





Request for Qualifications Service and Housing Providers

Responses Due: August 22, 2018

The Ending Community Homelessness Coalition, Social Finance, and The Corporation for Supportive Housing, are soliciting Qualifications from organizations with demonstrated capacity and experience to deliver services as part of a Pay for Success (PFS) initiative that will provide supportive housing to chronically homeless¹ individuals who are frequent users of both the health and criminal justice systems and struggle with mental health and substance use challenges.

About ECHO, Social Finance and CSH

The Ending Community Homelessness Coalition (ECHO) is a non-profit that plans, develops, prioritizes, and implements systemic, community-wide strategies to end homelessness in Austin and Travis County, Texas. Together with its community partners, ECHO uses strategic, data-driven decision making and innovative, bold thinking to transform the system to end homelessness. As a coalition, ECHO works with different partners on a regular basis through different taskforces and working groups.

Social Finance, Inc. is a 501(c)(3) nonprofit organization dedicated to mobilizing capital to drive social progress. Social Finance is committed to utilizing Pay for Success and other innovative financing tools to tackle complex social challenges, facilitate greater access to services for vulnerable populations, and direct capital to evidence-based social services – all with the goal of measurably improving the lives of people most in need and driving more effective use of taxpayer resources.

The Corporation for Supportive Housing (CSH) transforms how communities use housing solutions to improve the lives of the most vulnerable people. CSH offer capital, expertise, information, and innovation that allow our partners to use supportive housing to achieve stability, strength, and success for the people in most need. CSH blends over 25 years of experience and dedication with a practical and entrepreneurial spirit, making us the source for housing solutions.

In addition to ECHO, Social Finance, and CSH, the following stakeholders are key partners in the development of the PFS Initiative: Austin Public Health and Neighborhood Housing and Community Development departments of the City of Austin, Travis County Justice Planning department, Central Health, Community Care Collaborative Ascension, Episcopal Health Foundation, St. David's Foundation, the Integrated Care Collaboration, and the Dell Medical School.

Background and Program Overview

According to the January 2018 Point-in-Time count in Austin/Travis County conducted by ECHO², there were 2,147 individuals experiencing homelessness In Austin/Travis County on a given night. Of those experiencing homelessness 1,014 individuals were sleeping outdoors (unsheltered) and 498 met the definition of chronic homelessness.

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¹ Having experienced homelessness for at least a year, or repeatedly, while struggling with a disabling condition such as a serious mental illness, substance use disorder, or physical disability. https://endhomelessness.org/homelessness-in-america/who-experiences-homelessness/chronically-homeless/

² http://www.austinecho.org/echo-reports/

It is well documented that supportive housing – which offers affordable housing and linkages to support services for physical and mental health, substance abuse and other issues – improves outcomes for individuals experiencing chronic homelessness, while reducing long-term spending on emergency services such as shelter, emergency hospital services, police, court and jail services. However, despite mounting evidence of effectiveness, local governments often have trouble securing the necessary investments for supportive housing.

Pay for Success (PFS) aims to solve for that investment need. PFS is a public-private partnership that funds social services through a performance-based contract. Pay for Success projects enable federal, state, and local governments to partner with high-performing service providers by tapping private investments to expand effective programs. If, following an independent evaluation, the program achieves predetermined outcomes that benefit society and generate value for government, then government will make outcomes payments to investors. However, the government pays only at the level of outcomes achieved. Further detail regarding the components of a PFS transaction can be found in the Appendix.

In April 2016, CSH released the <u>Austin/Travis County Pay for Success Feasibility Report</u> in which it was determined that PFS could be a useful and powerful new tool in Austin to scale supportive housing for the highest utilizers of the homelessness, healthcare, and criminal justice systems. Following this report, ECHO was awarded funding from the Nonprofit Finance Fund for PFS transaction structuring activities. In addition to continuing work with CSH, ECHO partnered with Social Finance to structure a PFS transaction. In July of 2016, ECHO was also awarded funding from The Department of Housing and Urban Development and Department of Justice (HUD-DOJ) to create a Pay for Success Permanent Supportive Housing Demonstration project with a focus on high utilizers of the criminal justice system.

The funding awards and community support for the PFS project, including from local health partners, foundations, Travis County, and the City of Austin have all propelled the project forward. Additional support from the St. David's Foundation has allowed for the launch of a PFS pilot in the spring of 2018.

The PFS project aims to address the challenges that vulnerable individuals experience in obtaining and sustaining stable housing, including mental health and substance use issues, while also reducing Austin/Travis County's criminal justice and emergency health systems costs. The primary goals of this initiative are to:

- House and provide supportive services to approximately 250 high utilizers of public crisis services (including jails, shelters, substance use, judicial, law enforcement, health and mental health services)
- Successfully (re)integrate participants into the community in stable, affordable housing
- Improve overall health of participants by increasing their use of appropriate preventive health services and reducing avoidable use of crisis care such as hospital emergency rooms, inpatient services, etc.
- Reduce utilization of the Travis County jail and criminal justice system
- Demonstrate PFS as a viable financing mechanism to scale supportive housing

It is anticipated that the 250 clients will receive intensive supportive services delivered by an Assertive Community Treatment (ACT) or ACT-like care delivery model. The supportive

service teams will be funded by private investors via the Pay for Success mechanism. ACT is an evidence-based practice with a low staff to client ratio that improves outcomes for people who are most at-risk of homelessness, psychiatric crisis and hospitalization, and involvement in the criminal justice system. It provides intensive case management, behavioral health and care coordination and other services via a multi-disciplinary team. ACT-like models adhere to ACT fidelity to the greatest extent possible but may vary slightly in exact team composition or in entrance criteria.

Purpose of this RFQ

The purpose of this RFQ is to seek information from potential partners interested in providing supportive services and/or housing to the targeted population in one of three roles:

- 1. Delivering Supportive Services Supportive services delivered using the Assertive Community Treatment or ACT-like models including but not limited to outreach, case management, employment support, jail in-reach, behavioral health services, primary care services and housing placement and navigation.
- 2. Providing Housing Affordable, permanent housing in existing properties, units coming online in late 2018 or 2019 or future new housing development. The PFS initiative anticipates leveraging existing funding streams, vouchers, and units as well as private capital if needed to ensure participants have access to housing. Providers with access to existing housing units and rental assistance are encouraged to respond to this RFQ. Please note that the PFS project will not directly fund housing but may support property owners in connecting tenants to available units and providing needed supports.
- 3. Providing Housing and Delivering Supportive Services—Providers would take responsibility for provision of both supportive services and some or all of the units of affordable housing needed for the clients to be served.

This is an RFQ for partnership interest and is not intended as a formal offering for the award of a contract. Should the PFS project move forward, selected partners will engage in contract negotiations.

The issuers of the RFQ reserve the right, at their sole discretion, to withdraw the RFQ; to use the ideas or proposals submitted in any manner deemed to be in the best interests of Austin/Travis County, including (but not limited to) negotiating with one or more respondents or undertaking the prescribed work in a manner other than that which is set forth herein. In their sole discretion, the issuers of this RFQ reserve the right to choose to discuss various approaches with one or more potential partners (including those not responding to the RFQ).

Key Program Elements

Target Population

The initiative will target chronically homeless individuals who are the highest utilizers of public services. High utilizers are those individuals who are frequently before the court, in jail, and

frequently using a spectrum of resources including:

- Healthcare -- emergency rooms, emergency medical services (EMS), inpatient hospitalizations, and psychiatric treatment facilities.
- Criminal justice -- arrests, jail admissions and bookings.

The target population is still under development but is anticipated to be defined by a minimum number of criminal justice and healthcare encounters as outlined below:

- Min. of 1 healthcare encounter in the last year
- Min. of 9 healthcare encounters in the last 4 years
- Min. of 1 jail day / booking in the last year
- Min. of 2 jail days / bookings in the last 3 years

Qualifying individuals are then ranked to ensure prioritization of the highest utilizers. Individuals may be further prioritized by their score on a triage assessment known as the VI-SPDAT. This assessment is designed to identify those individuals who are most vulnerable and is used across Austin/Travis County to prioritize those who are most in need of housing and other resources designed to address homelessness.

Based on data from the Integrated Care Collaboration (ICC), the Travis County Sheriff's Office (TCSO), and the Homeless Management Information System (HMIS), it is estimated that there are approximately 1,068 individuals in Austin/ Travis County who are anticipated to meet the definition outlined above. Housing and service providers will collectively target this specific population using administrative data, conducting outreach/in-reach in Travis County Jail, hospitals and other public entities.

Supportive Housing

This initiative seeks to identify and provide affordable, non-time limited supportive housing to the target population. Housing may be located in properties that are primarily comprised of affordable or supportive housing units or scattered throughout multiple properties. We are particularly interested in housing available in:

- 1. Existing properties that are currently serving the target population (or a similar population) or where the property manager and owner are willing to set aside units to serve the target population.
- 2. Existing affordable housing units that could be linked to supportive services in the community.
- 3. Units coming online in late 2018 or 2019 in properties designed to serve the target (or a similar) population or where the property manager and owner are willing to set aside units to serve the target population.
- 4. Future development, either new construction or acquisition rehab, designed for the target population.

The PFS project will implement supportive housing consistent with the defining elements described below:

1. Housing that is affordable, meaning the tenant household ideally pays no more than 30% of their income toward rent, which can be located in a single site or scattered in multiple locations in the community

- Housing that provides tenant households with a lease or sublease identical to nonsupportive housing — with no limits on length of tenancy, as long as lease terms and conditions are met
- Housing that proactively engages residents in a flexible and comprehensive array of supportive services, without requiring participation in services as a condition of ongoing tenancy.
- 4. Informed property or landlord management Property management maintains a balance between ensuring the effective operation and management of the physical facility and fostering tenants' housing stability and independence
- Housing that supports tenants in connecting with community-based resources and activities, interacting with diverse individuals including those without disabilities, and building strong social support networks

Additionally, programs will encompass the following four supporting elements:

- 1. Housing First -- The goal of "housing first" is to immediately house people who are homeless. Housing comes first no matter what is going on in one's life, and the housing is flexible and independent so that people get housed easily and stay housed. Housing first can be contrasted with a continuum of housing "readiness," which typically subordinates access to permanent housing to other requirements. Housing first is a low-barrier entrance process that supports moving persons quickly into housing of their choice from settings such as the streets or shelters, without preconditions of treatment acceptance or compliance.
- 2. Harm Reduction -- A model of substance-use intervention that focuses on helping people who use substances to better manage their use and reduce the harmful consequences to themselves and others, including actively working to prevent evictions. In conjunction with housing first and supportive housing, using the harm reduction philosophy means that individuals do not have to be sober to be eligible to enter housing and are not evicted solely for a failure to maintain sobriety.
- 3. Person-Centered Care -- Where services are voluntary, customized and comprehensive, reflecting the individual needs of tenants, and, tenants have meaningful opportunities to engage in the community.
- 4. Assertive outreach and engagement -- Programs conduct assertive outreach to engage and recruit members of the target population. Programs will engage target population members and offer them the opportunity to obtain affordable housing along with health and social services.

Program Evaluation

Results of the PFS Initiative will be measured over an anticipated 5-year period using a third-party evaluation, which is a critical project design element. The purpose of the evaluation is to measure the impact of supportive housing on the PFS participants. This is important, not just to determine whether the project meets the outcome targets that form the basis for repayment, but also to help further develop the evidence base for supportive housing as an effective intervention. Regardless of the outcomes, the evaluation gives PFS partners in Austin/Travis County the knowledge needed to further understand what works and what does not.

The selected service providers will be responsible for collecting and regularly reporting program outcome information to the Evaluator partner as well as accepting participant referrals as laid out in the final Evaluation Plan.

RFQ Submission Guidelines

All proposal items must be submitted ELECTRONICALLY by 5 pm Central Time on Friday, August 22, 2018 to: austinrfq@csh.org. Note: hard copies of proposal or application materials will not be accepted

Proposal narrative must be submitted in Microsoft Word format and should not exceed twenty (20) single-spaced pages using Times New Roman 12-point font and one-inch margins.

As described above, we are seeking information from potential partners interested in providing supportive services and/or housing to the targeted population in one of three roles:

- 1. Delivering Supportive Services Supportive services delivered using the Assertive Community Treatment or an ACT-like model including but not limited to case management, behavioral health services, and housing placement.
- 2. Providing Housing Affordable, permanent housing in existing properties, units coming online in late 2018 and 2019 or future new housing development.
- 3. Providing Housing and Delivering Supportive Services—Providers would take responsibility for provision of both supportive services and affordable housing.

Organizations may respond individually or as part of a team. Multiple organizations may form a team for this application, but should clearly identify the lead organization and the anticipated role(s) for each partner organization.

Respondents should address the following:

I. Organizational Background and Capacity

A. Provide 1-2 paragraph background on the organization's history, mission, core values and goals, areas served, and targeted demographic(s)

II. Proposed Role and Program

- A. Clearly identify the role(s) you propose to address. Responses may come from a team or partnership of organizations covering multiple roles, or from individual organizations addressing one or more roles.
 - a. If addressing housing, describe how you propose to provide units through one or some combination of the following:
 - 1. Existing properties
 - Location(s), total number of units, subsidy type/s, known barriers
 to providing priority access, approximate annual turnover or other
 estimate of likely unit availability, description of community/service
 delivery space in property
 - 2. Units already planned to come on line in late 2018 or 2019

- Location, total number of units planned, subsidy type/s and status
 of funding commitments, estimated start and completion of
 construction, number of units willing to commit to this effort,
 known barriers to providing priority access during initial lease up
 and ongoing basis, description of community/service delivery
 space in property
- 3. New, previously unplanned development
 - 1. Potential location, status of site control, status of appropriate zoning, potential total number of units, potential number of units for target population, likely or desired financing sources, timing for start of construction and construction completion, description of planned community/service delivery space in property
- b. If addressing services, please describe the core components of your anticipated service delivery model including the items below:
 - 1. Number of clients that you can engage in the proposed services each month. If there are considerations or constraints in the provided ramp up rate, please describe them.
 - Number of clients in total that you would like to serve over the life
 of this initiative up to the maximum of 250 anticipated to be served
 by the PFS project. It is anticipated that the project will reach full
 enrollment over 3-4 years.
 - 3. Description of the services to be provided to the clients.
 - 4. Roles/descriptions of the staff who will comprise the service delivery team or teams. Please clearly note which staff roles you anticipate filling with employees of your organization and which roles (if any) would be filled by outside partners. Please note the total number of FTEs that will be dedicated to serving the number of clients you identified in item 2.
 - 5. Location of the services to be delivered (mobile, on-site, telemedicine, etc.)
- c. If addressing housing and services, please respond to item a. and b. above.

III. Capacity and Experience

- A. Include a description of how your organization already plays the role(s) described above, or your capacity to undertake it. If your organization is looking to expand an existing program, describe the ability to expand the program to serve additional people through the addition of housing and services capacity or expansion into new sites and communities. Please also note how long you anticipate it would take you to hire and onboard any staff who would be required to deliver the services described in Section II above and provide the total number of individuals that you have delivered services to in supportive housing in the last 2 years.
- B. Demonstrate prior experience successfully providing housing, services, and/or health care to members of the target population identified in this RFQ and utilizing the key program elements described above. Specifically demonstrate how your organization effectively provides these components in a coordinated way, through

intra-organization efforts and collaboration with partners in the community. Additionally, please:

- Describe how your organization has delivered services via an Assertive Community Treatment team, ACT-like model or similar intensive team-based service delivery model.
- 2. Describe how your organization has implemented the housing first and harm reduction models.
- 3. Describe your organization's outreach/in reach strategy for engaging with clients similar to the target population.
- Describe experience delivering voluntary support services to the target population and using evidence-based practices, such as motivational interviewing and trauma-informed care to engage clients.
- Describe experience delivering case management and integrating primary and behavioral health care services for clients. Include any organization partnerships, formal or informal, your agency uses to deliver services.
- 6. Describe your experience connecting clients to housing and delivering housing-based support services.
- C. Describe your ability to leverage Medicaid resources to finance some or all necessary services. Please include your experience in billing Medicaid for reimbursable services or partnering with entities that bill Medicaid and provide services to your tenants. Also please identify other county or state funding streams used to finance services.
- D. Describe your experience working in a collaborative environment across government and nongovernmental entities. Include your organization's previous experience collaborating with public and/or private entities to implement evidence-based programs.
- E. Describe and demonstrate the effectiveness of how your organization currently uses data to support decision-making in existing programs and how that data was used to make significant programmatic changes in operations.
- F. Describe your capacity and infrastructure to track outcomes, analyze program performance, and measure results.
- G. Describe your experience with performance-based contracting and achieving milestones and targets.
- H. Briefly describe the anticipated roles and relevant background of key staff that will work directly on the project(s). Describe their experience and qualifications as they relate to the program as described in this RFQ.
- I. Provide up to 3 references from organizations who can speak to your organization's capacity and experience as relevant to the initiative outlined in this RFQ.

IV. Financial Capacity & Resource Development

As outlined in this RFQ we are seeking partners interested in collaborating to further develop the model described. ECHO, Social Finance and CSH do not have resources to provide to the selected respondents during the project development phase (known as transaction structuring) which extends until formal service launch. Please describe your agency's current capacity to lend support during the transaction structuring phase, and if necessary identify additional support (financial or otherwise) you would need over the next ~6 months. (I.e. - the time before implementation of the housing and services).

Selection Criteria/Process

All proposals will be reviewed and evaluated by a selection committee consisting of key staff from partnering agencies.

Submissions will be evaluated based on the following criteria and qualifications:

- Established track record of meeting the needs of vulnerable individuals similar to the target population (frequent users of criminal justice and crisis service systems who are experiencing homelessness with chronic health/mental health conditions).
- Experience with delivering services via an ACT or ACT-like model.
- Experience with delivering services using housing first and harm reduction approaches.
- Experience with delivering services in a supportive housing model.
- Clearly articulated service model for the PFS project and capacity to scale.
- Experience with data, performance management and outcomes focused contracts of initiatives.
- Successful history of working collaboratively with diverse stakeholders.
- Potential to leverage Medicaid or other funding sources as future path to sustainable services funding.
- Description of staff with relevant background and experience.
- No conflict of interest with initiative partners
- Quality of references

Conditions of Proposal Submission:

- Only one proposal will be accepted from any one organization. Organizations may respond individually or as part of a team. Multiple organizations may form a team for this application, but should clearly identify the lead organization and the anticipated role(s) for each partner organization.
- All costs incurred in the preparation and presentation of the submitted proposal, in any
 way whatsoever, shall be wholly absorbed by the prospective contractor. Any material
 submitted by the prospective contractor that is to be considered confidential must be
 clearly marked as such.

Deadlines & Timetable

This RFQ is being issued on Friday, July 20, 2018; and responses to it are due no later than 5pm Central Time on August 22, 2018.

You are strongly encouraged to submit a non-binding notice of intent to apply by Friday, August 3, 2018 at 5pm Central Time via email to austinfq@csh.org. The notice of intent should state organization name and contact information (name, email, phone) as well as whether you are interested in delivering supportive services, housing or both as part of this initiative.

An informational session about this RFQ will be held on Thursday, August 2, 2018 at 11:30am Central Time. Attendance is strongly encouraged but not mandatory. To register for this information session please email austinrfq@csh.org by Wednesday, August 1, 2018.

All applicants can expect to receive a response by approximately September 7, 2018.

Questions

The contact person(s) for all questions is:

Annie Bacci, Associate Director, CSH Stephanie Mercier, Director, CSH austinrfq@csh.org

Timeline

RFQ Issued	July 20, 2018
RFQ Question and Answer Session	August 2, 2018
(OPTIONAL)	
Notice of Intent to Apply due (OPTIONAL)	August 3, 2018 by 5:00pm
Applications Due	August 22, 2018 by 5:00
	pm CT
Finalist Phone Interviews	August 29 through 31
Responses to Applicants	September 7, 2017

Appendix

WHAT IS PAY FOR SUCCESS?

