



Allegheny County Department of Human Services

# Request for Proposals

## To Expand Allegheny County's Continuum of Supportive Housing (Recovery Homes, Bridge Housing & Scattered-Site Shelter)

**RFP Posting:**

Monday, January 5, 2026

**Informational Session:**

10 a.m. Eastern Time on Thursday, January 22, 2026

**Deadline for Questions:**

3 p.m. Eastern Time on Friday, February 27, 2026

**Submission Deadline:**

3 p.m. Eastern Time on Thursday, March 12, 2026

**Estimated Award Decision/Notification:**

May 2026

Allegheny County Department of Human Services  
One Smithfield Street Pittsburgh, PA 15222

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# Acronyms and Definitions

Unless the context indicates otherwise, the following capitalized words are defined as follows for purposes of this RFP:

1. **Agreement**: A contract negotiated between Allegheny County and the Successful Proposer to provide the Contract Services
2. **Allegheny County**: A home rule county and political subdivision of the Commonwealth of Pennsylvania
3. **Contract Services**: The specific services that the Successful Proposer agrees to provide to the County in response to this RFP, as more particularly described in the Scope of Services in the Agreement
4. **Clustered-site housing**: Multiple housing units in close proximity but not in the same building or configured as a single location
5. **DHS**: [Allegheny County] Department of Human Services
6. **House Manager**: The staff member responsible for oversight of a Recovery House
7. **Justice-Related Services (JRS)**: An array of supports designed to work with the Allegheny County Jail, District Courts, the behavioral health system and other community service providers to assist people with mental illness and/or co-occurring mental illness and substance use disorder who encounter the criminal legal system
8. **Level-of-Care Assessment (LOCA)**: A face-to-face interview to determine the severity of alcohol and/or other drug use and the resulting degree of impairment, for the purpose of determining the individual's most appropriate placement and treatment
9. **MAT**: Medication-Assisted Treatment
10. **MI/SMI**: Mental Illness/Serious Mental Illness
11. **Proposal**: A completed Response Form, with specified attachments, submitted in response to this RFP
12. **Proposer**: The individual, non-profit organization, or for-profit organization or business submitting a Proposal in response to this RFP
13. **Participant**: An individual participating in a Brief Reentry House program
14. **Response Form**: The Word document in which Proposers respond to requested information about this RFP
15. **RFP**: Request for Proposals
16. **Scattered-site housing**: Individual housing units that are located throughout a community, rather than being concentrated as a single site or in the same building
17. **Site-based housing**: A housing program in which all units are located together in a single building
18. **SUD**: Substance Use Disorder
19. **Successful Proposer**: The Proposer(s) selected by the County to provide the Contract Services

20. **Supportive Housing:** Programs that provide a combination of supportive services and housing to help individuals and families improve their health and wellbeing, connect with community resources to live more independent and productive lives, and achieve and maintain stability

Other terms shall have the meaning or definition as stated in the RFP.

# The RFP at a Glance

## ***Purpose***

Allegheny County, through its Department of Human Services (DHS), is soliciting Proposals from one or more qualified Proposers to expand and enhance the supportive housing continuum in Allegheny County by adding *up to*:

- 48 additional Recovery Home beds, with an emphasis on serving individuals who have recently engaged in outpatient substance use treatment or are newly seeking to initiate treatment
- 170 additional Bridge Housing beds for several different target populations of individuals who are unstably housed
- 36 additional scattered site shelter beds for individuals experiencing homelessness

By adding 200+ beds to our supportive housing continuum, we aim to fill critical gaps and enhance our capacity to meet community needs.

## **OPTIONAL:**

Please join us for a [virtual informational session](#) on Thursday, January 22, 2026, from 10 a.m. to 11 a.m. Eastern Time. Attending the virtual session is not required to submit a Proposal. For more information, see Section 4.1.

## ***Award Details***

DHS anticipates entering into multiple Agreements for Supportive Housing services. However, the issuance of this RFP does not oblige the County to accept any Proposal or enter into an Agreement with any Proposers. The County reserves the right to reject all Proposals and not enter into an Agreement for the Contracted Services.

Supportive Housing programs will be funded through a combination of cost reimbursement and a fee-for-service (daily unit) rate.

Proposers should prepare and submit a detailed line-item budget and budget narrative that shows all planned expenses (e.g., one-time capital costs, ongoing utility and maintenance costs, staff) reflective of a realistic estimate of the cost associated with implementing the Supportive Housing service(s) that they are proposing. Please include any planned revenues/sources and/or anticipated sources of funding beyond those available through this RFP.

All proposed budgets will be considered for reasonableness, and DHS will negotiate the final budget with the Successful Proposer(s) and agree upon a budget before a final award is made.

### ***Who can submit a proposal***

Anyone, including but not limited to non-profit organizations, for-profit organizations, small businesses and individuals, is eligible to submit a proposal in response to this RFP. Proposers do not need to have an existing contract with Allegheny County to apply, but they must meet all of Allegheny County's contractual requirements (see Section 6: Contract Requirements for Successful Proposers) and have the programmatic, financial and staffing capabilities to provide the Contracted Services.

### ***What's important to us***

To effectively serve the target populations and meet the goals outlined in this RFP, DHS is seeking Successful Proposers who:

- Are committed and equipped to quickly house and support the target population to help them maintain housing stability
- Are eager to support people in various stages of recovery, including those newly engaged or newly seeking to engage in treatment to manage their behavioral health conditions and those with arrest and incarceration histories
- Have experience and/or want to build capacity to work with the behavioral health treatment community to support Participants
- Are interested in helping Participants stabilize and transition to more independent living
- Demonstrate the ability or have a reasonable training plan to prepare staff to work with diverse populations
- Have experience and/or want to build capacity to employ peer support models in the delivery of effective, quality services
- Can quickly obtain (buy or lease) housing/facilities
- Can achieve scale economies by employing shared staffing models with other programs

### ***Timeline***

RFP Posting	Monday, January 5, 2026
Information Session (see section 4.1 for details)	Thursday, January 22 at 10 a.m. Eastern
Questions Deadline	Friday, February 27 at 3 p.m. Eastern
Last Website and Q&A Update	Thursday, March 5 at 6 p.m. Eastern
Submission Deadline	Thursday, March 12 at 3 p.m. Eastern
Estimated Award Decision/Notification	May 2026

## **Who we are**

DHS is the largest department of Allegheny County government and provides publicly funded services to more than 200,000 people annually, in areas including child welfare, behavioral health, aging, developmental supports, homelessness and community services.

More information about DHS is available at <http://www.allegenycounty.us/human-services/index.aspx>

## **Section 1: Why We Are Issuing this RFP**

DHS currently funds more than 2,300 units of supportive housing, an array of programs that combine housing and supportive services to help people who face complex challenges live more stable and independent lives. The programs operate across a range of models that vary in terms of providers' area of expertise, orientation of supportive services, and program setting and duration. However, the current array falls short of meeting community needs in important ways: 1) existing programs do not adequately support the specialized needs of individuals experiencing housing instability who also have co-occurring mental illness and substance use disorders (particularly those with a primary substance use disorder) and/or criminal legal system involvement; 2) the existing recovery housing system is insufficient to effectively support people entering housing while *beginning* medication-assisted treatment (MAT) and other proven outpatient treatments; and 3) existing capacity falls short of demand for services, both in number of units and in number of units offering 24/7 staffing.

With this solicitation, we expect to strengthen the continuum by adding programs that support specific populations while increasing capacity up to an additional 250 units (an increase of more than 10%). Specifically, this solicitation seeks to enhance the supportive housing service array with the following:

### **A.) Recovery Homes**

Recovery Homes provide safe, supportive and drug- and alcohol-free residential environments where individuals in recovery from unhealthy substance use can live together as a community while they transition to living independently. The existing recovery home system primarily serves people stepping down from higher levels of care. Through this solicitation and other system enhancements, DHS is seeking to expand the availability of safe, substance-free living environments for individuals newly entering treatment, especially MAT, so they can stabilize, establish tools and routines that support their recovery journey, and transition to long-term independence.

## **B.) Bridge Housing**

Individuals whose housing instability is complicated by mental illness, co-occurring disorders and/or past/current criminal justice involvement require a safe living environment and support in order to stabilize and build the tools and resources to pursue more independent and stable long-term living situations. The Bridge Housing Program(s) procured through this RFP will enhance the continuum of supportive housing by increasing capacity and emphasizing the following key priorities:

- Strong linkages to and coordination with behavioral and physical health treatment teams to help participants achieve their goals, stabilize in their recovery and transition to more independent living
- High-quality, person-centered service delivery that meets participants where they are, uses creative and collaborative approaches to increase engagement, and avoids terminating services to individuals due to behaviors related to their behavioral health conditions
- Demonstrated competency in providing responsive, inclusive and trauma-informed services for individuals with primary substance use disorders and/or a history of criminal legal system involvement

## **C.) Scattered-Site Shelter**

Emergency shelter is intended to provide immediate and safe short-term housing for those experiencing a housing crisis. For individuals with additional vulnerabilities that traditional congregate shelters are not designed to address, Scattered-Site Shelter coupled with housing-focused case management can provide a low-barrier first step into housing. Through this solicitation, DHS seeks to expand the availability of Scattered-Site Shelter, increasing capacity by up to 50% and strengthening effective linkages to the full continuum of supportive housing options.

# **Section 2: What We Are Looking For**

DHS intends to enter into an Agreement with one or more Successful Proposer(s) to offer Recovery Housing, Bridge Housing and Scattered Site Shelter at the capacities and within the expected unit cost ranges outlined in the table below.

While DHS expects unit cost to fall within the ranges outlined below, overall program cost may vary according to housing models and staffing configuration. For example, DHS anticipates cost differences in facility-based versus scattered site housing models. Proposers should provide reasonable, well-justified budgetary requests, and final awards will be negotiated with the Successful Proposer(s).

\*Note: Though this is not a requirement, DHS will consider proposals for Bridge Housing programs that concurrently serve:

- The target populations described in B1 and B2 below
- The target populations described in B3 and B4 below

Program Type	Additional Capacity Sought through this procurement	Expected Unit Cost Range	State License/Partner
A. Recovery Housing	Up to 48 beds	\$56-\$64/day	<a href="#">DDAP Certified Recovery Home</a>
B. Bridge Housing			
1. Housing Unstable with Mental Illness (24/7 Staffing)	Up to 60 beds	\$85-\$129/day	<a href="#">HAP Bridge Housing</a>
2. Housing Unstable Co-Occurring with Primary SUD (24/7 Staffing)	Up to 30 beds	\$85-\$129/day	<a href="#">HAP Bridge Housing</a>
3. Housing Unstable with Criminal Legal System History	Up to 30 beds	\$65-\$90/day	<a href="#">HAP Bridge Housing</a>
4. Housing Unstable with Mental Illness	Up to 50 beds	\$65-\$90/day	<a href="#">HAP Bridge Housing</a>
C. Scattered-Site Shelter	Up to 36 beds	\$50-\$75/day	<a href="#">HAP Shelter and Case Management</a>

The following sections detail requirements for each program type.

## A.) Recovery Homes

Recovery Homes are safe, supportive and drug- and alcohol-free residences where individuals in recovery from unhealthy substance use live together as a community while preparing to live independently. Recovery is defined as abstinence from alcohol and other non-prescribed drugs and improvement in one's physical, mental, spiritual and social well-being. Recovery Houses are part of the recovery-oriented system of care and provide Participants with the opportunity to focus on establishing a foundation in treatment, building a support network and a plan for maintaining recovery, and finding a permanent place to live that is conducive to recovery. Individuals build resources while living in Recovery Houses that will continue to support their recovery as they transition to living independently and productively in the community.

The Recovery Homes sought through this solicitation will enhance the County's current program array by increasing capacity and responsiveness to system-wide enhancements designed to successfully serve individuals who have recently engaged in outpatient substance use treatment or are newly seeking to initiate treatment. Whereas the current operation of Recovery Housing in Allegheny County primarily functions as a step-down from inpatient or hospital based treatment, DHS is seeking to expand the availability of safe, substance-free living environments to individuals newly entering treatment, especially MAT – so they can stabilize, establish tools and routines that support their recovery journey, and transition to long-term independence.

Recovery Home(s) procured through this RFP must be licensed through the Pennsylvania Department of Drug and Alcohol Programs (DDAP), are expected to follow all applicable laws and regulations, including Act 59 of 2017 and 28 Pa. Code Chapter 717, and will be monitored by DHS's Bureau of Drug and Alcohol Services.

#### ***A.1: Target Population***

We are seeking to serve up to 48 individuals in new Recovery Housing at any given time. Successful Proposer(s) will serve individuals 18 and older, who have a substance use disorder (SUD) and are interested and appropriate for the substance-free living environment and support provided through the Step-Up Recovery Housing structure paired with evidence-based practices such as MAT. Most Participants will have a history of opioid use and will be newly entering recovery. Successful Proposer(s) must be committed to serving this population with compassion and respect and skilled in effectively engaging Participants in their recovery journey.

All individuals entering Recovery Housing must have a completed Level of Care Assessment (LOCA) that indicates appropriateness for Recovery Housing and the treatment needed. The completed LOCA, with diagnosis, will be shared with the Successful Proposer(s) at time of referral.

#### *Referrals*

The Successful Proposer(s) must accept individuals referred or approved by DHS regardless of use of MAT, criminal history, credit worthiness or other barriers. Referrals will come from racially, ethnically, religiously and culturally diverse communities and populations. The Successful Proposer must design and operate their Recovery House in a way that promotes respect and recovery. All Participants must feel welcomed, well-served and supported regardless of race, ethnicity, sexual orientation, gender identity and expression (SOGIE), intellectual or physical ability, English language proficiency or life experiences.

## **A.2: Housing**

The Successful Proposer(s) must provide Participants with a safe, supportive and substance-free place to live, in a site-based setting which the Successful Proposer(s) will, either directly or through a partnership with another organization, operate and manage. As such, although the housing will be provided as part of the program, Participants will not have their own leases. We anticipate that most Participants will remain in Recovery Housing for three to five months.

### *Housing Operations*

Successful Proposer(s) will be responsible for managing the day-to-day operations of the Recovery Housing, including ownership or leasing of the units, vacancy management in coordination with DHS, provision of basic amenities like utilities and internet, building maintenance and upkeep, and establishing and maintaining safety protocols that include maintenance of a basic security system. The Successful Proposer(s) will actively work to create a positive and inclusive community among Participants, staff and the local neighborhood by establishing policies that promote harmony and safety, including clear strategies for de-escalation when needed.

### *Housing Sites*

The Recovery House(s) must have adequate space, facilities and equipment to meet the needs of the Participants. The Successful Proposer(s) must post certificates of occupancy in common areas and abide by all applicable local buildings and fire safety codes. Recovery Houses must meet all appropriate Allegheny County Health Department (ACHD) codes and regulations and have appropriate permits and certifications. Successful Proposer(s) must notify ACHD prior to operating the Recovery House and must agree to allow the ACHD to inspect the Recovery House when requested. If the Recovery House is rented or leased, the Successful Proposer(s) must have written permission from the owner to operate a Recovery House and submit that documentation as part of their Proposal.

Recovery Housing must meet all standards established by [Act 59](#) and [28 Pa. Code Ch. 717](#). Please refer to 28 Pa. Code Ch 717.29 for all physical site standards, including requirements for the building and grounds, shared living spaces, sleeping accommodations, bathrooms and kitchens. Recovery House(s) should be located within Allegheny County in areas convenient to public transit and groceries.

### *Participant Contribution Plan*

Recovery Housing administered through DHS funding has never included Participant contribution plans, in which a sliding fee scale is established for Participant contributions to room and board costs. However, because we will be exploring how contribution plans fit within the Recovery House model, Successful Proposer(s) must have the capacity and

willingness to work with DHS on processes to collect and document pay and, if implemented, a plan for utilization of those funds to offset program expenses. If implemented, contribution levels will be \$0 for Participants with no income and will not exceed 30% of a Participant's income. Lack of income will not be an allowable reason to deny a Participant enrollment in the program or to discharge a Participant involuntarily.

#### **A.3: Supportive Services**

The Successful Proposer(s) will work with Participants to support and empower them in their pursuit of recovery-oriented treatment and fulfillment of their personal and social-emotional needs and goals in partnership with other service and/or treatment teams connected to the Participant. A structured and substance-free environment is a fundamental component of Recovery Housing operations. This is reflected in the State's licensure regulations, requiring that residents:

- Participate in treatment, self-help groups or other drug and alcohol recovery supports (§ 717.28).
- Abstain from use and sale of alcohol and illicit drugs, with consequences for failure to abstain (§ 717.28).
- Receive orientation about and sign an agreement to comply with established recovery house rules (§ 717.22).

We expect the Successful Proposer(s) to meet these requirements but to do so in a manner that is responsive to the target population and does not rely on overly rigid operations that result in high denials, terminations and/or drop-out rates. Within this context, Successful Proposer(s) must offer, at a minimum, the following supportive services:

- Provide intake and orientation to each Participant, pursuant to [§ 717.22](#) and inclusive of all policies and procedures required of Recovery Houses in [28 Pa. Code § 717](#).
- Pair each Participant with a Case Manager, a staff member of the Successful Proposer who will help the Participant develop a Recovery Plan and support the Participant in fulfilling the Plan. The Recovery Plan must define the specific service, supports and treatment referrals used to assist the Participant in their recovery process. Specifically, the Recovery Plan should focus on connecting Participants to treatment and peer support, locating permanent housing, finding employment and meeting other unmet, non-treatment needs.
- Check-in with Participants about their progress weekly and update the Recovery Plan with the Participant at least once every 30 days.
- Encourage Participants to seek sufficient professional care to address the medical, psychological and community support needs that will strengthen their recovery process.

- Inform Participants of the wide range of local treatment and recovery support services available, including 12-step or other mutual support groups, recovery community centers, recovery ministries, recovery-focused leisure activities and recovery advocacy opportunities.
- Begin to plan for a Participant’s discharge to a permanent housing placement on day one of their admission into the Recovery House. Participants may have a history of homelessness or be at imminent risk of homelessness. Recovery Housing offers a place where they can work on housing readiness. Stable housing is important for individuals in recovery; therefore, locating post-Recovery House housing must be a priority.
- Help Participants identify jobs that will help set them on a path toward stability in recovery and housing. Recovery Houses must offer job readiness workshops and build relationships with local employers and community organizations to facilitate employment and volunteer opportunities. Because a Participant’s time is structured and may include numerous recovery-related activities during the day, it may not be reasonable or feasible for a Participant to have outside work at the beginning of their stay in a Recovery House. However, a goal of Recovery Housing is to prepare Participants to live sober, stable lives in the community. Gaining and maintaining employment is part of living a stable life and will pay for permanent housing. Employment opportunities must be scheduled into a Participant’s Recovery Plan.
- Assistance with obtaining and maintaining mainstream benefits, e.g., Temporary Assistance for Needy Families (TANF), Supplemental Security Income (SSI), health insurance through Medicaid, food assistance through the Supplemental Nutrition Assistance Program (SNAP).
- Help Participants identify and address any unmet needs. This may include linkages to/coordination with community-based services, including:
  - Mental health treatment services
  - Healthcare
  - Food
  - Childcare
  - Transportation
  - Employment/education assistance and job training
  - Life skills coaching
  - Legal services
- Connections to community-based and natural supports that support housing and behavioral health stability

Proposer(s) should submit a copy of their discharge planning process with their proposal submission. In situations where a Participant must be involuntary discharged from the Recovery House, the Successful Proposer(s) must notify the Participant in writing. The Successful Proposer(s) also must provide DHS with a written report within 24 hours following an involuntary termination of a Participant from the Recovery House. The notice

of discharge from the Recovery House must include the specific reason for the discharge and must be signed and dated by the House Manager or the House Manager's authorized designee. A copy of this notice must be maintained in the Participant's record. The Participant must have the opportunity to appeal their discharge from the Recovery House through a formal grievance procedure developed and documented by the Successful Proposer(s). The Participant must be informed of this right of appeal and the appeal process in the discharge notice itself.

#### ***A.4: Staffing/Training***

Recovery Houses must have a staff person awake and onsite 24 hours per day, seven days per week. The Successful Proposer(s) must maintain a staffing plan and have written descriptions of the duties of Recovery House staff posted in a common location in the Recovery House. We encourage the Successful Proposer(s) to include staff who are in recovery themselves; not only does this type of staffing advance the peer support goals of the Recovery House, it can also provide Participants with an opportunity to become employed in a mission-oriented work environment. This creates an environment that benefits both the Successful Proposer(s) and the individual Participants. Staff must include at least:

- House Manager: The staff member identified in writing as the person responsible for all functions and operations of the Recovery House. The House Manager's name, address and contact information must be posted in a common location in the Recovery House. The House Manager does not need to live onsite but must be available 24/7. Should the Successful Proposer(s) change House Managers, they must contact DHS within seven days.
- Case Manager(s): Staff, preferably with lived experience with SUD, who are responsible for working with Participants to build their Recovery Plan and helping them meet the goals outlined in their Recovery Plan.

The Successful Proposer(s) must establish policies to prevent real or perceived ethical conflicts of interest by their staff. This may include situations when staff are affiliated with programs to or from which Participants may be referred.

Staff are required to receive the training listed below (\* indicates a requirement by DDAP).

- Within one year of hire
  - Introduction to Substance Use Disorders (Addiction 101) - On Demand
  - Substance Use Disorders Confidentiality - On Demand
  - Case Management Overview\* - On Demand
  - Case Management Skills Training (if hired after 7/1/21) or Management Overview (if hired prior to 7/1/21)

- Cultural Competency
- Screening and Assessment
- American Society of Addiction Medicine [ASAM] (Only needed for staff completing LOCAs)
- Naloxone/Narcan Training\*
- HIV for Substance Use Disorder Professionals - On Demand\*
- TB/STD/Hepatitis\*
- CPR and First Aid \*
- Fire prevention and Emergency Preparedness\*
- Ongoing: Upon completion of all required training, staff must complete 12 hours/year of supplemental training:
  - Two of the trainings completed within the second year of hire must address the topics of harm, risk reduction and mental health.
  - Supplemental training topics must correspond to recovery services and other applicable services provided.

#### **A.5: Performance Outcomes**

DHS expects the Successful Proposer(s) to meet the following benchmarks:

- 75% of Participants abstain from using drugs and alcohol while in Recovery Housing
- 90% of Participants exit to a permanent housing placement
- 80% of Participants without income successfully gain income while in Recovery Housing
- 90% of Participants eligible for public entitlements submit applications while in Recovery Housing (e.g., Medicaid, Food Stamps)
- 90% of Participants participate in safe and sober activities while in Recovery Housing
- 95% of Participants connect to long-term treatment supports (e.g., peer-led mutual aid organizations, medications for opioid use disorder or alcohol use disorder, outpatient treatment) while in Recovery Housing, with a plan for continuation upon exit
- 100% of Participants connect to physical and dental health supports while in Recovery Housing (if needed)
- 75% of Participants indicate satisfaction with their experience in Recovery Housing, as measured by a satisfaction survey administered at discharge from the Recovery House

The Successful Proposer(s) must collect and report accurate progress for continuous quality improvement. The Successful Proposer(s) must submit monthly outcome reports to DHS and file a quarterly and an annual report on performance measures and service utilization.

#### ***A.6. Records, Confidentiality and Reporting***

The House Manager/Case Manager must maintain records for each Participant and keep them safely stored in a locked area or in a password-protected and encrypted electronic device. Participants have the right to inspect their own record. Records (signed and dated at orientation) should include:

- Agreement to abide by the rules and requirements of the Recovery House
- Consent Form or Release Form
- Drug and Alcohol Pennsylvania Participant Placement Criteria evaluation or treatment referral contact
- A written log or a separate entry within the activity notes that records the nature and disposition of referrals made to outside resources
- Activity notes indicating a Participant's overall progress and current status of goals and needs, updated on a weekly basis. All notes should be dated and signed by the individual making the entry.

The Successful Proposer(s) must develop a written procedure that complies with 4 Pa. Code 255.5 and 42 CFR PRT II (Confidentiality of Alcohol and Drug Abuse Patient Records). The procedure must include:

- Confidentiality of individual personal identifying information and records, including a description of how to address security and release of records and who is responsible for maintenance of records.
- Access to Participant records. Staff who may have access to Participant records must be identified by name or position. The methods by which staff gain access to records should also be outlined.

The Successful Proposer(s) will be responsible for entering claims to Community Care Behavioral Health (CCBH).<sup>1</sup> Successful Proposer(s) must have a diagnosis for all Participants in order to enter a claim to CCBH. Successful Proposer(s) may use the diagnosis from a Participant's referral or may make their own diagnosis, if qualified to do so. If the Successful Proposer(s) are not already eligible to enter claims into CCBH, they must submit an application to CCBH to become eligible. They must meet CCBH requirements (to better understand CCBH's requirements, see [Appendix A](#). This form is provided as a reference; do not submit it with your Proposal).

The Successful Proposer(s) must tell DHS and provide a written report within 24 hours following involuntary discharge of a Participant from the Recovery House and/or if any unusual incidents occur. Unusual events include, but are not limited to, the following:

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<sup>1</sup> For more information about CCBH, see: <http://www.ccbh.com/>

- A Participant death, overdose or suicide attempt
- Violent action resulting in staff or Participant injury
- Outbreak of contagious disease or food poisoning among Participants
- A serious crime
- A condition that results in closure of the Recovery House for more than one day of operation
- A situation that results in staff not being onsite during the expected 24/7 coverage
- A fire or structural damage to the Recovery House
- Misuse or alleged misuse of a Participant's funds or property

The Successful Proposer(s) must additionally complete, and submit to DHS, a discharge summary report for each Participant who is discharged from the Recovery House or who leaves against staff advice.

#### **A.7: Budget**

Awards for Recovery Housing Services will be consistent with the unit cost ranges presented in Section 2 and will therefore vary depending on Successful Proposer(s) program capacity. DHS will reimburse Recovery Housing services through an agreed-upon fee-for-service daily unit rate, anticipated to be between \$56 and \$64 for each Participant. In addition, we will consider one-time startup costs for the initial contract year.

Successful Proposer(s) must provide a realistic budget and well-justified budget narrative for operating proposed Recovery Housing, including anticipated sources of funding beyond those available through this RFP. While not a requirement of the RFP, funding from foundations or from private or other public sources can support the cost of the program. The budget should be reflective of all aspects of the program as described in this RFP and may include at least the following categories:

- Program income, including expected funding from DHS, Participant contribution fees and any other program income
- Start-up costs (e.g., furnishings, supplies)
- Staffing expenses, including salary, benefits, training, travel and communications
- Food or meal services
- Cleaning and maintenance
- Security systems
- Leasing (or rent/lease equivalent in the event the Proposer owns the building)
- Utilities including internet
- Property-related insurances, as applicable
- Administrative expenses itemized and identified as direct or indirect. Proposer(s) seeking reimbursement for costs through an indirect cost rate are required to maintain an indirect cost allocation plan.

## **B.) Bridge Housing**

Bridge Housing provides a safe, accessible and supportive temporary living environment where individuals experiencing housing instability can safely reside while initiating or continuing community-based treatment and services and pursuing long-term living arrangements. This housing affords Participants the opportunity to meet their basic needs, access resources that will support successful maintenance of their behavioral health and/or reintegration into community, prepare for successful transitions to long-term independence, and reduce the risk of hospitalization, homelessness and/or reincarceration.

The Bridge Housing Program(s) procured through this RFP will enhance our continuum of supportive housing, with a particular emphasis on strengthening:

- Effective linkages to and coordination with treatment teams that help Participants achieve their goals and overall stability.
- Quality service delivery that successfully meets Participants where they are, employs creative and collaborative strategies to understand Participants and help them make progress on their goals, and does not rely on discharging Participants for behavioral manifestations of their illnesses.
- Competency in serving Participants with a primary substance use disorder diagnosis and/or a history of criminal legal system involvement.

### ***B.1: Target Population***

Our goal is to serve up to 170 individuals at a time with the Bridge Housing services outlined in this RFP. Bridge Housing will be targeted to individuals who need six to twelve months of transitional support and voluntarily agree to participate in the program and its supportive services. Successful Proposer(s) will serve individuals, 18 and older, who are housing unstable, highly vulnerable to cycling through emergency rooms, incarceration and/or inpatient hospitalization, and in one of the specific target populations described below. Individuals experiencing housing instability include those who are residing in non-permanent locations (including shelters, hotels/motels paid for with public or charitable funds, mental or behavioral health facilities, jail or hospitals), are “doubled-up” on a temporary basis, are living in locations not adequate for human occupation (including condemned buildings, housing in which the physical environment presents life and/or health threatening conditions, and outside or in vehicles), and people who are near homelessness as evidenced by written eviction notices.

Proposals for the Bridge Housing component of this RFP should clearly indicate which of the following target populations will be served. While not a requirement of this RFP, we will consider proposals for programs that concurrently serve the target populations described in 1-2 or 3-4 below (i.e., a single program could serve “individuals with a diagnosed serious

mental illness who need the support and structure afforded by 24/7 staff" and "individuals with co-occurring mental illness and substance use disorders, with a primary SUD diagnosis, who need the support and structure afforded by 24/7 staff.")

- 1. Individuals with a diagnosed serious mental illness who need the support and structure of 24/7 staff to stabilize and successfully transition to independent long-term housing*

This includes individuals coming from treatment settings including inpatient hospitalizations and residential treatment facilities. While the Bridge Housing described in this RFP will not provide treatment services, the around-the-clock availability of support staff can provide individuals with a greater sense of security and accessibility as they develop routines for maintaining their wellbeing. These are individuals who can benefit from the sense of community created from the shared living space and for whom proximity to staff will support their engagement in services pursuant to their needs and goals. We anticipate that some eligible individuals will exhibit behaviors consistent with their mental illness, which can contribute to problems maintaining housing stability when they are not managed. The Successful Proposer(s) will be expected to understand and recognize this reality; we expect that the structure of a site-based program with 24/7 staff will help these individuals establish the connections, tools and resources they need to stabilize. Eligible individuals may have an extensive service history, including significant emergency and crisis care, or they may have a history of mental illness but have not successfully established ongoing connections with community-based mental health services.

- 2. Individuals with co-occurring mental illness and substance use disorders, with a primary SUD diagnosis, who need the support and structure afforded by 24/7 staff to stabilize so they can successfully transition to independent long-term housing*

This includes individuals who are newer to or not yet established with behavioral health treatment services as well as people who are stepping down from inpatient mental health and substance use treatment services. While the Bridge Housing described in this RFP will not provide treatment services, the around-the-clock availability of support staff can provide a greater sense of security and accessibility for individuals as they develop their routines for maintaining their wellbeing. These individuals can benefit from the sense of community created within the shared living space, and proximity to staff can support their engagement in services. They may have an extensive service history, including significant emergency and crisis care, or they may have a history of mental health and substance use issues but have not successfully established ongoing connections with community-based behavioral health services.

*3. Individuals with a current or prior history with the criminal justice system who are at high risk of continued interaction with the justice system*

This includes individuals leaving the Allegheny County Jail and individuals on probation or parole. The Bridge Housing program will provide a stable environment and supportive services to help Participants initiate or establish routines related to reentry services. These individuals will often have numerous previous incarcerations, coupled with behavioral health conditions including serious mental illness and substance use. They need the transitional supports of Bridge Housing but can manage a more independent structure and do not require 24/7 staffing assistance.

*4. Individuals with a diagnosed mental illness or substance use disorder, who do not need 24/7 staff support.*

This includes individuals who have a diagnosed serious mental illness and/or substance use disorder diagnosis. The Bridge Housing program will provide a stable environment and supportive services to help Participants initiate or establish routines to maintain community-based treatment and services. These individuals will need the transitional supports of Bridge Housing but can manage a more independent structure and do not require 24/7 staffing assistance.

#### *Referrals*

While anyone, including hospitals, inpatient programs, mental health or substance use treatment programs, courts, families or individuals, can refer someone for DHS supported housing, including Bridge Housing, referrals to Bridge Housing Providers will come only from DHS. Appropriateness and prioritization for Bridge Housing programs are based on characteristics of the target population described above and assessment of vulnerability to cycle through adverse experiences such as multiple emergency room visits, incarcerations, homelessness and/or mental health inpatient stays. Eligible referrals will be matched to program vacancies as those become available. DHS will seek to have a short and quick-moving waitlist. When a Successful Proposer receives a referral from DHS, they are expected to conduct an interview and tour (in-person or virtually) and admit the Participant when there is alignment on the part of the site and the Participant. We will monitor placement declines (both by the person and the provider) and seek a successful placement in the shortest amount of time possible. Additional parameters for outreach and intake will be developed upon award in collaboration with DHS. We anticipate that Participants will stay in these programs an average of six to twelve months. Once a person is discharged, the bed becomes available for another Participant.

## ***B.2: Housing***

The Successful Proposer(s) must provide Participants with a safe place to live in a supportive environment. We anticipate that most Participants will be supported in a placement for six to twelve months. The Successful Proposer(s) will operate and manage the housing, either directly or through a partnership with another organization. As such, the housing will be provided as part of the program, but Participants will not have their own leases.

Bridge Housing for individuals who need the support and structure afforded by 24/7 staff to stabilize (target populations 1 and 2, above) is expected to operate through site-based housing.

Bridge Housing for individuals who do not need 24/7 staff support (target populations 3 and 4, above) may be provided in either site-based, clustered sites or scattered-site settings.

### *Housing Operations*

Successful Proposer(s) will be responsible for managing the day-to-day operations of the Bridge Housing Program, including ownership or leasing of the units, vacancy management in coordination with DHS, provision of basic amenities like utilities and internet, building maintenance and upkeep, and establishing and maintaining safety protocols that include maintenance of a basic security system. The Successful Proposer(s) will actively work to create a positive and inclusive community among Participants, staff and the local neighborhood by establishing policies that promote harmony and safety, including clear strategies for de-escalation when needed. Subcontracting to another entity to carry out Housing Operations responsibilities or Proposals with organizational partnerships that delineate responsibilities for Housing Operations and Support Services is allowable.

Bridge Housing for individuals who need the support and structure afforded by 24/7 staff to stabilize (target populations 1 and 2, above) must operate through site-based housing. Within these site-based programs, the Successful Proposer(s) is expected to manage Participants' regular and adequate access to food. This may include coordination and delivery of meals, multi-day meal packs and/or bulk groceries.

### *Housing Sites*

For site-based programs, DHS prefers that Proposers identify specific sites where the Bridge Housing will operate but will also consider proposals where no specific site is identified. For scattered-site programs, proposers should demonstrate existing relationships with landlords. Sites must have adequate space, facilities and equipment to meet the needs of the Participants. Locations should be close to public transportation, furnished, and able to pass inspection and code and zoning requirements. Participants must have onsite access to fully equipped kitchens and bathroom facilities, but these may

be individual or shared spaces. Housing that is accessible to people of different abilities is a priority.

For site-based and clustered unit sites, DHS is open to sites of various sizes, recognizing that very small sites are less cost effective. For programs serving Participants who do not need 24/7 staffing support (target populations 3 and 4, above), DHS is also open to proposals for scattered-site housing, recognizing that staffing for regular housing supports in scattered site locations may be less cost effective.

#### *Participant Contribution Plan*

Successful Proposer(s) will work with each Participant enrolled in their Bridge Housing program to develop a Participant contribution plan with a sliding fee scale for Participants to contribute to room and board costs. The contribution level may be \$0 for Participants with no income and will not exceed 30% of a Participant's income. Lack of income will not be an allowable reason to deny a Participant enrollment in the Bridge Housing program, nor is it an allowable reason to involuntary discharge a Participant. Successful Proposer(s) must have the capacity to collect and document Participant contributions and to demonstrate utilization of those funds to offset program expenses.

#### ***B.3: Supportive Services***

The Successful Proposer(s) will work with Participants and in partnership with other services and/or treatment teams to support and empower them, ensuring that their needs are met and that they are moving toward independence. Successful Proposer(s) must offer, at a minimum, the following supportive services:

- Interviewing potential Participants, providing site tours, and supporting their move into and orientation in the selected housing unit. DHS will monitor for and work with a provider to maintain a low denial rate
- Conducting needs assessments to guide the tailoring of supports
- Assisting each Participant in the development of a Bridge Housing Services Plan and supporting the Participant in fulfilling the Plan, which should define the services, supports and referrals used to support their stabilization and provide a pathway to permanent housing
- Conducting regular welfare checks to monitor Participants' general wellbeing (including basic hygiene and nutrition) and to coordinate with treatment providers if/when there are changes in status. A minimum of weekly in-person wellness checks are expected; however, engagement may vary from person to person and over time depending on Participant needs.
- Closely collaborating with other service and treatment teams to ensure that the Participant's needs and goals related to their long-term stability are addressed. For

individuals with criminal legal system involvement, this may include Justice-Related Services (JRS).

- Providing basic de-escalation and crisis management support, engaging other support services as necessary
- Linking to and coordinating with community-based services, including:
  - Mental health treatment services
  - Substance use treatment services
  - Healthcare
  - Food
  - Childcare
  - Transportation
  - Employment/education assistance and job training
  - Life skills coaching
  - Legal services
- Connecting Participants to community-based and natural supports that encourage housing stability
- Working with a Participant's other service teams to identify when the Participant is ready to move to more independent housing and assisting Participants to exit the program and housing unit with a long-term housing plan and treatment team in place
- Providing housing navigation support, including long-term housing search, landlord/property manager recruitment and engagement activities, and moving assistance to ensure Participants can successfully transition to safe, affordable housing
- Assisting with obtaining and maintaining mainstream benefits (e.g., Temporary Assistance for Needy Families (TANF) or Supplemental Security Income (SSI), health insurance through Medicaid and food assistance through SNAP
- Participating in quality improvement efforts initiated by DHS, when required

The Successful Proposer(s) will not deliver behavioral health treatment as part of the Bridge Housing Program. Behavioral health treatment services will be community-based or ambulatory, so that they are accessible to the Participant in the community in which they plan to live. However, Proposals that include partnerships with treatment providers to offer treatment via that partner's license(s) are allowed—in such cases, the partnering treatment provider can offer treatment services as an option for Participants, but Participants may continue or initiate treatment with other community-based providers. The Successful Proposer will participate in meetings with the Participant's treatment team, as appropriate and requested, and will support and encourage goal completion. Weekly notes on each Participant will be recorded and should be related to observations of Participant wellbeing. The Successful Proposer(s) must input data in an accurate and timely manner. Critical incidents must be reported to DHS in the Behavioral Health Critical Incidents system. The Successful Proposer(s) must work closely with DHS staff to continuously monitor and improve services and operations.

#### ***B.4: Staffing/Training***

The Successful Proposer(s) must maintain a staffing plan, with written job descriptions, that includes a staff complement with sufficient full-time equivalents and qualifications to address the target populations' housing and support services needs. Staffing may be filled by a combination of full-time and part-time personnel. DHS is seeking to administer both Bridge Housing with 24/7 staffing (in site-based housing) and Bridge Housing that does not require 24/7 staffing (in site-based, clustered-site or scattered-site units). In either case, the staffing plan should recognize that Participants may be out of the housing during regular business hours, that people are at different stages of engagement with treatment and/or reentry services, and that people have different levels of support needs. Staffing plans should reflect this reality. The following considerations are offered to guide development of an effective staffing complement:

- For programs providing 24/7 staffing, we expect a minimum of five FTE onsite personnel to provide full-time coverage. We encourage Proposers to scale the programs capacity to maximize the staffing size. We anticipate that a program with 24/7 staffing will need to serve at least 15 Participants at a time to be sustainable and that they will serve up to 30 participants at a time at any given site.
- Additionally, for programs providing 24/7 staffing, Proposers are encouraged to consider the different roles and responsibilities that may be needed from staff during daylight hours (e.g., engagement, service planning) versus overnight hours and to build a staffing complement responsive to those needs.
- Clinical level expertise is not required since providing treatment is not within the scope of Bridge Housing.
- We encourage the Successful Proposer(s) to include staff who themselves have experience with mental health or substance use disorder services, reentry from incarceration and/or housing insecurity. Peer staff provide unique, empathetic support by sharing their experiences to build trust, offer a bridge to services and increase engagement with programs. To be effective, these peer staff need proper training, support networks, and organizational policies that integrate them as valued, well-compensated team members.

At a minimum, Bridge Housing staff will have:

- Passion for helping people within the target population.
- Experience working with people with mental health, behavioral health and/or criminal legal system involvement.
- An understanding of how trauma impacts behavior.
- Training and/or work experience using crisis intervention and de-escalation techniques.

- Training and/or work experience in Motivational Interviewing, Harm Reduction, Trauma-Informed Care and Mental Health First Aid.
- Willingness to partner with treatment teams, DHS, and other stakeholders and experts.
- Strong and up-to-date knowledge of local social services, including those that offer support for individuals seeking affordable housing and employment, assistance accessing public benefits, and additional concerns such as substance use disorder, intellectual disabilities and physical health concerns.
- Ongoing professional development and training in best practices for all staff.

#### ***B.5: Performance Outcomes***

Successful Proposer(s) will be responsible for collaborating with DHS in tracking outcomes and meeting performance standards for the Program(s) within the first year. Key performance measures may include:

- Average program utilization rate of 85-95%
- Proportion of Participants exiting to permanent housing destinations, with a goal of 95%
- Proportion of eligible Participants who gain public entitlements while in Bridge Housing (e.g., Medicaid, SNAP, SSI)
- Proportion of Participants connected to physical and dental health supports while in Bridge Housing
- Reductions in mental health inpatient stays, jail bookings and hospital emergency department utilization
- Reductions in utilization of crisis behavioral health services
- Increases in initiation of/engagement with non-crisis mental health and substance-use disorder services (e.g., outpatient services, case management)

Upon award, DHS will work with the Selected Proposer(s) to establish specific goals related to the program scope and mechanisms for regular data collection and reporting. Successful Proposer(s) will be expected to collaborate in continuous quality improvement with DHS.

#### ***B.6: Records, Confidentiality and Reporting***

The Successful Proposer will collect data in a database managed by DHS that tracks Participant demographic and outcome data. The Successful Proposer must input data in an accurate and timely manner (e.g., within 48 hours of Participants' entry into and exit from the program). The Successful Proposer must work closely with DHS staff to continuously monitor and improve the Bridge Housing services and operations.

The Successful Proposer(s) must maintain records for each Participant and keep records in a safe stored in a locked area or password protected and encrypted electronic device. Program staff are responsible for maintaining these records. Records should include:

- Program agreement form. DHS will expect to review these and work with providers to revise as needed prior to launching the program.
- Bridge Housing Service Plan that describes how the program will assist clients with the goal of returning clients to the most independent life situation possible.
- A written log or a separate entry within the activity notes that records the nature and disposition of referrals made to outside resources.
- Activity notes indicating a Participant's overall progress and current status in meeting his/her goals and needs, updated on a weekly basis. All notes should be dated and signed by the individual making the entry.

Participants have the right to inspect their own records.

While we expect that involuntary exits will be rare, the Successful Proposer(s) must tell DHS and provide a written report within 24 hours following an involuntary discharge or if any unusual incidents occur. A meeting with the treatment team must occur prior to the involuntary termination of a Participant and there must be an appeal process.

Unusual events include, but are not limited to, the following:

- Participant death, overdose or suicide attempt
- Violent action resulting in staff or Participant injury
- Outbreak of contagious disease or food poisoning among Participants
- A serious crime
- A condition that results in closure of the Bridge Housing for more than one day of operation
- A fire or structural damage to the Bridge Housing
- Misuse or alleged misuse of a Participant's funds or property

### ***B.7: Budget***

Award(s) for Bridge Housing services will be made on a cost-reimbursement basis (not fee-for-service), but overall allocations will be consistent with the unit costs presented in Section 2. Successful Proposer(s)' final negotiated award(s) will be responsive to the proposed operating model(s), including housing and staffing configuration(s). DHS anticipates that Bridge Housing programs for target populations 1 and 2 (individuals with serious mental illness or substance use disorder, who need 24/7 staff support) will operate in site-based facilities and will have a daily unit cost between \$80 and \$120. We anticipate that Bridge Housing programs for target populations 3 and 4 (individuals with serious mental illness with and without criminal justice system involvement, who do not need 24/7

staff support) will have a daily unit cost between \$65 and \$80. In addition, one-time startup costs will be considered for the initial contract year.

Successful Proposer(s) must provide a realistic budget and well-justified budget narrative for operating their proposed Bridge Housing, including anticipated sources of funding beyond those available through this RFP. While not a requirement of the RFP, funding from foundations or from private or other public sources can support the cost of the program. The budget should be reflective of all aspects of the program as described in this RFP and may include at least the following categories:

- Program income, including expected funding from DHS, Participant contribution fees and any other program income
- Start-up costs (e.g., furnishings, supplies)
- Staffing expenses, including salary, benefits, training, travel and communications
- Food or meal services
- Cleaning and maintenance
- Security systems
- Leasing (or rent/lease equivalent in the event the Proposer owns the building)
- Utilities, including internet
- Property-related insurances, as applicable
- Administrative expenses (must be itemized and identified as direct or indirect.) Proposer(s) seeking reimbursement for costs through an indirect cost rate are required to maintain an indirect cost allocation plan.

## **C.) Scattered-Site Shelter**

Scattered-Site Shelter provides individuals who are experiencing homelessness a safe and welcoming place to stay, along with housing-focused case management to help them successfully transition to long-term stable housing. Emergency shelters are designed to provide immediate, temporary and safe housing for those experiencing a housing crisis. Scattered-Site Shelter can enhance our system's capacity to fulfill that purpose by serving individuals with additional vulnerabilities that traditional congregate shelters are not equipped to support. For these individuals, Scattered-Site Shelter provides a low-barrier first step into housing, coupled with housing-focused case management to further establish trust and provide linkages to long-term housing and support.

### ***C.1: Target Population***

Individuals (or adult couples) 18 and older, who are experiencing homelessness and have additional vulnerabilities that traditional congregate shelters cannot adequately support. This includes individuals with behavioral health conditions, including those with behavioral presentations that do not align with maintaining a safe and supportive group environment, individuals with physical and chronic health conditions, and individuals who avoid or

disengage from congregate shelter because of experiences of trauma and/or marginalization.

#### *Referrals*

The Shelter will operate on an “invitation-only” basis; DHS’s Coordinated Entry Field Unit will manage access. As vacancies arise, the Field Unit will identify referrals in collaboration with the local network of street outreach providers. The Successful Proposer must complete intake within 24 hours (same day intakes are preferred). The Successful Proposer is not expected to reject any referral through this process and cannot enroll Participants who do not come directly from the Coordinated Entry system. Shelter staff must ensure ongoing communication with the Coordinated Entry system (via the Allegheny Link and/or DHS’s Field Unit staff) for continued assessment and service planning.

#### **C.2: Housing**

The Successful Proposer(s) must provide Participants with a safe place to live in a supportive environment. Participants will be supported in Scattered-Site Shelter until they move to permanent housing, which typically takes three to five months but may be faster. Shelter will be provided in scattered-site settings that we expect the Successful Proposer(s) to own or lease either directly or through a partnership with another organization. Housing will be provided as part of the shelter operations, but Participants will not have their own leases.

#### *Shelter Operations*

The Successful Proposer(s) will be responsible for managing the day-to-day operations of the Shelter, including vacancy management, cleaning, maintenance, and establishing and maintaining safety protocols. The Successful Proposer will actively work to create a positive and inclusive community by establishing policies that promote harmony, safety and de-escalation. Shelter policies should be aimed at preventing and mitigating conflict to avoid unnecessary conflict and exits. The Shelter staff will engage Participants in developing shared expectations on matters such as room maintenance, use of any common areas and interactions with neighbors.

The Successful Proposer(s) will be expected to manage Participants regular and adequate access to food. This may include coordination and delivery of meals, multi-day meal packs and/or bulk groceries. Participants should also have means of storing, preparing and consuming food.

#### *Shelter Sites*

Proposers should include information about specific sites where the Scattered-Site Shelter will be located or demonstrate existing relationships with landlords for scattered-

site options. Locations should be close to public transportation, furnished and include access to fully equipped kitchen and bathroom facilities (whether individually or in shared spaces), and be able to pass inspection and code and zoning requirements. Housing that is accessible for people of different abilities and apartment style locations are preferred. Scattered sites may be relatively clustered within a given location to support the coordination of supports across locations.

#### **C.3: Supportive Services**

Case managers must work with each Participant to create a plan for securing permanent housing and provide support to the Participant as they implement the plan. The ultimate goal of Shelter case management is to move Participants into permanent housing. The Successful Proposer must provide additional supportive services as needed, including but not limited to access to public benefits, health insurance and community-based behavioral health services as well as employment and transportation-related support.

#### **C.4: Staffing/Training**

The Successful Proposer will establish a staffing complement with sufficient FTEs with qualifications to address the target population's shelter and housing needs.

At a minimum, Shelter staff will have:

- Passion for helping individuals experiencing homelessness find permanent housing.
- Previous experience working successfully with individuals experiencing homelessness.
- Clear understanding of how trauma impacts behavior.
- Training and/or work experience using crisis intervention and de-escalation techniques.
- A toolkit for case management that includes Motivational Interviewing, Harm Reduction, Trauma-Informed Care and Mental Health First Aid.
- Strong and up-to-date knowledge of local social services, including those that offer support for individuals experiencing homelessness and additional concerns such as intimate partner violence, substance use disorder, HIV/AIDS and/or mental health challenges.

Additionally, the Successful Proposer will ensure that all staff receive ongoing professional development and training in best practices for delivering low-barrier shelter services.

#### **C.5: Performance Outcomes**

The Successful Proposer(s) will be expected to collaborate with DHS on tracking the following performance outcome measures:

- Average length of stay in Shelter, with a best practice goal of 30 days or fewer
- Proportion of Shelter Participants who exit to permanent housing, with a goal of 60%
- Involuntary terminations from Shelter, with a goal of 5% or fewer
- Proportion of Shelter Participants who return to homelessness within two years, with a goal of fewer than 10%
- Increased percentage of Participants with medical coverage

The Successful Proposer(s) must also meet the following administrative outcomes:

- 5% or less data missing in HMIS
- 75% or more assessments completed within three days of program entry
- 75% or more assessments completed within three days of program exit

#### ***C.6: Records, Confidentiality and Reporting***

The Successful Proposer must collect data in the Homeless Management Information System (HMIS), a database managed by DHS that tracks demographic and outcome data for Participants experiencing homelessness. The Successful Proposer must input data in an accurate and timely manner (e.g., within 48 hours of Participants' entry into and exit from the Shelter.) The Successful Proposer must work closely with DHS staff to continuously monitor and improve the Shelter services and operations. Additionally, the Successful Proposer(s) must participate actively in annual Point-in-Time Count data collection and other initiatives to strengthen the County's crisis response system.

While it is our expectation that involuntary exits will be rare, the Successful Proposer(s) will follow the Homeless and Housing Services Termination and Appeal Policy and Procedure.

The Successful Proposer(s) must tell DHS and provide a written report within 48 hours if any unusual incidents occur.

Unusual events include, but are not limited to, the following:

- Participant death, overdose or suicide attempt
- Violent action resulting in injury to staff or Participant
- Outbreak of contagious disease or food poisoning among Participants
- A serious crime
- A condition that results in closure of Scattered-Site Shelter units for more than one day of operation
- A fire or structural damage to a Scattered-Site Shelter unit
- Misuse or alleged misuse of a Participant's funds or property

### **C.7: Budget**

Award(s) for Scattered-Site Shelter services will be made on a cost-reimbursement basis (not fee-for-service), but overall allocations will be consistent with the unit costs presented in Section 2. Final negotiated awards will be reflective of the proposed operating model(s), including housing and staffing configuration(s). We anticipate that Scattered-Site Shelter programs will have a daily unit cost between \$50 and \$60. We will consider one-time startup costs for the initial contract year.

Successful Proposer(s) must provide a realistic budget and well-justified budget narrative for operating the proposed Scattered-Site Shelter, including anticipated sources of funding beyond those available through this RFP. While not a requirement of the RFP, funding from foundations or from private or other public sources can be used to support the cost of the program. The budget should be reflective of all aspects of the program as described in this RFP and may include at least the following categories:

- Start-up costs (e.g., furnishings, supplies)
- Staffing expenses, including salary, benefits, training, travel and communications
- Food or meal services
- Cleaning and maintenance
- Security systems
- Leasing (or rent/lease equivalent if the Proposer owns the building)
- Utilities including internet
- Property-related insurances, as applicable
- Administrative expenses (must be itemized and identified as direct or indirect.)  
Proposer(s) seeking reimbursement for costs through an indirect cost rate are required to maintain an indirect cost allocation plan.

## **Section 3: Proposal Requirements and Evaluation Criteria**

DHS will evaluate Proposals based upon the evaluation criteria listed below. Proposers must address their qualifications in their Proposal by responding to the requested items or questions in the Response Form. Proposers should download and type their responses directly into the Response Form available on the Active Solicitations webpage at [www.allegenycounty.us/dhs/solicitations](http://www.allegenycounty.us/dhs/solicitations).

### **A. Recovery housing (120 points possible)**

#### **I. Organizational Experience (15 points possible)**

- Experience providing housing and supportive services to individuals with a history of unhealthy substance use. Evaluators also will review performance data for providers that currently operate an Allegheny County/DHS-contracted program. (10 points)
- Experience helping individuals who have only recently engaged in outpatient substance use treatment or are newly seeking to initiate treatment (5 points)

## II. Housing (30 points possible)

- Plan for proposed Recovery Houses including the number of Recovery Houses, the number of bedrooms in each House, and the number of Participants to be served at each house at any given time (5 points)
- Proposed Recovery House guidelines and expectations for Participants, including approach to helping Participants meet these expectations and addressing challenges collaboratively when they arise (5 points)
- Ability of the proposed Recovery House site(s) to meet the needs of Participants and fulfill the RFP requirements for location and amenities, or a detailed plan for identifying an appropriate site(s) (10 points)
- Plan for being responsive to the needs/concerns of both Residents and neighbors (5 points)
- Plan to ensure the proposed Recovery House(s) meet(s) the physical standard requirements, as described in section 2.A.2 of the RFP (5 points)

## III. Supporting Participants (35 points possible)

*When responding to each of the evaluation criteria in this section, Proposer(s) should address their philosophy, approach and plan both for Participants who are already engaged in treatment as well as for those who have only recently engaged in treatment or are newly seeking to initiate treatment.*

- Philosophy for supporting Participants on their path to recovery and approach for creating a supportive recovery community among Participants (10 points)
- Plan for offering Supportive Services described in section 2.A.3. of the RFP. This includes plan for intake and connecting Participants to supports, including but not limited to treatment, peers, employment, and housing, so that they successfully transition to independence (15 points)
- Plan for supporting a Participant in the event of relapse and for preserving the stability of other Participants of the Recovery House in the event of a Participant's relapse (5 points)
- Approach for involuntary discharge of a Participant from the Recovery House, including the possible reasons for discharge, the process to notify the Participant and DHS, and the appeal process (5 points)

#### IV. Staffing/Training Plan (15 points possible)

- A staffing plan that includes an appropriate number of staff with appropriate responsibilities and qualifications/experience (10 points)
- A plan to recruit, train and retain qualified staff, including peer supports with experience that reflects the population being served (5 points)

#### V. Administration (10 points possible)

- Plan for maintaining accurate, secure client records and for reporting data in a timely way (5 points)
- Plan to track and monitor performance measures for quality assurance and to make appropriate changes based on those performance measures (5 points)

#### VI. Financial Management and Budget (15 points possible)

- Comprehensive line-item budget and budget narrative that shows all planned expenses (including any one-time capital costs, ongoing utility and maintenance costs, and staff). The budget should reflect a realistic estimate of the costs associated with implementing a Recovery House. The line-item budget and budget narrative should also show all planned revenue/sources, including any anticipated sources of funding beyond those available through this RFP. (15 points)

### **B. Bridge Housing (120 points possible)**

#### I. Organizational Experience (10 points possible)

- Experience providing housing and supportive services to individuals whose housing instability is complicated by mental illness, co-occurring disorders and/or past/current criminal justice involvement. Responses should clearly articulate the specific target population the proposed Bridge Housing program will serve and the organization's experience effectively supporting that population. (10 points)

#### II. Housing (30 points possible)

- Plan for the Bridge Housing unit structure (e.g., site-based, clustered-site, scattered-site), including number of units per site and number of Participants served at any given time (10 points)
- Ability of the proposed Bridge House site(s) to meet the needs of Participants and comply with the RFP requirements for location and amenities, or a detailed plan for identifying an appropriate site(s) (10 points)
- Plan for being responsive to the needs/concerns of both Participants and neighbors (5 points)

- Plan to ensure the proposed Bridge Housing unit(s) meet(s) the physical standard requirements, as described in section 2.B.2 of the RFP (5 points)

### III. Supporting Participants (40 points possible)

- Plan and approach to serving individuals affected by mental illness, co-occurring substance use disorder and/or criminal justice system involvement, including for Participants who are engaged in behavioral health treatment and Participants who are not yet engaged in treatment (10 points)
- Comprehensive plan for offering the Supportive Services described in section 2.B.3 of the RFP (10 points)
- Comprehensive plan for coordinating with other service and treatment teams supporting the Participants (10 points)
- Strategies to support Participants in successful Program exit, including what milestones the Proposer will use to determine whether a Participant is ready to exit the Program (10 points)

### IV. Staffing/Training Plan (15 points possible)

- Staffing plan that includes an appropriate number of staff with appropriate responsibilities and qualifications/ experience (10 points)
- Plan to recruit, train and retain qualified staff, including peers who reflect the population that they serve (5 points)

### V. Administration (10 points possible)

- Plan for maintaining accurate, secure client records and for reporting data in a timely way (5 points)
- Plan to track and monitor performance measures for quality assurance and to make appropriate changes based on those performance measures (5 points)

### VI. Financial Management and Budget (15 points possible)

- Comprehensive line-item budget and budget narrative that shows all planned expenses (including any one-time capital costs, ongoing utility and maintenance costs, and staff). The budget should reflect a realistic estimate of the costs associated with implementing Bridge Housing. The line-item budget and budget narrative should also show all planned revenue/sources, including any anticipated sources of funding beyond those available through this RFP. (15 points)

## **C. Scattered-Site Shelter (120 points possible)**

### I. Organizational Experience (10 points possible)

- Experience providing high-quality services to individuals experiencing homelessness. (10 points)

## II. Housing (40 points possible)

- Plan for Scattered-Site Shelter, including number of units proposed and the number of Participants to be served at any given time (5 points)
- Ability of the proposed Scattered-Site Shelter site(s) to meet the needs of Participants and fulfill the RFP requirements for location and amenities, or a detailed plan for identifying an appropriate site(s) (10 points)
- Comprehensive plan for shelter operations, including vacancy management, cleaning, maintenance, establishing and maintaining safety protocols, and coordination of meals (10 points)
- Proposed guidelines and expectations for the Scattered-Site Shelter Participants, including approach to supporting Participants in meeting these expectations and addressing challenges collaboratively when they arise (5 points)
- Plan for being responsive to the needs/concerns of both Residents and neighbors (5 points)
- Plan to ensure the proposed Scattered-Site Shelter unit(s) meets the physical standard requirements, as described in section 2.C.2 of the RFP (5 points)

## III. Supporting Participants (30 points possible)

- Strategy to quickly manage referrals and intake (10 points)
- Plan for working with each Participant to create a plan for securing permanent housing and for supporting the Participant as they implement the plan, which should include access to public benefits, health insurance and community-based behavioral health services as well as employment- and transportation-related support (15 points)
- Plan for identifying and partnering with key external partners, including a description of their roles within the proposed program strategy (5 points)

## IV. Staffing/Training Plan (15 points possible)

- Staffing plan that includes an appropriate number of staff with appropriate responsibilities and qualifications/ experience (10 points)
- Plan to recruit, train and retain qualified staff, including peers who reflect the population they serve (5 points)

## V. Administration (10 points possible)

- Plan for maintaining accurate, secure client records and for reporting data in a timely way (5 points)

- Plan to track and monitor performance measures for quality assurance and to make appropriate changes based on those performance measures (5 points)

## VI. Financial Management and Budget (15 points possible)

- Comprehensive line-item budget and budget narrative that shows all planned expenses (including any one-time capital costs, ongoing utility and maintenance costs, and staff). The budget should reflect a realistic estimate of the costs associated with implementing a Scattered-Site Shelter. The line-item budget and budget narrative should also show all planned revenue/sources, including any anticipated sources of funding beyond those available through this RFP. (15 points)

# Section 4: How to Submit a Proposal

## 4.1 Prepare

### a. Information Session

- DHS will conduct an information session about this RFP at 10 a.m. Eastern Time on Thursday, January 22, 2026, via Microsoft Teams. It will include a presentation about the RFP and DHS staff will answer questions from attendees.
- Attendance at the information session is not required in order to submit a Proposal. Everything (video recording, slide deck, transcribed Q&A) shared during the information session will be posted afterwards on the [RFP Opportunity Page](#) and the DHS Solicitations webpage.
- Preliminary answers will be provided orally for questions asked during the conference. Final definitive answers will be posted in writing on Bonfire on the [RFP Opportunity Page](#) and on the DHS Solicitations webpage.
- Prospective Proposers can join the information session by:
  - Calling (267) 368-7515 and using Conference ID 107 066 364#
  - Or following this link: [Click here to join the meeting](#)
  - Or copying and pasting this link:  
[https://teams.microsoft.com/l/meetup-join/19%3ameeting\\_OWZmMGFjYT MtYjdmMi00MDU2LTk5MGItYzQ1ZmQ0OGZjNjlz%40thread.v2/0?context=%7b%22Tid%22%3a%22e0273d12-e4cb-4eb1-9f70-8bba16fb968d%22%2c%22Oid%22%3a%2214304098-3e8b-4bb4-b68e-65e6055b37bf%22%7d](https://teams.microsoft.com/l/meetup-join/19%3ameeting_OWZmMGFjYT MtYjdmMi00MDU2LTk5MGItYzQ1ZmQ0OGZjNjlz%40thread.v2/0?context=%7b%22Tid%22%3a%22e0273d12-e4cb-4eb1-9f70-8bba16fb968d%22%2c%22Oid%22%3a%2214304098-3e8b-4bb4-b68e-65e6055b37bf%22%7d)

## 4.2 Submission Process

- a. Proposers should take time to review and understand the RFP in its entirety including:

- The background (see Section 1: Why We Are Issuing this RFP)
- The narrative (see Section 2: What We Are Looking For)
- The requirements (see Section 3: Proposal Requirements and Evaluation Criteria)
- The evaluation process (see Section 5: How We Will Evaluate Your Proposal)

b. Proposers must use the Response Form to develop your Proposal. Type your responses to each requested item directly into the Response Form. It is available on the [RFP Opportunity Page](#) on our DHS Bonfire Portal and on our Active Solicitations webpage with the RFP announcement at <https://solicitations.allegenycounty.us/>.

c. Collaborative Proposals

- Collaborative Proposals, in which two or more entities partner to apply together, are permitted. Collaborative Proposals can include:
  - i. **Lead Agency:** The County can enter a contract with only one partner of a Collaborative Proposal. Therefore, a Collaborative Proposal must identify one entity as the Lead Agency that will be the contracting party with the County. The Lead Agency should be the Proposer.
  - ii. **Partners:** Partners must be committed to a role in carrying out the Contract Services and will be compensated for that role. Collaborative Proposals must attach a signed letter of commitment from each Partner that details and agrees to their role in the Contract Services.
- Entities may participate in more than one Collaborative Proposal.

d. Proposers must submit a complete Proposal that includes the following attachments:

- Response Form (available on the [RFP Opportunity Page](#) and the Active Solicitation Webpage)
- Partner commitment letters, if applicable
- W-9
- Minority, Women or Disadvantaged Business Enterprise (MWDBE) and Veteran Owned Small Business (VOSB) documents (see sections 6.1 and 6.2)

e. Proposers should not send any attachments other than those listed either above or in the Response Form.

f. Proposers must make sure to complete each section of the Response Form and to stay within any word counts or page limits specified in the Response Form.

g. **Proposals must be submitted electronically by logging into or creating an account on Bonfire at <https://allegenycountydhs.bonfirehub.com> and uploading the required submission documents to the appropriate RFP Opportunity Page no later than 3:00 p.m. Eastern Time on Thursday, March 12, 2026, to be considered for review. If you are having trouble making an account or uploading your documents, please contact Bonfire Support. You can also**

**reach out to the DHS Procurement Team at  
[DHSProposals@alleghenycounty.us](mailto:DHSProposals@alleghenycounty.us) or (412) 350-6352.**

- h. All Proposals must be submitted before the deadline! Once the deadline has passed, the [RFP Opportunity Page](#) will no longer accept Proposals. If a Proposal is late, it will be rejected and will not be presented to the Evaluation Committee (as described in Section 5 below) for review and scoring.
- i. Proposers will receive an email acknowledging receipt of their Proposal. If a Proposer does not receive this notification within 48 hours of submitting their Proposal, please contact: [DHSProposals@alleghenycounty.us](mailto:DHSProposals@alleghenycounty.us).

#### **4.3 How to Contact DHS about this RFP**

- a. If you have any questions about this RFP, please use the Vendor Discussion feature through the DHS Bonfire Portal at <https://alleghenycountydhs.bonfirehub.com> on the [RFP Opportunity Page](#), or email us at [DHSProposals@alleghenycounty.us](mailto:DHSProposals@alleghenycounty.us).
  - a. All content-related questions must be submitted by the Questions Deadline at 3 p.m. Eastern Time on Friday, February 27, 2026.
  - b. You may submit technical or logistical questions at any time, even after the Questions Deadline.
- b. All information about the RFP, including answers to all content-related questions and any changes or amendments, will be posted on the Bonfire [RFP Opportunity Page](#) and on our Active Solicitations website at <https://solicitations.alleghenycounty.us/>. Once you have created an account and indicated you are interested in this RFP, you will receive automatic email updates through Bonfire when any questions, changes or amendments are available.
  - a. Please check our DHS Bonfire Portal and the website regularly for answers to questions, additional information and changes to the RFP or the RFP process.
  - b. The webpage will be updated only on Thursdays, with any new information visible after 6 p.m.
  - c. The last Q&A and website update for this RFP will be on Thursday, March 5, 2026, at 6 p.m. We will make every effort not to post any new information after this time; however, we reserve the right to post new information in emergency circumstances.

#### **4.4 New Provider Requirements**

- a. Any Successful Proposer who does not have a current Allegheny County DHS contract will be required to submit audited financial reports for the last two years. If a Successful Proposer does not have audited financial reports for the last three years, then they may submit other financial documentation that attests to the financial health of the organization. Tax returns are the preferred alternative. Please

note that providing adequate financial documentation is a requirement of contracting through Allegheny County.

#### **4.5 Other Information**

- a. The issuance of this RFP does not obligate the County to accept any Proposal or enter into an Agreement with any Proposers. The County reserves the right to reject any and all Proposals and to not enter into an Agreement for the Contracted Services.**
- b. Any Agreement originating from this RFP is subject to all the Terms and Conditions specified in Section 6: Contract Requirements for Successful Proposers.
- c. Proposers are responsible for all costs related to the preparation and submission of a Proposal.
- d. Proposals become the property of the County and may become part of any subsequent Agreement between the Proposer and the County.
- e. Successful Proposal(s) will be posted online in the DHS Solicitations Archive after an Agreement has been fully executed by the County and the Successful Proposer(s).

#### **4.6 Pennsylvania's Right-to-Know Law**

Proposers should be aware that all documents and materials submitted in response to this RFP may be subject to requests for access to public records made pursuant to Pennsylvania's Right-To-Know Law (RTKL). Under the RTKL, records in the possession of a public agency like the County are presumed to be public records and the County may have to make documents and materials submitted by the Proposer available to a requestor after an award of an Agreement is made.

If the Proposer includes any information within its Proposal that the Proposer asserts is either a “trade secret” or “confidential proprietary information,” as those terms are defined under the RTKL, the Proposer must include with its Proposal a written statement signed by an authorized representative of the Proposer identifying those portions or parts of its Proposal that the Proposer believes constitute a “trade secret” or “confidential proprietary information” and provide contact information to enable DHS to contact the Proposer in the event that the County receives a Right-To-Know request for the Proposal. The Proposer shall have five (5) business days from date of receipt of any notification from the County to provide a written statement signed by an authorized representative of the Proposer explaining why the Proposal or any portion thereof is exempt from disclosure as a trade secret, confidential proprietary information or other legal reason. The County shall consider this statement in either granting or denying a request for public access to the Proposal or any portion thereof. The County will notify the Proposer of its decision whether to grant or deny the request either in whole or in part.

# Section 5: How We Will Evaluate Your Proposal

DHS will convene an Evaluation Committee to evaluate Proposals. The Evaluation Committee will assign scores to each Proposal by awarding points based on the evaluation criteria in Section 3: Proposal Requirements and Evaluation Criteria, by using the point scale listed in Section 5.1 b.

## 5.1 Evaluation of Proposals

The evaluation process will consist of the following steps:

- a. DHS will form an Evaluation Committee. The Evaluation Committee, which will be comprised of evaluators with expertise in the subject matter of this RFP, may include community members with lived experience, external subject matter experts, provider representative(s), representative(s) from key partners or funders, and DHS staff.
- b. All Evaluation Committee members will individually review and score each Proposal. Each Evaluation Committee member will award points for each response on a Proposer's Response Form, utilizing their personal expertise and best judgment of how the Proposal submitted by that Proposer meets the evaluation criteria in Section 3 using the following scale:
  - 0 – Not addressed in Proposal
  - 1 – Poor
  - 2 – Below expectations
  - 3 – Meets expectations
  - 4 – Exceeds expectations
  - 5 – Outstanding
- c. Each 0-5 score will be multiplied by the appropriate weight for the number of possible points noted after each evaluation criterion in Section 3. For example, for a criterion worth 15 points, the 0-5 score would be multiplied by three. An “Outstanding” response would receive 15 points, while one that “Meets Expectations” would receive nine points.
- d. DHS will tally the average scores of the members of the Evaluation Committee and report a list of average scores to the entire Committee. The Committee will meet, consider the average scores, and arrive at a consensus on which Proposer(s) can best provide the Contract Services in response to the RFP. The Committee will have discretion to either: (1) recommend to the DHS Director that a reduced number of Proposals be shortlisted for more extensive review through a formal oral presentation to the Committee, interview or a site visit or (2) recommend to the DHS Director that DHS request authorization for the County to enter into an Agreement(s) with the Successful Proposer(s).
- e. As described in d above, DHS, on behalf of the County, shall have the exclusive discretion to shortlist a reduced number of Proposals for more extensive review. In

this case, DHS may request that shortlisted Proposers make a formal oral presentation to the Evaluation Committee. Each Committee member will individually score the oral presentation of the shortlisted Proposers using the following criteria and the scale outlined in 5.1b. The maximum score that a shortlisted Proposer's oral presentation can receive is 15 points:

- Presentation demonstrates Proposer's ability to implement the Contract Services effectively (5 points)
- Proposer's answers to Evaluation Committee's questions demonstrate Proposer's ability to implement the Contract Services (5 points)
- Proposer's presentation is thoughtful and well prepared (5 points)

f. DHS will tally the scores of the members of the Evaluation Committee and report a list of average scores to the entire Committee. The Committee will meet, consider the scores and arrive at a consensus as to which Proposer(s) can best provide the Contract Services in response to the RFP.

g. The Committee will submit its recommendation for award of an Agreement or Agreements to the DHS Director for approval. The Director will, in turn, submit a request to the County Manager for approval for the County to enter into an Agreement with the Successful Proposer(s).

h. At any time during the evaluation process, DHS may contact a Proposer to discuss any areas of the Proposal needing clarification or further explanation.

i. At any time during the evaluation process, DHS may contact a Proposer's references.

j. As part of determining a Proposer's eligibility to enter a contract with Allegheny County, all Proposers' financial audits or other documentation will be reviewed by DHS fiscal analysts to ensure a Proposer's financial stability.

**k. The County is under no obligation to award or enter into an Agreement with a Proposer as a result of this RFP. The County reserves the right to reject any and all Proposals.**

l. All Proposers will be notified of the County's final decision of which Proposer(s) will be awarded an Agreement.

m. Proposers that are not awarded an Agreement but who are interested in receiving feedback regarding their submission may request a phone call at [DHSProposals@alleghenycounty.us](mailto:DHSProposals@alleghenycounty.us).

## 5.2 Other Requirements

For a Proposal to be eligible for evaluation, it must be:

- a. Received by the due date/time.
- b. Properly formatted and include responses to all requested information.
- c. Complete with all required forms and attachments.

Proposals which do not meet the above requirements will be automatically rejected and will not be presented to the Evaluation Committee.

# Section 6: Contract Requirements for Successful Proposers

In order to enter into an Agreement with the County, Successful Proposers must comply with all contract requirements listed below and all standard terms and conditions contained in a County contract for provision of services to DHS and its offices. In addition, Successful Proposers must be able to meet the insurance requirements necessary to provide the Contract Services. Additional details about contracting with Allegheny County and the insurance requirements are available in the [DHS General Requirements/Contract Specifications Manual](#) and the [Insurance Requirements Overview](#).

## 6.1 Minority, Women or Disadvantaged Business Enterprise (MWDBE) Requirements

Allegheny County has MWDBE goals of 13% participation for Minority Business Enterprises and 2% participation for Women Business Enterprises and expects that Successful Proposers will make a “good faith effort” to help the County meet these goals.

- a. All Proposals must include a completed Allegheny County DHS Combined MWDBE Form and supporting documents. The Allegheny County DHS Combined MWDBE Form should be completed as follows:
  - All Proposers must complete Section 1 – Contact Information and attach their MWDBE Diversity Plan (see Section 4 – Sample Diversity Policy).
  - If the Proposer can meet the MWBDE contract goals, the Proposer should complete Section 2 – MWDBE Participation Statement. Proposers also must attach the MWDBE certifications of the firms cited in the Participation Statement.
  - If the Proposer would like to request a waiver from participating in the MWDBE contract goals, the Proposer should complete Section 2 – MWDBE Participation Statement and Section 3 – MWDBE Participation Waiver Request Form.
- b. MWDBE forms and resources can be found on the [RFP Opportunity Page](#) and through the links provided below:
  - [Allegheny County DHS Combined MWDBE Form](#)
  - MWDBE Resources
    - [MWDBE Contract Specifications Manual](#)
    - [MWDBE Guide for DHS Proposers](#)
- c. For more information about MWDBEs, visit the [Allegheny County Department of Equity and Inclusion website](#).
- d. A listing of certified DBE vendors can be found at <https://paucp.dbesystem.com>.

## 6.2 Veteran-Owned Small Business (VOSB) Requirement

Allegheny County also has a goal of 5% participation for veteran-owned small businesses (VOSB) in all contracts. The County, therefore, expects that Successful Proposers will make a “good faith effort” to help the County meet this goal.

- a. A veteran-owned small business is defined by the County as a business having 100 or fewer full-time employees and not less than 51% of which is owned by one or more veterans, or in the case of any publicly owned business, not less than 51% of the stock of which is owned by one or more veterans, and the management and daily business operations of which are controlled by one or more veterans. The VOSB vendor **MUST** provide proof of veteran ownership including percentage and name and address of business.
  - For contracts under \$100,000, VOSB vendors are from all bonding requirements.
- b. All Proposals must include either of the following:
  - If the Proposer can meet the VOSB contract goal, a completed VOSB Participation Statement is required. You must also attach a copy of the VOSB vendor(s) DD 214 discharge form(s) cited in the Participation Statement.
  - If the Proposer requests a waiver from participating in the VOSB contract goal, a completed VOSB Participation Statement and VOSB Waiver Request are required.
- e. VOSB forms and resources can be found on the [RFP Opportunity Page](#) and through the links provided below:
  - [VOSB Participation Statement](#)
  - [VOSB Waiver Request](#)
- c. A listing of Small Businesses, Small Diverse Businesses, and Veteran Business Enterprises (SB, SDB, and VBE) can be found at [www.dgs.internet.state.pa.us/suppliersearch](http://www.dgs.internet.state.pa.us/suppliersearch).

### **6.3 HIPAA Compliance**

DHS is a covered entity under the Health Information Portability and Accountability Act (HIPAA). Therefore, a Successful Proposer must comply with all HIPAA requirements.

### **6.4 Cyber Security**

- a. Successful Proposers must meet the minimum computer specifications that begin on page 14 of the [DHS General Requirements/Contract Specifications Manual](#), available at [www.allegenycounty.us/dhs/solicitations](http://www.allegenycounty.us/dhs/solicitations).
- b. All electronic devices must have sufficient security software and settings to minimize the risk of an information breach.

- c. Successful Proposers must also have policies in place to ensure that electronic devices are physically secure when not in use (e.g., locked in a vehicle trunk, password protected).

## **6.5 Equal Employment Opportunity and Non-Discrimination Requirements**

By submitting a Proposal, a Proposer agrees to not discriminate against any employee, applicant for employment, independent contractor, client or any other person on the basis of race, color, religion, national origin or ancestry, sex, gender identity or expression, sexual orientation, disability, marital status, familial status, age (40 or over), or use of a guide or support animal because of blindness, deafness or physical disability.

## **6.6 Language Diversity Requirements**

Successful Proposer(s) must assure resources are secured and/or made available for participants/consumers/clients with limited English proficiency or other communication barriers. Such actions shall include but not be limited to assessing the need for interpreters, evaluating the need for alternate language materials, identifying internal and external resources to meet identified needs, and accessing services contracted by DHS through their assigned contract monitor(s).