The Boston Public Health Commission (BPHC) is pleased to announce this Request for Proposals (RFP) to provide evaluation for a potential SAMHSA grant. This document outlines a scope of service to be executed by a subcontracted evaluation team. The proposed grant is to expand System of Care services as defined by SAMHSA for young children within 3 communities (Boston, Worcester, and Springfield) over a four year period. The goal of the evaluation is to identify strengths and the potential for replication of the model through evaluating data on a variety of domains.
<table>
<thead>
<tr>
<th>Date</th>
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<tr>
<td>Sunday 3/15/2015</td>
<td>Advertising</td>
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<tr>
<td>Monday 3/16/2015</td>
<td>Request for Proposal applications and instructions available for pick up at the Boston Public Health Commission located at 1010 Massachusetts Avenue, 2nd Floor, Boston, MA 02118. They can also be found online at <a href="http://www.bphc.org">www.bphc.org</a> under RFPs &amp; Proposals.</td>
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<tr>
<td>Friday 3/20/2015</td>
<td>Questions in writing by mail or e-mail due by 5:00pm to Christy Moulin at <a href="mailto:cmoulin@bphc.org">cmoulin@bphc.org</a>. Please call to confirm receipt of the question.</td>
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<tr>
<td>Monday 3/30/2015</td>
<td>Proposals due - Applications must be delivered by <strong>4:00 P.M.</strong> to the Boston Public Health Commission at 1010 Massachusetts Avenue, 2nd Floor, Boston, MA 02118. Attn: Christy Moulin. The envelope must be clearly marked: <strong>Early Childhood Mental Health System of Care Expansion Implementation Evaluation Proposal.</strong> THERE ARE NO EXCEPTIONS TO THE DEADLINE.</td>
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<tr>
<td>Tuesday 4/08/2015</td>
<td>Award notification</td>
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<tr>
<td>Tuesday 4/09/2015</td>
<td>For selected proposal only, Letter of Commitment to BPHC</td>
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</table>

**Funding is contingent on SAMHSA awarding BPHC the grant. Selected Applicant will not sign a contract unless and until BPHC is awarded the grant from SAMHSA.**

The RFP packet will be available at the above listed address. Questions about the RFP must be in writing and submitted by March 20, 2015 to Christy Moulin. Answers provided by the Boston Public Health Commission (“Commission”) in response to questions by Applicants will be answered in writing and will be emailed, mailed or faxed to vendors recorded as having received an RFP application. They will also be posted on the RFP & Proposals section of [www.bphc.org](http://www.bphc.org). The responsibility for submitting a response to this Proposal to the Commission on or before the stated time and date will be solely and strictly the responsibility of the applicant. The Commission will in no way be responsible for delays caused by the United States Mail delivery or caused by any other occurrence.
SECTION I
Instructions to Applicants
Proposal Preparation Instructions

SECTION II
Specifications
Cost of Goods Form
Fiscal Rules

SECTION III
Requirements
Contract Information
Proposal Checklist

SECTION IV

Applicant Attachments
Cover Page
Business Profile
References
Certificate of Authority
Sample Contract
Add Vendor Packet/W9 form
FFATA Documents
1. In writing the Proposal, respond to the questions listed in the Proposal Narrative Section (page 13). Please submit a statement of agreement to proposed budget or a Program Budget and Budget Narrative fully explaining deviation from proposed budget (page 14). Lengthy, wordy Proposals can be difficult to judge; therefore, a clear and concise Proposal is requested. Carefully proofread the Proposal before submission.

2. The Proposal must be typed and the font should be 12 or larger and must be double spaced. All Proposals shall be entitled: ECMH System of Care Implementation Grant Evaluation.

3. When completed, check off and sign the PROPOSAL CHECKLIST (page 17) to ensure inclusion of all requested items. Attach appendices in the order listed on checklist.

4. Do not bind Proposals. Submit one (1) original, ink–signed application including appendix, all numbered and unbound (for ease of copying).

5. In addition, submit three (3) copies of Proposal. The PROPOSAL CHECKLIST on the Applicant Attachment Section contains all of the information required in the Proposal.

6. Deliver your Proposal to:

   Boston Public Health Commission  
   Child, Adolescent and Family Health Bureau  
   ATTN: Christy Moulin  
   1010 Massachusetts Avenue  
   Boston, MA 02118

   ALL PROPOSALS MUST BE RECEIVED BY March 30, 2015 AT 4:00PM.

The responsibility for submitting a response to this Proposal to the Boston Public Health Commission on or before the stated time and date will be solely and strictly the responsibility of the applicant organization. The Commission will in no way be responsible for delays caused by the United States Mail service or caused by any other occurrence.
SECTION II

SCOPE OF WORK

Overview

The Boston Public Health Commission (BPHC) is pleased to announce this Request for Proposals (RFP) to provide evaluation for a potential SAMHSA grant. This document outlines a scope of service to be executed by a subcontracted evaluation team. The proposed grant is to expand System of Care services as defined by SAMHSA for young children within 3 communities (Boston, Worcester, and Springfield) over a four year period. The goal of the evaluation is to identify strengths and the potential for replication of the model through evaluating data on a variety of domains.

Eligible Organizations

Applicants must be able to fulfill the requirements of the scope of work within the budget, have access to an Institutional Review Board, and have at least 1 doctorate level researcher assigned to oversee the project.

Funding Amount

Funding: up to $150,000 per year for 4 years ($600,000 for 4 years)

Background and Justification

The Boston Public Health Commission’s Bureau of Child Adolescent and Family Health serves as the convener of a 3 city System of Care Expansion Planning Grant from Substance Abuse and Mental Health Services Administration for the period October 1, 2014-September 30, 2015. BPHC is now in the process of writing an application for a 4 year System of Care Expansion Implementation Grant. If awarded this grant, BPHC will contract with an organization to evaluate the outcomes of this implementation grant.

- The 3 cities are Boston, Worcester, and Springfield. The planning teams in each city include representation from early education and care, primary care, public schools, and community mental health, as well as additional young child serving community partners.
- The 3 cities work closely with the Infant and Early Childhood Mental Health Inter-Agency Work Group convened by the Massachusetts Department of Public Health.
- The 3 cities will partner with the Office of Mass Health.
- The 3 cities will have 3 overarching implementation goals:
  - To implement a model of direct service to identify and support families with young children requiring early childhood mental health services;
  - To develop and support a local system of care meeting structure bringing together young child serving community partners and improving the system of care structures available to families with young children requiring early childhood mental health services;
  - To develop sustainable funding plans for direct services and system of care structures.
• All grant activities will demonstrate the ability to improve, expand, and sustain required comprehensive services and supports throughout the geographic area that are consistent with SOC principles and philosophy.

The evaluator of this grant will have two goals. First, it will use data to help make the case for ongoing support of the early childhood mental health system of care principles and philosophy. This may ultimately benefit children, families and partners/providers statewide. Second, it will ensure the data requirements of SAMHSA are met.

Scope of Service
The Boston Public Health Commission’s Bureau of Child Adolescent and Family Health’s early childhood mental health program seeks to contract with an agency to complete a program evaluation if awarded a System of Care Expansion Implementation Grant from SAMHSA. The scope of work is expected to last 4 years and begins if and when the grant is awarded from SAMHSA.

Evaluator Requirements:
I. Develop written evaluation plan in collaboration with BPHC and other grant partners.

II. Meet Data Collection and Performance Measurement requirements as described below:

All SAMHSA grantees are required to collect and report certain data so that SAMHSA can meet its obligations under the Government Performance and Results (GPRA) Modernization Act of 2010. BPHC will be required to report performance on the following performance measures:

• The number of policy changes completed as a result of the grant.
• The number of organizations or communities implementing mental health-related training programs as a result of the grant.
• The number of youth/family members/peers who provide mental health-related services as a result of the grant.
• The number of agencies/organizations that entered into formal written inter/intra-organizational agreements (e.g., MOUs/ MOAs) to improve mental health-related practices/activities as a result of the grant.
• The number of individuals contacted through program outreach efforts.
• The number of individuals referred to mental health or related services.
• The number of individuals receiving mental health or related services after referral.

For services, BPHC will be expected to report on the following performance measures:

• Mental illness symptomatology;
• Employment/education;
• Crime and criminal justice;
• Stability in housing; access, i.e., number of persons served by age, gender, race and ethnicity;
• Rate of readmission to psychiatric hospitals;
• Social support/social connectedness; and
• Client perception of care.

This information will be gathered by SAMHSA using the CMHS Child Outcome Measures for Discretionary Programs (Child or Adolescent Respondent Version and Caregiver Respondent
Version), which can be found at (http://www.samhsa.gov/grants/gpra-measurement-tools) along
with instructions for completing it. Data will be collected at baseline, 6-month follow-up, and at
discharge. Data are to be entered into the Common Data Platform (CDP) web system within
seven days of data collection. Technical Assistance related to data collection and reporting, data
entry, fiscal and annual report generation is available.

The collection of these data will enable CMHS to report on the National Outcome Measures
(NOMs), which have been defined by SAMHSA as key priority areas relating to mental health.
In addition to the NOMs, data collected by grantees will be used to demonstrate how
SAMHSA’s grant programs are reducing disparities in access, service use, and outcomes
nationwide.

Performance data will be reported to the public, the Office of Management and Budget (OMB)
and Congress as part of SAMHSA’s budget request.

III. Design and Implement Local Performance Assessment as described below:
The evaluator will periodically review the performance data reported to SAMHSA (as required
above) and assess progress and provide this information to BPHC to improve management of
grant projects. The assessment will be used by BPHC to help determine whether grant activities
are achieving the goals, objectives, and outcomes intended to achieve and whether adjustments
need to be made. Performance assessments will be used to determine if the intended impact on
behavioral health disparities is being met. Reporting on progress achieved, barriers encountered,
and efforts to overcome these barriers in a performance assessment report will be submitted
annually to SAMHSA with the BPHC progress report.

At a minimum, the performance assessment should include the required performance measures
identified above. BPHC may also consider outcome and process questions, such as the
following:

Outcome Questions:
- What was the effect of intervention on key outcome goals?
- What program/contextual/cultural/linguistic factors were associated with outcomes?
- What individual factors were associated with outcomes, including race/ethnicity/sexual identity (sexual orientation/gender identity)?
- How durable were the effects?

Process Questions:
- How closely did implementation match the plan?
- What types of changes were made to the originally proposed plan?
- What types of changes were made to address behavioral health disparities, including the use of National CLAS Standards?
- What led to the changes in the original plan?
- What effect did the changes have on the planned intervention and performance assessment?
- Who provided (program staff) what services (modality, type, intensity, duration), to whom (individual characteristics), in what context (system, community), and at what cost (facilities, personnel, dollars)?
**BPHC Responsibilities:**

BPHC will provide:

- Train site staff to use assessment tools
- Provide supervision to site staff in order to assure compliance with data development requirements.
- Funding to off-set additional staff duties related to meeting our data needs
- Technical assistance related to meeting our data needs
- Presentation to evaluation staff on Early Childhood Mental Health concerns
- Screening and assessment materials and training/support
- Funding to support an Early Childhood Mental Health quality improvement project. Amount to be determined based on funding from SAMHSA.
- Promote a continuum of early child mental health care for Boston children:
  - Seek maximum consistency between the 3 communities involve in project in relation to definitions of terms and variables and use of instruments for evaluation purposes.
- Promote participation of families and caregivers at all stages and in all aspects of the evaluation:
  - Engage family partners at city and site levels in ongoing evaluation planning;
  - Seek input and feedback from family partners on family-friendliness of instruments, tools, training, presentations and other communication activities; and
  - Assure adequate attention to family involvement as part of the process of evaluation and to family perceptions and experiences as important aspects of the outcomes evaluation.
- Promote an equitable system of early childhood mental health services for Boston children:
  - Maximize engagement of families from diverse language and cultural groups in evaluation planning and in review of evaluation materials; and
  - Assure adequate attention to cultural competence in terms of both the content and the process of the evaluation.
- Support in implementing subset of best-practices as an Early Childhood Mental Health quality improvement project.

**BPHC Monitoring Requirements:**

1. Invoice will reflect budget items billed monthly. BPHC program management will review and confirm invoice prior to payment.
2. BPHC program management will meet (in-person or by phone) with evaluation staff person no less than monthly. Any unsatisfactory interaction will result in written memo to grantee leadership.
3. Date, location, attendance, and minutes/summary of meetings will be recorded by BPHC program management.
4. BPHC will review quarterly data reports due on the 15\(^{th}\) of the month following the end of the quarter to monitor data collection goals. Any unsatisfactory reports will result in written memo to grantee leadership, meeting with BPHC staff, and (when necessary) a written plan for improvement.
5. **This contract is funded with federal funds. As such, grantee is required to submit:**
1) Most recent A-133 audit (organization would have an A-133 audit if it receives more than $500,000 in federal funding each year),
2) General Financial Audit, or

**Evaluation Criteria and Notification Process**

The application will be reviewed and evaluated on the basis of:

1. Capacity to meet the requirements outlined in the Scope of Work. **(25 points)**
2. Capacity demonstrated in the articulation of past experience leading community based research in an urban setting. **(25 points)**
3. Commitment and capacity to use data to identify and address health disparities. **(20 points)**
4. Capacity as demonstrated in the articulation of past experience with IRB review, engaging patients in research, and reporting evaluation data. **(10 points)**
5. Articulation of realistic and innovative plan for a Local Performance Evaluation. **(20 points)**

The Boston Public Health Commission will convene a review board comprised of community partners and Boston Public Health Commission staff. The committee will review all proposals and recommend the best candidates for selection by a designated official of BPHC.

Notwithstanding the review board’s recommendation, BPHC reserves the right to make the final decision regarding the selection of a proposal under this Request for Proposals (RFP). BPHC will notify applicants on or about March 31st, 2015. The selected organization will be required to sign and return to BPHC an MOU to be included in the grant application by April 7, 2015.

**Inquiry and Submission Process**

Questions and answers will be shared with all applicants at the BPHC website under **RFPs & Proposals**. A PDF document will be updated regularly with questions that are received and their answers.

Complete a proposal of no more than 10 pages, consisting of double spaced typed responses to the application questions. A statement of agreement to proposed budget, (if applicable) explanation of proposed deviations from budget, and a signed cover sheet are not included in the 10 pages.
Proposal Narrative

Please answer the following questions by responding in the order in which they appear (up to 10 pages). The use of bulleted lists and outline formatting is encouraged.

1. Please describe how you would meet the requirements outlined in the Scope of Work including your proposed staffing structure and provide resume or CV for lead researcher. (25 points)
   - How many years of relevant experience does the lead researcher have?
   - What is the lead researcher’s area of education and expertise?
   - What is the staffing capacity of the organization?

1. Please describe a past experience your organization has leading community based research in an urban setting. (25 points)
   - What were the challenges?
   - What strengths did your agency demonstrate in overcoming these challenges?

2. Please describe your organization’s commitment and capacity to use data to identify and address health disparities. (20 points)
   - Why is this work important to your organization?

4. Please describe your organization’s past experience with IRB review, engaging patients in research, and reporting evaluation data. (10 points)
   - What are your organization’s Institutional Review Board requirements? Which IRB is used? Who in your agency facilitates the IRB process?
   - How do you maintain engagement of participants?
   - Please describe your organization’s commitment to ethical research.

5. Please tell us 5 key data points, outcomes, or measures that you would suggest be included in a Local Performance Evaluation of an Early Childhood Mental Health System of Care Expansion Implementation grant. (20 points)
   - Why are these important?
   - What might be barriers to this Local Performance Evaluation?

Funding

Applications should include a budget and budget narrative covering the full 4 year scope of work. The budget period should run on the federal fiscal year.

Funds may be used for data collection, performance measurement, and performance assessment expenses.

Funds will be paid on a cost reimbursement basis. Funds cannot be used for costs incurred before the contract is issued or after it expires.

Funding is contingent on SAMHSA awarding BPHC the grant.