualitative outcomes achieved for the youth and families being served. Expected outcomes, with concrete benchmarks and timelines to be set collaboratively with the programs, would include, but not be limited to the following:
    - 1. Clinical model adherence;
    - 2. Strengthened stability in the family or caregiver setting, as measured by the avoidance of crisis, stability in living at home, and level of social functioning of the child;
    - 3. Improved school attendance and improved school achievement, as measured by school attendance rates, grades, and progress toward graduation;
    - 4. Intervention completion rates;
    - 5. Avoidance of involvement in the PINS, juvenile justice, and criminal justice systems,

as measured by arrest records and family court appearances; and

6. Avoidance of court-ordered remand or further placement into ACS custody.
- d. Contractors will be held accountable for reporting on programmatic outcomes, maintaining fidelity to program models, maintaining all financial records and complying with all ACS policies and standards. The ACS Contract Manager in the Division of Youth and Family Justice will serve as the primary point of contact for support, reviewing all budgets and budget modifications, analyzing invoices, conducting site visits, monitoring model fidelity, and tracking contract compliance in real time. Both parties will endeavor to identify monitoring activities and feedback loops to understand provider progress and compliance with and build upon best practices. Contractors would allow ACS to make regular announced and unannounced site visits to assess contract compliance. Contractors would engage in regular communication with an ACS Contract Manager to discuss progress, identify challenges, and develop program improvements. Contractors would use the ACS Contract Manager as the primary point of contact at ACS. Contractors would submit regular reports as required and requested by ACS using information systems prescribed by ACS. Contractors would also be required to participate in all quality assurance activities, including collaborative quality improvement, learning collaboratives, and others as required by ACS.
- e. ACS will hold contractors accountable for program performance, which will be assessed through annual metrics. In Year One of the contracts awarded from this RFP, ACS intends to closely monitor start-up activities including client services, but during this time, funding provided to contractors would be exempt from performance-based metrics. Beginning in Year Two, contractors that fail to achieve targets as defined by ACS may be subject to the reduction and redistribution of program slots. Contractors that achieve their targets may receive additional slots. This process will occur on an annual basis thereafter. Service targets may include: frequency of casework contacts, maintaining optimum utilization, complying with length of service requirements, quality of safety outcomes following services, and/or the number of new families served.
- f. At the end of the contract term, ACS intends to conduct a cumulative review of contractor performance that includes annual output metrics as well as outcomes and family feedback. ACS will make a determination of the terms of contract renewal based on these factors and up-to-date community need regarding the number of slots the contractor may receive in the renewal period. This process will enable ACS to keep pace with family needs across the City and reward contractors that achieve positive outcomes for children and families.
- g. Contractors would develop internal oversight and accountability metrics to ensure program success as well as achieve measurable results along the following dimensions required by ACS:
  - i. Effective family engagement, including respectful engagement of families who are hesitant to accept child welfare services;
  - ii. Efficient and effective practice that results in timely achievement of a family's goals and timely completion of services;
  - iii. High level of productivity as evidenced by the program's utilization and completion rates;
  - iv. Improved participant physical, developmental, cognitive, emotional, psychological, health, and/or social well-being; and
  - v. Timely and substantive participation in ACS conferences and Family Court hearings, as appropriate.

## 2. Evaluation

- a. This section will be evaluated based on the quality of the program plan for providing services based on the criteria in this section. It is worth a maximum of **10 percent** in the proposal evaluation.

## **G. BUDGET MANAGEMENT (10%)**

### **1. Program Expectations**

- a. Proposers may not propose an annual budget above the maximum available annual funding for each competition pool. Proposals that propose more than the maximum available annual funding per competition pool may be considered non-responsive. A model budget is provided as an example in Section G.1.j. below.
- b. ACS anticipates that the payment structure for contracts award under this RFP will be a line-item budget reimbursement based on a per-slot cost and average length of service that will not exceed the maximum allowable annual budget for each competition pool.
- c. The proposed budget in Document 03 – Proposal Budget Template should represent the annual costs to provide all services included in the proposed program.
- d. Proposers would propose to operate the program with a budget based on the anticipated available funding stated in the “Basic Information” chart.
- e. Contractors are expected to allocate at least \$500 per youth for stipends as incentives to reach goals. Contractors must also allocate funding to be spent towards fees for programs that meet the educational and pro-social needs of youth.
- f. Contractors’ budgeted costs would enable the effective delivery of services described in this RFP, including staffing, licensing, training, technical assistance, and model fidelity monitoring.
- g. In addition to the operating expenses, the line-item budget for the first year of program operations may also include start-up costs (i.e., costs that are non-recurring and related to implementation of the program) that must be incurred during the first 60 days of the program. No additional funds will be provided for start-up costs; however, start-up costs related to program development and implementation may be reimbursed up to the value of the operating budget for the first 60 days of the program. Therefore, these costs must be included and described as part of the total budget for the first year of the contract. Costs such as office equipment, training materials, furniture, and minor renovation of training/office space may be considered start-up expenses.
- h. ACS expects contractors to coordinate their programmatic, fiscal, quality, and administrative functions with a comprehensive approach to delivering, monitoring, and paying for services.
- i. Below is a model budget for each competition pool. Please note, youth and families assigned to JJI typically present with complex needs that require consistent, sustained therapeutic engagement. To support staff retention and efforts to ensure continuity of care, we are requiring a minimum therapist salary threshold of \$90,000 per year. Required stipends must be allocated at \$1,000 per slot (\$500 per youth). All other amounts are estimates and subject to adjustment by proposer.

| Competition Pool | MST           | Borough | Slots     | PS Budget + Fringe (F) @ 30%                                                                                                                                                         | OTPS Budget                                                                                                                | Total Budget (+ 10% IDC) |
|------------------|---------------|---------|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|--------------------------|
|                  |               |         |           |                                                                                                                                                                                      |                                                                                                                            |                          |
| 1                | MST/MST-Psych | Man/BX  | 36        | PD = \$100K<br>Sup x 2 = \$190K<br>Therapist x 8 = \$720K<br>Crisis Worker = \$60K<br>Psych x .2 = \$70K<br>EES = \$60K<br><br>\$1,200,000 (PS) + \$360,000 (F) = <b>\$1,560,000</b> | Model = \$240K<br>Rent = \$50K<br>Util = \$10K<br>Ops = \$80K<br>Stipends=\$40K<br>Misc = \$78,261<br><br><b>\$498,261</b> | <b>\$2,286,956</b>       |
|                  |               |         |           |                                                                                                                                                                                      |                                                                                                                            |                          |
| 2                | MST/MST-Psych | BK/QNS  | 36        | PD = \$100K<br>Sup x 2 = \$190K<br>Therapist x 8 = \$720K<br>Crisis Worker = \$60K<br>Psych x .2 = \$70K<br>EES = \$60K<br><br>\$1,200,000 (PS) + \$360,000 (F) = <b>\$1,560,000</b> | Model = \$240K<br>Rent = \$50K<br>Util = \$10K<br>Ops = \$80K<br>Stipends=\$40K<br>Misc = \$78,261<br><br><b>\$498,261</b> | <b>\$2,286,956</b>       |
|                  |               |         |           |                                                                                                                                                                                      |                                                                                                                            |                          |
| 3                | MST           | SI      | 15        | PD x .5 = \$50K<br>Sup x 1 = \$95K<br>Therapist x 3 = \$270K<br>EES = \$60K<br><br>\$475,000 (PS) + \$142,500(F) = <b>\$617,500</b>                                                  | Model = \$75K<br>Rent = \$30K<br>Util = \$8K<br>Ops = \$62K<br>Stipends=\$18K<br>Misc = \$35,977<br><br><b>\$228,977</b>   | <b>\$940,530</b>         |
|                  |               |         |           |                                                                                                                                                                                      |                                                                                                                            |                          |
| <b>TOTALS</b>    |               |         | <b>87</b> | <b>\$3,737,500</b>                                                                                                                                                                   | <b>\$1,225,499</b>                                                                                                         | <b>\$5,514,442</b>       |

**2. Evaluation**

- a. The Budget Management section will be evaluated based on program expectations outlined throughout the RFP based on the criteria in this section. It is worth a maximum of **10 percent** in the proposal evaluation.

## **Section 3 – Payment Structure**

### **A. Payment Structure**

The projected funding available for the contracts awarded from this RFP is \$16,543,326 (\$5,514,442 annually). ACS expects to award three contracts. Payment will be based on a line-item budget structure, with monthly invoices reflecting expenditures against an approved budget. Proposers may not propose an annual budget above the maximum available annual funding for the competition pool for which they are applying. Proposals that propose more than the maximum available annual funding may be considered non-responsive.

### **B. Reimbursement**

Monthly reimbursement will be based on an approved, budgeted allocation from the line-item budget. Actual payments will be made via New York City's Procurement and Sourcing Solutions Portal (PASSPort). Providers will invoice monthly in relation to expenses associated with each budgeted line item.

### **C. Cost-of-Living Increases**

Where contractor's industry has experienced an increase in costs (e.g., salary, wage or fringe benefit cost of living increases, a change in the prevailing or living wage, a renegotiated collective bargaining agreement, an industry-wide increase in the Producer Price Index ("PPI") for fuel or energy) that exceeds the Budget, and the Office of Management and Budget ("OMB") or another independent agency has determined in writing that additional funds will be made available to a City agency for the class of contracts pursuant to which contractor provides the same or substantially similar services, then the Department shall reimburse contractor for such increases in costs to the extent that such increases have been authorized by the City for contracts within such class of contracts and to the extent that funds are appropriated for such purposes. Any cost-of-living increase will not be effective unless and until an amendment to the Agreement is registered pursuant to Charter § 328.

## **Section 4 – Basis for Contract Award and Procedures**

### **A. Proposal Evaluation**

All proposals accepted by ACS will be reviewed to determine whether they are responsive or non-responsive to the requirements of this RFP. Proposals determined by ACS to be non-responsive will be rejected. Within each competition pool, an ACS evaluation committee will review and rate each responsive technical proposal based on the Evaluation Criteria outlined in this RFP. The proposals will be ranked in order of highest to lowest technical score in each competition pool.

ACS reserves the right to conduct interviews, and/or to request that proposers make presentations or demonstrations, seek clarification from proposers, or request “best and final offers” (BAFOs) as ACS deems necessary and appropriate. Although such activities are permissible, ACS reserves the right to award contracts based solely on the initial proposals received without discussions; therefore, the proposer’s initial submission should contain its best proposed programmatic terms.

### **B. Contract Award**

ACS anticipates making three contract awards, one in each competition pool. Contracts will be awarded to the responsive and responsible proposers whose proposals are determined to be the most advantageous to the City, whose price does not exceed the maximum funding set forth in the RFP, taking into consideration the criteria and other factors which are set forth in this RFP. Within each competition pool, proposals will be ranked in descending order of their overall average technical scores, and ACS will establish a shortlist through a natural break in scores for technically viable proposals in each competition pool. ACS will make award recommendations to the highest technically ranked proposals in each competition pool. In the event of a tie score, the proposal scoring higher in Section C, Program Model and Approach, will be recommended for an award.

Contract awards will be subject to a positive responsibility determination and the timely completion of contract negotiations between ACS and the awarded proposers.