

Innovative and Sustainable Solutions to End Homelessness Fund REQUEST FOR PROPOSALS

Onboarding and Continuing Education Training Program

The Office of Homelessness Prevention and Intervention, Innovative and Sustainable Solutions to Ending Homelessness Fund

The Lexington-Fayette Urban County Government's Office of Homelessness Prevention and Intervention (OHPI) provides coordination of services, facilitation of programs focused on ending homelessness, advocacy for system and policy changes, and education of the community at-large on the solutions to ending homelessness. The OHPI is the designated community Collaborative Applicant and lead agency for the local Lex End Homelessness Continuum of Care (CoC) as well as the locally designated Homeless Management Information System (HMIS) database administrator. The Lex End Homelessness CoC works with a vast network of over 50 community-based organizations including hospitals, emergency shelters, permanent housing providers, private developers, supportive services providers, insurance companies, and employment organizations. Policies, procedures, and plans developed by the CoC reach out 2,000 staff members across Fayette County. OHPI offers professional development and technical assistance to the network of CoC partners.

The Innovative and Sustainable Solutions to Ending Homelessness Fund provides financial support to new and/or innovative projects that implement research-based best practices to prevent and reduce homelessness in Lexington. Based on the [2021 Lexington Strategic Plan](#) to reduce and end homelessness, the purpose of this Request for Proposals is to solicit proposals for instructional design contracting providing design and development of professional courses, community education classes, and general CoC member organization introductions that will be deployed digitally/virtually. Proposals should align systems of care and organizations across Fayette County to prevent and end homelessness.

Instructions

Please submit all required narrative and attachments no later than the deadline indicated below:

Proposal Deadline – 2 P.M. ON APRIL 28, 2022

Proposals received after this deadline or incomplete proposals will not be considered.

For More Information:

Lexington-Fayette Urban County Government
Division of Central Purchasing Todd Slatin, Director
200 E. Main Street
Lexington, KY 40507
Office: (859) 258-3320
E-mail: tslatin@lexingtonky.gov

1.0 Background

Historically, training opportunities provided by the CoC and OHPI have been intensive in-person, group-based events taking place during the Annual Lex End Homelessness Academy and Community Summit. Due to the COVID-19 pandemic, which required a pivot to virtual training and the expansion of our CoC membership, have illuminated several key challenges in the CoC's and OHPI's training approach. Challenges which included but were not limited to; staff time for preparation and delivery, decreased participant engagement, lack of ability to meet in person on a regular basis, quick staff turnover, and inadequate tracking of training.

Case managers play a vital and at times life-saving role for individuals experiencing homelessness. The goal of case management is ["to ensure timely access to and coordination of fragmented medical and psychosocial services for an individual while considering costs, preventing duplication of services and improving health outcomes."](#) Case manager roles include intake, assessment of needs, service planning and coordination, ongoing monitoring, and client advocacy. Case managers may also engage in crisis intervention, discharge planning and direct services to increase the psychosocial wellbeing of the client.

In the last few decades, five major models of case management have emerged: (1) General or standard case management (SCM); (2) Intensive case management (ICM); (3) Clinical case management (CCM); (4) Assertive community treatment (ACT); and (5) Critical time intervention (CTI). All models emphasize the importance of care coordination. Care coordination activities may include identifying client health needs and prioritizing appropriate actions, developing a plan that is both cost effective and feasible to implement, promoting the client's understanding of health information and providing ongoing monitoring and evaluation, among many others.

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A recent systematic review examining case management interventions between 1994 and 2008 revealed several benefits for individuals experiencing homelessness. Positive effects included increased housing stability, increased engagement in both medical and nonmedical services, reduced utilization of high cost health system services, improved mental health, reduced drug and alcohol use, and improved quality of life. Outcomes varied across different studies and case management models, as well as the individual program design. All five models of case management have been shown to be beneficial for individuals experiencing homelessness, especially intensive case management (ICM). A 2012 study revealed that ICM reduced substance use and psychiatric illness symptoms over a year. ICM also reduces the number of days homeless, as well as use of the emergency department and hospitalizations.

Case management intervention reduces homelessness by connecting clients to rent subsidies, permanent supportive housing, rapid rehousing and housing first programs. Furthermore, in addition to the benefits detailed above, case management also helps increase insurance coverage. These outcomes can help to offset costs associated with emergency shelters and hospital stays, as well as reduce the use of over-utilized health services and increase the use of under-utilized health services. Various studies conducted by communities across the United States document the costs of

homelessness. In general, a person experiencing chronic homelessness costs taxpayers about \$35,578 per year in over-utilized services.

Despite the documented benefits of case management, organizations still may face multiple challenges in implementation. For example, implementing case management model assertive community treatment (ACT) in programs funded through the U.S. Department of Substance Abuse and Mental Health Services Administration (SAMHSA) Treatment for Homeless Program was met with multiple challenges. These included the recruitment and retainment of clinical staff, vital clinical staff funding, recruitment and retainment of individuals experiencing homelessness, involvement of family, friends and significant others, staff knowledge development, and appropriate billing for outreach and delivery of services both on-site and in the community.

The onboarding process is extremely important to ensuring successful client outcomes as well as employee retention. The onboarding process should start as soon as an offer is accepted, typically with a welcome packet of helpful information about the company. Orientation comes next and is typically one of the first steps in the onboarding process. This usually includes the collection of necessary human resources, payroll and other benefit forms. The onboarding process should not end here; this is a common mistake for many. The onboarding process should continue, allowing the employee to assimilate to the culture of the organization, while developing the appropriate skills and tools to do so.

The onboarding process sets the tone of the relationship with the case manager and is imperative for professional development. A 2015 Forbes article titled “How to Get Employee Onboarding Right” cited a study published in 2013 by the Academy of Management Journal, which found that the 90 days of employment, often called the probationary period, is “pivotal to building rapport with the company, management and coworkers.” In this case, not only the organization, but also the entire homeless service delivery system.

Companies need to create a culture where great case managers want to work. A strong culture includes a positive work environment that fosters respect, competitive compensation and engaged case managers. An engaged workforce expands recruitment opportunities for the company. Furthermore, a strong culture encourages and supports ongoing education through continuous trainings, allowing case managers to support diverse patient populations with complex needs more effectively.

The curriculum may include topics such as motivational interviewing, relationship building and working with interdisciplinary teams, trauma-informed care, processes and procedures for assessment and intake, as well as care planning and coordination, the importance of accurate data collection and entry, completing effective home visits, and working with special populations and their needs. Additionally, the curriculum may include knowledge of the overall CoC system as homeless delivery systems are complex and unique to each community. Newly hired case managers need to understand the overall homeless delivery system and the roles and responsibilities of all participating organizations so client referral and access to supportive services is streamlined and effective in ending the person’s homelessness. Effective client service should not be impacted by a case manager’s employment tenure.

2.0 General Provisions

2.1 Funding

The funding period is for one (1) year with time extensions based on proposed timeline for completion. LFUCG will conduct ongoing evaluation of the project to determine effectiveness including whether adjustments may be needed in order to maximize outcomes and return on investment.

LFUCG intends to award only one (1) proposal with funding via the American Rescue Plan Act and allocated to the Innovative and Sustainable Solutions to Ending Homelessness Fund. Unless otherwise agreed upon between the LFUCG and the selected applicant, LFUCG reserves the right to make multiple awards of varying amounts.

Contractors must comply with 2 CFR 200.

2.2 Proposal Submission

In order to be considered, proposals must be received by the April 28, 2022, deadline. The proposal must contain the required documents and respond to each of the required narrative questions to be complete.

Proposals containing significant omissions of required information will be considered non-responsive and will be removed from the funding process. Significant missing responses to narrative questions constitute an incomplete proposal.

The final decision regarding proposal completeness and penalties will be determined by the Director of the Office of Homelessness Prevention & Intervention.

2.3 Acceptance/Rejection of Applications

The LFUCG reserves the right to reject any proposals which may be considered irregular, show serious omission, contain unauthorized alteration of form, or are incomplete.

The LFUCG reserves the right to accept or reject any or all applications in whole or in part, with or without cause, to waive technicalities, to implement scoring penalties, or to accept applications or portions thereof which, in the Urban County Government's judgement, best serve the interests of Urban County Government.

2.4 Requests for Clarification

The LFUCG reserves the right to request clarification of information submitted and to request additional information (to clarify the information submitted) of the applicant either orally or in writing. This may include negotiation of funding amounts, outcomes, and other adjustments prior to the execution of a funding award.

2.5 Timeline

This Request for Proposals is being released on March 15, 2022, and is made available to the public and all potentially eligible applicants.

Completed proposals are due no later than 2 p.m. on April 28, 2022, and late or incomplete proposals will not be accepted or evaluated.

The LFUCG intends to conduct proposal evaluation immediately following the proposal due date and intends to make funding announcements no later than May 26, 2022. This timeline is subject to change without notice.

No funds may be expended prior to the execution of a funding agreement and grantees will not be reimbursed for pre-award costs.

2.6 Evaluation

Proposals will be evaluated by a neutral panel, the Program Performance & Evaluation Committee of the LFUCG Homelessness Prevention & Intervention/Lex End Homelessness Continuum of Care Board, all of whom have some expertise in the field of human services but no affiliation with any applicant.

Scoring criteria are outlined in Section 4.0 Evaluation.

2.7 Selection

The highest scoring proposal as determined by the panel will be recommended for funding and contacted to negotiate a funding agreement. Should no agreement be reached, the second highest scoring applicant will be contacted.

2.8 Reporting

The funded project will be required to submit quarterly financial and project timeline reports. Failure to submit complete reports on time will delay processing of grant payments and affect the grantee's competitiveness for any future funding opportunities with LFUCG.

Contractor must comply with 2 CFR 200.

3.0 PROPOSAL FORMAT

The Proposer must submit the proposal via the LFUCG's Procurement Software at <https://lexingtonky.ionwave.net/Login.aspx>. Adherence to the proposal format by all proposers will ensure a fair evaluation regarding the needs of the CoC. Proposers not following the prescribed format will be deemed non-responsive.

A complete proposal contains each of the following components:

- One Page Cover Sheet containing:
 - Organization or Lead Applicant Name and Authorized Representative
 - Organization or Lead Applicant Address, Phone Number and E-mail
 - Title of proposed project
 - Brief summary of proposed project (250 words or less)
- Project Narrative responding to each of the evaluation criteria described in Section 3.0 and utilizing format described below (15 pages or less)
 - Double spaced
 - Single sided
 - Times New Roman 12-point font with 1-inch margins
 - Page numbers in bottom right corner of complete submission
- Section 1: Qualifications of the firm and key personnel
This section shall provide the professional credentials and expertise of the proposer and key personnel assigned to this project. Although standard personnel resumes

may be included as attachments to the proposal, amplification specific to this solicitation is required in this section. Proposers are asked to specifically note whether proposed project personnel have any prior public sector experience directly implementing homeless services geared digital/virtual training and education programs at a city, county, or state level.

The absence of such project specific information shall cause the proposal to be deemed non-responsive.

- Section 2: Proposed method to accomplish the work

In this section of the proposal, proposers must provide a detailed description of their approach for accomplishing the tasks specified in the scope of work. This section shall include a work plan, schedule, and a project management plan that will detail all lines of authority and communication which will support all the project requirements and logically lead to the deliverables required in this RFP.

- Section 3: Staff availability and past performance

Timely completion of the tasks outlined for this project is of critical importance. Proposers are to provide a brief description of their current projects and the availability of key personnel proposed in this project. A matrix shall be provided which will list all project work from the past two (2) years to date. Information for each project shall include the following:

- ✓ Project name
- ✓ Project Client
- ✓ Brief Description of project tasks
- ✓ Period of Performance, including whether the contract has concluded or not.
- ✓ Project Point of Contact (Name, email address and telephone number)

• Cost proposals, line-item budget and budget narrative (2 pages or less)

This section shall provide the total costs by work task, development phases, software costs including licensing, and sub-contractor cost, including all expenses and fees to be charged to LFUCG for providing the services described in 3.0.

4.0 SCOPE OF WORK

3.1 General Overview

The CoC and its partners are seeking a contractor for a full scope of instructional design and content development with a focus on mobile learning, digital content, and learning technology solutions. The selected contractor should have the skills and experience to complete the tasks.

The full scope of work includes the following:

- Developing a welcome packet for new hires of participating organizations with valuable information about OHPI, the CoC and their organization's role, as well as the CoC's mission, vision and case manager expectations.
- Preparing an orientation program for new case managers including training on such topics as motivational interviewing, relationship building and working with interdisciplinary teams, trauma-informed care, processes and procedures for assessment and intake, as well as care planning and coordination, the importance of accurate data collection and entry, completing effective home visits, and working with special populations and their needs.
- Developing partnerships with organizations or local university to provide the trainings, all of which should be offered through an online training portal.

- Providing and developing an ongoing training curriculum for professional development.
- Standard videos and downloadable material from each provider in the community to educate a new case manager on services, requirements, and expectations.
- Include an onboarding program to educate community members on how to help a person experiencing homelessness, including who best to contact to connect a person experiencing homelessness with the services and resources they need.
- Full scope instructional design, development and project management including quality assurance.
- Create mobile-responsive eLearning content.
- Ability to create instructional/educational videos, multi-media animations and custom graphics.
- Ability to create digital or web-based toolkits.
- Collaborating with CoC members including front line staff and OHPI to understand the training needs.
- Engaging outside subject matter experts to shape course content for maximum impact in an online format.
- Design and delivery training courses.
- Assist with the creation of course redesign and development.
- Identifying opportunities for upstream interventions, as an additional components for development and provide opportunities for greater cross-partner collaboration; and
- Provide ongoing related technical assistance around course development and deployment.

The final deliverable will be a comprehensive onboarding and continuing education curriculum that the whole community can utilize to create a more cohesive, reliable, consistent, and community-response level approach to ending the experience of homelessness.

3.2 Project Plan and Management

In collaboration with CoC staff and members of the CoC, the contractor shall create a project timeline and plan that includes an implementation plan. The contractor should provide any presentation materials to the CoC staff CoC Board two (2) weeks in advance of any public or joint meetings.

The project timeline should also specify at the outset the need for any administrative information in order to provide information in a timely manner to the contractor.

The contractor shall submit a timeline for milestones and deliverables within 10 business days of contract award. The CoC staff and CoC Board will submit any feedback on the proposed timeline to the contractor within 10 business days or less.

The contractor will be responsible for coordinating with CoC staff and the CoC Board to ensure that completion of products and deliverables remains on schedule and aiding local stakeholders and CoC partners as needed to complete tasks successfully. A schedule for regular updates to the CoC's Program Performance and Evaluation Committee should be included in the project timeline.

3.3 Information Collection and Production

The contractor shall work with the CoC staff and the CoC's Advocacy, Issues, and Program Committee to review software and eLearning options and provide recommendations and incorporation techniques on the <http://lexendhomelessness.com/> website.

The contractor shall work with the CoC staff and the CoC's Advocacy, Issues, and Program Committee to review all components of the participating homeless services systems, inclusive of all staff, programs, and service delivery points.

The contractor should use quantitative, as well as qualitative, sources of information to inform the final set of courses for development. This may include focus group meetings or interviews with stakeholders from multiple sectors, including government, non-profit, community-based organizations, private business, advocacy groups, legal, educational or research institutions, and other groups which work with people experiencing a housing crisis.

The initial set of courses shall be incorporated into a presentation to share with the CoC Board, all partners, stakeholders, and the public. Draft presentations shall be available two (2) weeks in advance of any stakeholder or CoC meeting to allow partners and participants an opportunity to review the information in advance.

3.4 Development and Facilitation of a Robust Stakeholder Participation Process

All CoC members as well as key community-based organizations will be provided an opportunity to record an educational video about their agency, services, how to engage, and any other items of community interest. Some members will be asked to assist in the development in more than one online training course based on services provided and integrated care models in the community.

Together with the CoC and its partners, the contractor will assist with implementing a meaningful member-centered engagement and participation process. Respondents should describe their approach in detail and estimated number of engagements that may be necessary as well as tasks related to member specific training and participation, acknowledging the limitations and constraints created by the COVID-19 pandemic for in-person meetings and interviews.

The contractor will coordinate engagements with assistance from the CoC staff as well as any logistics for any production. Feedback from stakeholder engagements and participation shall be documented and integrated into the final training and education curriculum.

3.5 Qualifications

Consultants should demonstrate in detail:

- Experience designing highly interactive and engaging training sessions;
- A comprehensive understanding of learning management systems and best practices in instructional design with a blended learning approach;
- Commitment to using asset-based and racially/social-just language in communicating about the work of the CoC, community-based members, and the community the CoC serves; and
- Familiarity with homelessness services, social work, intensive case management, housing first principles, and integrated service delivery models.

4.0 EVALUATION

Factor	Points
Methodology and proposed approach to provide services as described in the 3.0 Scope of Work	35
Demonstrated understanding of the project deliverables and proposal responsiveness	20
Qualifications	20
Cost Analysis	25
Total Points	100