

RFP Response Form **Final**

Recovery Housing

PROPOSER INFORMATION

Proposer Name: EAST END COOPERATIVE MINISTRY

Authorized Representative Name & Title: Michael J. Mingrone, President and CEO

Address: 6140 Station Street, Pittsburgh, PA 15206

Telephone: 412-361-5549

Email: eecm@eecm.org

Website: www.eecm.org

Legal Status: For-Profit Corp. Nonprofit Corp. Sole Proprietor Partnership

Date Incorporated: 1970

REQUIRED CONTACTS

	Name	Phone	Email
Chief Executive Officer	Michael Mingrone	412-345-7117	michaelm@eecm.org
Contract Processing Contact	LaWana Simmons	412-345-7330	julieu@eecm.org
Chief Information Officer	Jason D. Flowers	412-345-7139	jasonf@eecm.org
Chief Financial Officer	LaWana Simmons	412-345-7330	lawanas@eecm.org
Administrative Contact	Reverend Kellie Wild	412-345-7131	kelliew@eecm.org

BOARD INFORMATION

Provide a list of your board members as an attachment or in the space below.

List of EECM Board of Directors attached.

Board Chairperson Name & Title: Carla E. Frost, Vice President/Branch Manager

Board Chairperson Address:

Board Chairperson Telephone:

Board Chairperson Email:

REFERENCES

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Provide the name, affiliation and contact information [include email address and telephone number] for three references who are able to address relevant experience with your organization.

Please do not use employees of the Allegheny County Department of Human Services as references.

- Elizabeth Scott
- Charlotte Peele
- Derrick L. Tillman, Owner; DNT Property Investments, LLC

PROPOSAL INFORMATION

Date Submitted 4/24/2017

Amount Requested: \$200,823.00

Proposal Abstract:

Please limit your response to 750 characters

East End Cooperative Ministry (EECM) seeks to provide a “Recovery House” on its 57,000 sq. ft. LEED campus in the heart of East Liberty. EECM is immediately ready to administer a program for up to 14 men simultaneously transitioning from drug/alcohol abuse and custodial settings.

One of EECM’s four core programs, Individuals Making Progress and Change Toward Self-Sufficiency (IMPACTS) provides a multi-service network and community of support for individuals facing fragile housing situations who have chosen to end their own unhealthy substance use to gain both sobriety and self-sufficiency. IMPACTS today offers a continuum of housing assistance and recovery services – from a comprehensive 24 hour-secure residential facility for fragile housing populations at EECM’s Community House, to permanent affordable housing and on-going recovery support, for life.

CERTIFICATION

Please check the following before submitting your Proposal, as applicable:

I have read the standard County terms and conditions for County contracts and the requirements for DHS Cyber Security, EEOC/Non-Discrimination and HIPAA.

By submitting this proposal, I certify and represent to the County that all submitted materials are true and accurate, and that I have not offered, conferred or agreed to confer any pecuniary benefit or other thing of value for the receipt of special treatment, advantaged information, recipient’s decision, opinion, recommendation, vote or any other exercise of discretion concerning this RFP.

ATTACHMENTS

Please submit the following attachments with your Response Form. These can be found at

<http://www.alleghenycounty.us/dhs/solicitations>.

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- MWDBE documents
- Allegheny County Vendor Creation Form
- 3 years of audited financial reports
- W-9
- Draft set of house rules and requirements
- Rental permission letters as needed
- Budget

REQUIREMENTS

Please respond to the following. The maximum score a Proposal can receive is 110 points. Your response to this section should not exceed 18 pages.

A. Organizational Experience (10 points total)

1. Describe your organization's experience providing housing and support services to individuals with a history of unhealthy substance use.

East End Cooperative Ministry (EECM) has been providing shelter, making linking to supportive services, and securing housing for vulnerable and transitioning populations since our founding in 1970. One of the goals of our mission “to build a community of opportunity” is to help all individuals with whom we work secure permanent housing as well as the necessary income sources, non-cash benefits, and supportive services needed to maintain that permanent housing. Most clients with whom we work are in recovery and/or dual diagnosis.

IMPACTS works collaboratively with and refers clients to many agencies to provide appropriate levels of care – outpatient services, partial programs, and the like. For example, IMPACTS small relapse prevention groups, hosts AA/NA meetings, and informs clients about additional AA/NA meetings and recovery resources in the community.

Individuals Making Progress and Change Toward Self-Sufficiency (IMPACTS) is one of EECM's cornerstone programs. IMPACTS helps individuals and families break the cycles of addiction, poverty and homelessness with a continuum of integrated services. All of our residential housing, from emergency shelter through permanent supportive housing, offer: case management, meals, laundry room, a computer lab for housing and job searches, support groups, recovery groups, and social activities. Our two scattered site programs offer multiple services. These services including family case management, individual case management, social activities, support groups, recovery groups and families with school age children are assigned a school liaison (which may be the case manager) to not only ensure that school age children are enrolled in school but also to teach and empower the parent/guardian how to advocate for their children. In 2016, IMPACTS provided 4,335 bed nights and placed nearly 500 adults in stable housing and

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employment. In addition, all program participants as well as members of the community are able to access EECM's education and employment programming and onsite behavioral health counseling.

Several EECM staff, including front line staff, program managers and directors have experienced homelessness, mental illness and/or addiction themselves. Staff who have experienced issues and difficulties similar to those in our care, may empathize with the participants and provide special trauma-informed assistance in harmony with what the participant is experiencing. We are able to provide realistic relevant support to individuals struggling with unhealthy substance use and their families affected by that substance use. IMPACTS staff have experience in counseling, pastoral care, trauma informed care and assisting individuals and families with co-occurring disorders who are homeless or in fragile housing situations. All staff are well versed in connecting participants to supportive services, working with partner agencies and, accessing government benefits. Volunteers who work with our participants are trained for trauma sensitivity and understanding mental health and addiction issues.

Because approximately 80% of the adults EECM works with have a substance use disorder, IMPACTS staff are well versed in providing services and support to help people enter and maintain recovery. Every IMPACTS staff person is trained in motivational interviewing, and utilizing this approach, helps each individual identify their goals and make plans to achieve those goals. While each plan is unique to the individual, EECM offers the following services, among others, to assist those in recovery: behavioral health/addiction counseling, recovery groups (including 12 step), relapse prevention groups, Seeking Safety - Trauma and Substance Abuse, as well as individualized and group peer support. For example, our weekly women's peer group meeting brings together women with a history of unhealthy substance use, some of whom have been in recovery for a decade or longer mentoring those who are new to recovery.

2. Describe your organization's experience helping individuals transitioning out of inpatient treatment facilities and/or the jail on their path to recovery.

Service Population

IMPACTS routinely provides services to adults in recovery. Many of our current clients come from jail, either directly into our emergency shelter or through Allegheny Link into one of our longer term programs. IMPACTS also has significant experience working with individuals who are both voluntarily and involuntarily transitioning out of inpatient treatment whose are either homeless at the time or facing fragile unsafe housing options. Individuals transitioning from these or other forms of custodial care AND face fragile housing situations, make up a significant percentage of IMPACTS participants who

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find services and other supports in EECM's self-sufficiency lifelines which include the following.

Lifelines to Recovery and Housing

- Housing - EECM utilizes its many different types of housing options to provide a stable platform from which individuals can achieve their goals leading them to a sustainable future. All housing options provide services with attention to recovery for mental health and addiction.
 - Orr Compassionate Care Center provides 24-hour shelter and health respite time for adults who are unable to return to their prior housing situation and are in need of a supportive place to recuperate after being discharged from the hospital.
 - Penn Free Housing's provides individual and group counseling, case management and rent support specifically for men and women recovering from addiction.
 - Bridge Housing is a twelve month housing program for men in recovery many of whom have co-occurring disorders. The focus of the program is to help these individuals gain a stronger foundation in their recovery through the service mentioned above and to work toward a sustainable independent future through education and employment services.
 - Short Stay Program is similar to the Bridge Housing but is shorter in duration with an expected stay of six months. This program is directed at individuals who have a stronger base in recovery than those in bridge and the focus is on income and housing acquisition while securing permanent housing options.
 - Emergency Shelter provides services for those in need of immediate housing, especially those being discharged from jail who face homelessness or an unsafe living situation.
 - Safe Haven houses ten chronically homeless men who have significant mental health and for many, long standing addiction.
 - FAITH (Families Achieving Independence Through Housing) provides supportive permanent housing for families with disabilities. Within the FAITH program, case managers provide recovery support, life skills training and connections to benefits and services as indicated by the individualized family care plan.

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- Behavioral Health services are offered on site with a focus on individuals who are un- or under-insured or have other barriers to receiving services at a traditional community based treatment facility.
- Case Management includes a comprehensive assessment and unified self-sufficiency plan, accounting for the involvement of the participant's service providers, recovery plan, friends and family, housing needs, and personal goals.
- Education & Employment program accelerates education capacity and employment readiness through tutoring and GED prep, hands-on job training, classes and workshops in anger management, life skills for employment, finance, resume and interviewing and basic computer skills. Additionally EECM Workforce provides employment opportunities in environmental services, landscaping/snow removal and sewing/design work.

Our intake process includes an orientation to the facility and our safety and security measure (emergency procedures). We use an Intake Form on which we gather demographic information, a full history of substance use, medical information, medications, income sources and amounts, non-case benefits (both current and needed), employment history, mental health history, domestic violence, housing history, veteran status, support structures and relationships (both current and those to re-establish). Additionally, the Intake Coordinator will review and provide written documentation for the residents on the following items:

- Resident Handbook, which provides detailed program information,
- Rules Agreement Form,
- Safety/Security quick reference guide,
- Termination and Appeal Policy information,
- Drug and Alcohol Consent to Release Information Form and Privacy Policy,
- Overdose information and policy,
- Program Expectation form including daily household chores and responsibilities.
- Resident Right to Choose and, if needed a Conflict of Interest statement,
- Use of Over the Counter and Prescription Medication Policy,
- Recovery House schedule that includes groups, workshops and activities,
- Repair and Maintenance Request Form, and
- Rent collection policy and procedure.

Daily amenities at Recover House include a fully equipped laundry room (with washer and dryer), meals, access to a shared kitchen space, private and secure outside spaces, TV and reading lounges, spiritual support and an interfaith chapel, individual case management and counseling, computer access for housing and job searches, support groups, recovery groups, and social activities.

Recovery House residents will benefit from a staff of seasoned professionals and a cadre of 300 capable volunteers representing over 40 member congregations, and the community at large.

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B. Housing (40 points total)

3. Describe how many Recovery Houses you would like to provide, how many bedrooms the House(s) will have and how many Residents you intend to serve per House at any given time.

EECM proposes to provide one fourteen-bed recovery house for men which will be located within the larger EECM Community House. The Recovery House will be located in a separate area from the other housing programs so as to create a supportive community environment. Within the Recovery House there are seven distinct units with two beds, a privacy wall and one bathroom per unit. Additionally there is an option for a single efficiency unit for a house manager should they also need housing. The larger Community House within which the Recovery House will be located has twenty-four hour staff and security available to residents.

4. Describe the intake materials that you would complete and share with incoming Residents.

Our intake process includes the Intake Form on which we gather demographic information, a full history of substance use, medical information, medications, income sources and amounts, non-case benefits (both current and needed), employment history, mental health history, domestic violence, housing history, veteran status, support structures and relationships (both current and those to re-establish). Additionally, each Recovery House resident will receive a Resident Handbook, which provides detailed program information, a Rules Agreement Form, a Safety/Security quick reference guide, Termination and Appeal Policy information, Consent Forms, Privacy Policy, Overdose information and policy, and a Program Expectation form.

5. **Attach a draft set of your proposed rules and requirements for the Recovery House.** In the space below, describe your plan for addressing Residents should they fail to comply with the rules and requirements.

EECM understands that people may make choices that are not always helpful to their recovery or current housing situation and seeks to utilize these choices and situations as learning events. Whenever a resident violates a rule, depending on the nature and severity of the violation, the result may range from verbal counseling including a review actions as related to stated goals (motivational interviewing) with a review of the rules and requirements, a written warning or Contract for Continued Stay or, if necessary, termination from the program.

Many of our residents have spent significant time in institutional settings and have developed the ability to comply with rules without transformative changes in thinking

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and behaviors. Our goal is to help the resident integrate into a stable sober living environment as they prepare to return to independent living. We do not take a punitive approach, but one of open communication where residents continue to progress in their recovery, learning from their choices – both positive and not so positive. We find that recognizing positive behaviors and celebrating achievements of residents has better outcomes with encouraging constructive behavior than does taking punitive action. Nevertheless, the safety and security of staff and residents must be foremost. Should a resident fail to comply with a “non-negotiable rule” jeopardizing the safety and security of others (e.g. engaging in violence towards staff or another resident or bringing illegal drugs or alcohol into the facility), termination with the right to appeal is immediate.

EECM’s proposed rules and requirements for the Recovery House are attached.

6. Describe your plan for supporting a Resident in the event of relapse and for preserving the stability of other Residents of the House in the event of a Resident’s relapse.

While a relapse does not necessarily lead to a discharge from the program, it does speak to the difficulties a resident is encountering with their recovery. Our view is that using a substance is the last stage of a relapse and the work in helping a resident prevent further relapse is to review with them the circumstances that led to them using again. In other words, it is important to identify the root causes and behaviors of a relapse and not simply look at the end-result of picking up again. Therefore, if a resident relapses (uses) and would like to continue and it is appropriate for them to continue in the program, EECM provides for that possibility. We work closely with the resident to identify and implement actions that can help prevent further relapses. These actions may include but are not limited to restriction to the facility or having a sober companion with them when they leave, increased drug and alcohol testing, celebrating small victories as they return to sobriety, focused counseling on prevention of future relapses, and/or review of recovery plan and what worked and did not work. Additionally relapse by one resident will have an effect on the entire Recovery House, as a community. When one resident relapses, staff will provide support for all residents, which may include one-on-one meetings, a process group, peer support, a community meetings, a review of one’s recovery plan and/or, a discussion of concerns in the relapse prevention group.

7. Describe your plan for involuntary termination of a Resident from the Recovery House, including the possible reasons for termination, the process to notify a Resident and the appeals process.

Involuntary termination is the last course of action EECM takes and does not do so lightly. Involuntary termination only occurs in two instances. One is for choosing to engage in one of our non-negotiable activities (see rules agreement). The other reason

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someone may be terminated involuntarily from the program, is for multiple rule violations that continue even with verbal and written warnings/counseling as indicated above. Prior to receiving an involuntary termination in this instance, the residents will have received verbal and written warnings and/or a contract for continued stay detailing rule violations and expected behaviors. If the resident chooses to continue to violate the rules, he is informed of his impending termination and EECM will provide assistance in locating possible housing options. EECM's Termination & Appeal policy and procedure outlines the termination policy and the termination appeal process in detail and is provided to the resident at admission and again at time of termination. We currently follow the guidelines set up by Allegheny County DHS for termination and appeals. Additionally, all residents have the right to appeal the termination to the Program Director and/or file a complaint with the Director's Action Line.

8. Describe the site(s) and amenities of your Recovery House(s). In what neighborhood do you intend to locate the House(s) and why? Are public transit and groceries nearby? Do intend to purchase or rent the house(s)? If currently renting, attach a letter from the owner permitting your organization to operate a Recovery House at that site.

The Recovery House will be located in East Liberty on the EECM campus in a fully handicapped accessible separate and distinct unit within EECM's Community House. Onsite, residents will have access to case management services, education and employment resources, and behavioral health services. Residents will also have multiple lounges, for eating, reading, and TV, a fully equipped laundry room and a well-equipped computer lab with Internet access. Residents will receive three meals and two snacks per day including a home-cooked meals prepared and served by volunteers. Residents are expected to assist in the meal set up and clean up and have the opportunity to prepare and provide a community dinner once or twice per week. Additionally, EECM offers 24/7 access to spiritual support, and an interfaith sanctuary.

The facility is located within walking distance of multiple bus lines and the MLK East Busway, grocery stores, clothing and shoe stores, "big box" stores, and "dollar" stores and thrift shops (for which we can provide vouchers). The Recovery House is located nearby many business/services with a Federally Qualified Health Clinic located across the street. Also available within walking distance, are a Post Office, Department of Public Welfare office, Social Security office and Parole office.

IMPACTS, which will administer the Recovery House, is a program of East End Cooperative Ministry, the not-for-profit entity that owns the building.

9. Describe your plan for being responsive to the needs/concerns of both Residents and neighbors.

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With a history of nearly 50 years of relevant anti-poverty work in Pittsburgh, EECM and our programs, well established in the community, provide many services to residential and business neighbors. With a forever commitment to help make East Liberty, and beyond, welcoming and supportive to everyone, EECM's practice helps to build acts of caring in the larger community. Part of our commitment to the residents of the Recovery House is to help them integrate into not only the Recovery House community, but the larger community as well, by providing opportunities for neighbors to interact in a positive manner. Examples of this include EECM's open source Community Garden, annual Open House and Let Peace Shine events, seasonal Community Conversation Dinners, Community of Hope, and our neighborhood litter clean-up campaigns. On a micro level, residents will interact with our many volunteers and possibly local businesses in our education and employment programming should they desire a tutor, mentor, or job coach.

10. Describe your plan to ensure that the proposed Recovery House(s) meet(s) the structural standards requirements, as described in section 2.2 E of the RFP.

EECM's proposed site for the Recovery House meets all of the structural standards described in section 2.2 of the DHS Recovery Housing RFP. EECM chronicles the results of regular inspections by DHS, Veteran's Administration, Department of Health, and others.

C. Supporting Residents (20 points)

11. Describe your approach to building and monitoring a Recovery Plan with Residents.

Recovery Plans

Within 24 hours of admission, new residents will begin to develop and follow an individualized recovery plan which acts as a map that will guide them as they continue to work on their recovery and make progress toward sustainability and independence. Recovery plans are individual to each resident and their specific needs and goals and EECM provides the template from which the individualized plan is developed. Each resident will review and revise his with their assigned caseworker at their weekly meetings. Case managers will meet weekly with residents to develop and review their recovery plan and progress in achieving their goals and dreams.

Addiction is multifaceted in it causes and effects on the individual, therefore, a recovery plan must also be multifaceted and individualized. Our recovery plan template, covers areas such as recovery and relapse prevention, education, employment, financial independence, income and/or non-cash benefits acquisitions, social support/relationships, health/wellness –physical, mental spiritual, long term housing, legal, social activities as well as the ability for the resident to designate their own life domain not listed above. This recovery plan is a living document that will be

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completed over time, as the resident is able and willing to address the domain areas and the plan will be updated and changed as needed for each resident to achieve his goals.

The plan belongs to the resident and therefore must be usable and effective for him. Staff simply guides the resident in development and completion of the plan. The recovery and relapse prevention portion of each residents' plan, will have a specific section that the residents will be able to have with them at all times and includes their provider and support network contact information, their internal resources, strategies to maintain recovery, and a list of their strengths to draw upon.

12. Describe your plan for connecting Residents to treatment, employment, housing and other supports so that they successfully transition to independence.

EECM IMPACTS programs are all focused on helping individuals identify their strengths, goals and plans and then identifying and connecting those individuals with the resources to help them become sustainably independent. Treatment, employment, housing and other supports are a necessary part of the resident's recovery plan. Each individual's needs for treatment related services are assessed upon entry into the Recovery House (starting with the Level of Care assessment). Suggested treatment options are reviewed with the resident and as needed referrals are made to our many partners. EECM has a behavioral health counselor on site who works with individuals who are un- or underinsured and makes appropriate referrals for others who are not already connected to treatment providers. Our case managers are well versed in community resources and making connections and referrals to those services including appropriate case and non-case benefits.

In order to help residents better address their long term self-sufficiency needs, EECM provides education and employment services on site. EECM's Employment and Education program (E&E) provides workforce training, job readiness support, and employment services to our homeless shelter residents and members of the community. Many of the individuals in our E&E program typically have difficulty finding employment and need assistance with job skills, obtaining proper government documentation, reading comprehension, anger management, addiction recovery, self-confidence and behavioral health issues. EECM WorkForce provides an externship opportunity for trainees and eventual employment opportunities for our E&E graduates. Due to behavioral health issues or previous incarceration, some E&E trainees may not be able to find successful employment outside of EECM. Providing additional work opportunities within EECM allows clients to build their work history and gain the skills necessary for long-term employment. WorkForce provides individuals with market-rate pay so they may better afford to live in independent housing and free themselves of government assistance. E&E is just one part of EECM's self-sufficiency model, helping our clients to break the cycle of poverty and homelessness.

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To address housing needs, each resident will meet with the housing specialist and attend the housing workshops that includes information of the many types of possible housing options, eligibility for each option and steps to applying for and obtaining sustainable housing including the possibility of housing through Allegheny County's Continuum of Care providers.

13. Describe your plan for ensuring that Residents have peer supports.

EECM values and has long-standing history of providing peer support. Trained EECM staff members who are themselves in recovery typically provide a measure of peer support. Graduates of the program are available to mentor current residents, as are the peer supports of AA/NA and other recovery meetings and groups. EECM will hire a peer support professional who will also operate as a house manager. Additionally, because Recovery House is a community of individuals in recovery, each of the residents will be encouraged, trained, and expected to provide peer support to others. All of the above combines to provide a strong network of peer supports available to each resident.

14. Describe your plan for creating a supportive recovery community among Residents.

EECM believes a supportive community is paramount to recovery. The Recovery House facility itself is designed to be a supportive environment with a forever commitment to each of the residents. EECM does not take a poverty approach to any of its services including the facilities it utilizes for housing individuals in emergency shelter and Recovery House or permanent housing. We understand that all we do – services, facilities, social activities – is an investment in the individuals we serve. We will provide for a safe, clean and substance free environment, with recovery resources/literature available, AA/NA meetings on site, staff who are in recovery, staff trained in trauma informed care and recovery and relapse prevention groups.

D. Staffing/Training Plan (10 points total)

15. Describe your staffing plan and include details about the number of staff you will have per Recovery House, their functions and levels of experience.

Staffing for the Recovery House includes a full time case manager a part time house manager/peer support specialist, and the services of the IMPACTS program housing specialists, intake specialist, education and employment staff, behavioral health therapist, and management oversight. Staff members all have years of experience working with individuals in recovery and as stated above, many have direct personal experience with addiction.

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The case manager as a point person is primarily responsible for assisting the resident in establishing goals, developing and following through their recovery plan, coordinating services and resourcing the resident as needed. Additionally, case management staff provide recovery, relapse prevention and life skills programming/groups.

The house manager/peer support staff member is responsible for supporting residents in all areas of their recovery plan and ensuring the smooth operation of the Recovery House facilities. This individual will, in conjunction with other staff, provide for recovery, relapse prevention life skills programming. This individual provides for accountability for the residents speaking directly from their personal experience with recovery while allowing for individual differences in each persons' plan.

The Housing Specialist will engage with each resident as he works towards locating a more permanent housing solution by providing housing workshops and one-on-one counseling. Housing Support Specialists work with all of our housing programs and are therefore well connected with housing options and landlords.

The Intake Specialist completes all IMPACTS housing program intakes which provides for a single point of contact for referral sources and a smooth transition for individuals as they enter into one of our programs.

Behavioral Health will provide for onsite counseling in mental health and addiction related needs through groups and one-on-one counseling as described above.

Education & Employment (E&E) staff work directly with residents to identify goals and services needed in these areas. While E&E provides, educational testing, GED prep, tutoring, employment readiness and workforce development with hands- on training programs, we also refer residents to places such as Bidwell, Training Institute, East End Neighborhood Employment Center, Career Links, Office of Vocational Rehabilitation and others. Each resident is able to identify their goals and plans for achieving their goals.

Management oversight provides for the overall operation of the IMPACTS programming ensuring that program goals and expectations are being met, quality assurance, program review and improvement, and staff supervision and development.

16. Describe your plan to recruit, train and retain qualified staff. Describe how you will ensure that staff have lived experience and are reflective of the population that they serve.

EECM's trauma informed and community responsive staffing model values employees who themselves are in recovery or have significant personal experience with recovery. EECM also includes client support values by hiring professionals whose socioeconomic and life experiences and specialized training connects them to the experiences of clients

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most likely to participate in our programs. Most of our current staff grew up in the same neighborhoods as and/or in vulnerable conditions similar to those of our service population. Therefore, staff have both an intimate knowledge of the recovery process and the myriad challenges transitioning populations face in gaining and attaining their personal goals and economic independence. Recovery staff will staff have regular training in trauma-informed care, produce government required certifications and clearances, and are trained and tested in such competencies as, CPR and other emergency procedures. For example, *we have Naloxone on site and all program staff trained in its use.*

E. Records, Confidentiality and Reporting (5 points total)

17. Describe your plan for maintaining accurate, secure client records and reporting data in a timely way.

EECM has both paper and electronic records. We have recently revised our quality assurance review to increase training and the level of accountability for keeping accurate records and reporting data in a timely manner – both of which are hallmarks of a well-run program.

Paper records are secured in locked files within locked offices and only staff have access to those records. The electronic records are kept in an online database utilizing the Salesforce platform. Salesforce is one of the most secure cloud-based data management systems. All IMPACTS case managers and front line staff members are trained on and use the Salesforce platform to perform data entry and compile metrics for reporting.

- Salesforce event monitoring provides clients with a detailed account of every action that is taking place, and that has been taken on the system, so that issues can be identified and resolved as quickly as possible
- Salesforce's multitenant platform provides a variety of cloud-based solutions for a wide range of clients. Users are able to access only their own organization's information. Salesforce uses unique organization identifiers. These identifiers are assigned with each new session, so that your data is available only to those who are authorized to access it.
- Salesforce security stays ahead of the curve by relying on the most up-to-date Transport Layer Security (TLS) for both authentication and encryption.
- Salesforce recognizes that the best way to protect data is to keep it isolated. Salesforce hosts its data in a server environment that is completely secure, and uses advanced technology to prevent all unauthorized outside access.

F. Performance Measures (5 points total)

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18. Describe how you will track and monitor performance measures for quality assurance and make appropriate changes based on those performance measures.

The Salesforce platform ensures that records and reports are confidential. Analytic data base queries improve the timeliness and efficiency of reporting on the effectiveness of IMPACTS' client services, program management, and the variety of data needed to inform stakeholders. Templates for generating commonly used data reports, spreadsheets, and other outputs improve the level of detail in EECM's annual reports and program brochures; outreach and marketing materials; social media and online posts; proposals and reports all of which reach thousands of stakeholders including EECM board members, grant makers, government entities, individual donors, and the public. Recycling the same formatting to issue regular reports using new data over time also improves frontline and back office efficiency; it also provides up-to-date data for monitoring and evaluation reports to improve program performance. Senior staff and board members review such reports monthly and bi-monthly respectively.

We agree to meet, as a minimum, the following benchmarks:

- 80% of Residents abstain from using drugs and alcohol while in Recovery Housing
- 100% of Residents exit to a permanent housing placement
- 100% of Residents who did not have income, gained income while in Recovery Housing
- 100% of Residents who were eligible for public entitlements, gained public entitlements while in Recovery Housing (e.g., Medicaid, Food Stamps)
- 100% of Residents participated in safe and sober activities while in Recovery Housing
- 100% of Residents who wanted to be connected to long term treatment supports while in Recovery Housing received connection
- 100% of Residents were connected to physical and dental health supports while in Recovery Housing (if needed)
- 80% of Residents indicated satisfaction with their experience in Recovery Housing, as measured by a satisfaction survey administered at discharge from the Recovery House.

G. Financial Management and Budget (20 points total)

19. Please attach a copy your organization's financial audits or certified financial statements for the past three years (not counted towards page limits).

Audits are attached.

20. Provide a line-item budget and budget narrative that shows all planned expenses, reflects a realistic estimate of the costs associated with implementing the Recovery House and includes a clear plan for

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providing cash match via federal, state, local and private sector funds to support the Program. The budget may be an attachment that does not count towards page limits.

The budget and budget narrative for this proposal are attached.

Budget Narrative

DIRECT COST:

A. Salary – Total: \$119,517.00

<i>Position Title & Name</i>	<i>Yearly Salary</i>	<i>% of Time</i>	<i>No. Months</i>	<i>\$Amount</i>
Case Manager	\$34,000.00	100%	12	\$34,000.00
House Manager/Peer Support Specialist	\$17,000.00	50%	12	\$17,000.00
Housing Specialist	\$34,000.00	30%	12	\$10,200.00
Intake Specialist	\$34,000.00	30%	12	\$10,200.00
Behavior Health	\$50,000.00	30%	12	\$15,000.00
Education & Employment Specialist	\$84,000.00	20%	12	\$16,800.00
IMPACT Manager	\$40,793.00	40%	12	\$16,317.00

- **Case Manager** will spend 100% of their time assisting the resident in establishing goals, developing and following through their recovery plan, coordinating services and resourcing the resident as needed. Additionally, case management staff provide recovery, relapse prevention and life skills programming/groups.
- **House Manager/Peer Support Specialist** will spend 50% of their time supporting residents in all areas of their recovery plan and ensuring the smooth operation of the Recovery House facilities. This individual will, in conjunction with other staff, provide for recovery, relapse prevention life skills programming. This individual provides for accountability for the residents speaking directly from their personal experience with recovery while allowing for individual differences in each persons' plan.
- **Housing Specialist** will spend 30% of their time engaging with each resident as he works towards locating a more permanent housing solution by providing housing workshops and one-on-one counseling.
- **Intake Specialist** will spend 30% of their time completing all IMPACTS housing program intake and providing for a single point of contact for referral sources and a smooth transition for individuals as they enter into our program.
- **Behavior Health** will spend 30% providing onsite counseling in mental health and addiction related needs through groups and one-on-one counseling as described above
- **Education & Employment Specialist** will spend 20% of their time working directly with residents to identify goals and services needed in educational testing, GED prep, tutoring, employment readiness and workforce development.
- **IMPACT Manager** will spend 40% of their time providing for the overall operation of the IMPACTS programming ensuring that program goals and expectations are being met, quality assurance, program review and improvement, and staff supervision and development

B. Fringes

Total: \$38,245.00

- Payroll taxes will be paid for all salaries: $\$ 119,517.00 \times .32 = \$38,245.00$ for the 12 month period of the contract.

C. Food Costs **Total \$ 600.00**

- Funds will be utilized to assist in purchasing food for community meals and events.

D. Program Supplies **Total: \$2,000.00**

- Funds will be utilized to program supplies and materials for groups, workshops, resident materials for recovery groups, etc.

E. Training **Total: \$1,000**

- Funds will be used to meet the training needs as outlined in the RFP.

F. Operations **Total: \$57,821**

- Costs associated with use of space (\$57,341) and other business expenses.

G. Other **Total: \$500**

- Funds will be used for drug testing and breathalyzer.

H. Equipment **Total: \$1,700**

- Funds will be used to purchase computers and printers

I. Client Aids **Total: \$800**

- Funds will be used to purchase bus tickets

INDIRECT COSTS:

H. Overhead **Total: \$20,082**

- Funds will be spend for the cost such as human resources, billing, organizational oversight

TOTAL: \$242,265

***Outside Funding** **Total: \$35,442**

- Other funding from foundations, other state and federal grants and individual donations.

ECCM RULES AND REQUIREMENTS FOR LIVING IN THE RECOVERY HOUSE.

The following is a list of the RULES AND REQUIREMENTS FOR LIVING IN THE RECOVERY HOUSE.

1. Residents may not use alcohol or drugs on or off the premises of the Recovery House.
2. Random urine testing and/or breathalyzers are used.
3. Residents are expected to behave in a respectful manner towards other residents and staff and can expected to be treated in a respectful manner.
4. Residents must contribute 15% of income (if you have income) to Recovery
5. House.
6. Residents shall not stay in the Recovery House for longer than 90 days.
7. Residents must attend weekly, mandatory recovery support meetings offered by Recovery
8. House (i.e. 12- step meeting, relapse prevention).
9. Residents must build and participate in a Recovery Plan. The Recovery Plan will include linkages to treatment, peer supports, employment and housing. Your Case Manager will verify participation in the activities outlined in your Recovery Plan.
10. Residents shall abide by quiet hours between 11:00 p.m. and 6:00 a.m. daily.
11. Residents must clean and maintain personal living area.
12. Residents understand that ECCM is a non-smoking campus and that smoking is permitted designated areas only.
13. Residents shall not act violently or threaten the safety of other Residents or staff.
14. Residents must abide by the policies about visitation of friends and relatives (see Resident Handbook for further information).
15. Residents must abide by the policies concerning OTC and prescribed medication administration and storage. (See OTC and Prescription Medication policy and procedure for additional information.)
16. Residents are not to engage in financial/loaning transactions with other residents.
17. Residents may be discharged if they do not follow the rules and requirements. Please see the Termination and Appeal Policy.

Non Negotiable Rules:

I understand that I am part of a community of individuals who are seeking to maintain and advance their recovery and if I choose to engage in any of the follow behaviors, I am jeopardizing the safety and wellbeing of the community. I understand that if I choose the follow behaviors I am choosing to not stay in Recovery House.

1. With the possibility of returning to Recovery House the next day,
 - a. Being under the influence of Drugs or Alcohol,
 - b. Smoking or vaping in or on Recovery House property
2. Without the possibility of returning to Recovery House unless an appeal is made and approved.
 - a. Violence, threats or intimidation of any kind,
 - b. Possession of drugs or alcohol in Recovery House
 - c. Theft

I have had the opportunity to ask questions and have the above explained to me and agree to abide by these rules.

Signature of Resident

Date

Signature of Intake Specialist

Date