

Question and Answer

Street-Based Outreach Services for Unsheltered Individuals RFQ

2024 Request for Qualifications

	Question	Answer
1	How will it be determined which type of neighborhood-specific outreach services (street-based, vehicle, or behavioral/mental health) an individual will receive?	This will be coordinated in weekly neighborhood outreach meetings facilitated by HSD Regional Coordinators. Please see the Guidelines and Applications document pg. 5 for additional details.
2	What are the criteria for who will receive behavioral health outreach? Will it be determined by the agencies providing the services?	Agencies interested in applying to this outreach service area should define these criteria as part of their completed application submission.
3	Are referral sources limited to the HSD Regional Coordinator and neighborhood outreach teams? Or can other entities make direct referrals to an awarded agency?	Referrals are not limited to the HSD Regional Coordinator and neighborhood outreach teams. Yes, selected agencies may receive referrals from other entities as part of its daily outreach deployment. Agencies should bring any referrals to neighborhood team weekly meetings to coordinate support if needed and avoid duplication of services across agencies.
4	How will the triaging of referrals be determined?	Neighborhood outreach teams will work together to coordinate, prioritize, and determine which individuals in each neighborhood need which level of care. This will be done at the weekly meetings hosted by HSD Regional Coordinators. Please see the Guidelines and Applications document pg. 6 for additional details.
5	Will referrals primarily be sourced from encampment draw downs? If not, approximately what percentage of referrals do you anticipate receiving from which sources?	Referrals will not be primarily sourced from encampment drawdowns. HSD does not yet know what percent of referrals will come from which sources, but that is something that will be tracked, as outlined in the RFQ Expected Performance Commitments. Please see the Guidelines and Applications document pg. 8 for additional details.
6	How will you identify when a behavioral health specialist team is needed for an encampment draw down?	Determinations will be made at neighborhood team weekly meetings. If agencies are asked to participate in encampment drawdown efforts, HSD Regional Coordinators will share information on service needs of individuals and work with agencies on the appropriate level of outreach services. If the individual is already working with a behavioral health outreach agency, that agency would be asked to support them.

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7	What does assisting with encampment draw down entail? What role do you expect providers to have? What specific actions will agencies be contractually obligated to perform?	If agencies are asked to assist with a Unified Care Team encampment draw down effort, it would be specific to an individual assigned to that agency and before a site is posted for removal. Agencies would be required to engage individuals on site to assess needs, identify resources, and connect them to services to bring them indoors and on a path to permanent housing. Providers will be expected to coordinate care for an individual with whom they are already working.
8	HSD currently provides approx. \$1.6m for DESC's outreach program, HOST. This program also receives funding from the County and State. it is multidisciplinary and based on the companionship model defined in the WA State Health Care Authority's Homeless Outreach Stabilization and Transition (HOST) program guidelines for licensed behavioral health providers. This model, defined in RCW 71.24.14, is designed to serve individuals whose severity of behavioral health symptom acuity level creates a barrier to accessing and receiving conventional behavioral health services and outreach models. The State HOST model for licensed behavioral health providers utilizes the "relational stages of outreach and engagement" framework to build impactful and effective partnerships with the clients we serve. The provision of services under this framework relies on mutual trust-building, and precludes practitioners from being involved in efforts to separate a person from their possessions in public space, either directly or indirectly. Will our agency's adherence to the State's service model be accommodated if we apply for this RFP?	The RFQ requests that agencies describe their proposed service models within their Narrative Response, see Guidelines and Applications document pg. 11-12 for additional details. Regarding the specific service model identified in the question, agencies will not be required to offer shelter or any other assistance at encampments that have been posted for removal.
9	If an agency applies for a neighborhood specific award, they need to specify which of the outreach services they will provide (eg, Street-Based Care Coordination, Vehicle	No, providing all four services will not make a rating higher. HSD will strive to have consistent outreach services available in all neighborhoods.

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	Residency Outreach, Behavioral/Mental Health Care Outreach and Population-Specific Outreach). Will agencies that provide all four services be rated higher? Will there be an effort to have even coverage across all four services in each neighborhood?	
10	Will funding be equal across all neighborhoods or is it based on the latest count?	HSD will strive to have outreach services available to meet the needs of each neighborhood.
11	There will be higher application rates in some neighborhoods than others - in that case, would there be the opportunity for applicants to adjust their projected budgets upward / downward?	Agencies are encouraged to submit budgets they believe will be sufficient to provide the proposed service(s) in the neighborhood(s) they seek to serve. There will not be an opportunity to revise one's budget once it has been submitted. That said, awarded applicants may be subject to budget negotiations.
12	I might have missed it but are there specific criteria for the various types of outreach services (I thought that I saw something particular re behavioral / mental health but then lost it!)	Information regarding the different types of outreach service areas can be found in the Guidelines and Applications document on pg. 5-7 in section "Investment Area Background and Program Requirements". Additional information specific to behavioral/mental health outreach staffing can also be found in the "Description of Key Staff and Staffing Level" section on pg. 8.
13	Won't there necessarily be "competition" amongst agencies that are operating within the same neighborhoods? Perhaps a better way to phrase this - the "team-based" program assumes there will be multiple agencies operating within any given neighborhood, with overlapping outreach focuses - while the RFQ emphasizes collaboration, how will this be incentivized?	HSD intentionally developed this RFQ to incorporate collaboration with HSD and other awarded agencies assigned to neighborhood teams. This collaboration is required to ensure the provision of services is coordinated.
14	The master agency services agreement stipulates that subcontracting can only be done with City consent - is there precedent for subcontracting and is this something the program would support/encourage (or discourage).	If an agency believes it needs to subcontract with another organization to achieve its proposed outreach model, HSD requests that such partnerships be included in your agency's application with signed letters of intent, memorandums of agreement or similar documents. See the Guidelines and Applications document pg. 11.

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15	Is there a minimum amount (\$) for the grant request?	No. Agencies should submit budgets they believe are sufficient to provide the proposed services.
16	Is outreach offered to people living in sanctioned encampments included?	No.
17	Individuals experiencing homelessness often move throughout Seattle without regard to the neighborhood boundaries within the RFQ - how does this impact an agency's performance?	This will not impact an agency's performance, but collaboration with providers in other neighborhoods (for the benefit of coordinating services for specific individuals) may be recommended at times.
18	Will referrals, placements, etc. to / with faith-based organizations be recognized under the City's performance criteria?	Referrals to services and placements will be recognized regardless of their faith affiliation.
19	In the effort to be truly team-based, will there be an effort to encourage collaboration with service providers who are NOT part of the new program?	HSD will focus on coordination as outlined in the Guidelines and Applications document on pg. 5-6.
20	When the HSD Regional Coordinator leads the multiple parties, do they use an app-based tool? I am wondering specifically if they use NavTech's product.	HSD's Regional Coordinators use RevTech's NavApp product. Qualified programs will not be required to use NavApp.
21	In describing the scope of work for population-specific outreach, the RFP notes that, "proposals that clearly describe a plan to address significant needs among other populations will also be considered." Can you speak to what criteria will be used to evaluate whether other populations will be considered?	Agencies may serve other populations including subgroups within focus populations. If an agency chooses to do so they should outline a clear and specific plan to serve such populations as part of their application. Please see the Guidelines and Applications document pg. 11 and section A and C of the application rating criteria for additional details.
22	If applying for more than one population/service area, will we have the same page limit?	Yes. Agencies should adhere to the stated page limit.
23	Who will be the referral sources for clients referred to our agency? Just HSD? Other Street-based outreach service providers?	Selected agencies may receive referrals from several sources that include HSD Regional Coordinator, other awarded Neighborhood or Population-Specific outreach agencies, and through the agency's own daily outreach deployment.
24	How much is awarded per organization? We plan to focus our proposal in two neighborhoods working with BIPOC	HSD has not identified an award amount per organization. Agencies should submit budgets commensurate to the services to be provided.

Updated July 1, 2024

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	communities but would appreciate clarity as we build out the three required budgets.	
25	If we apply for one of the two Population-Specific awards but don't receive it, could we still receive funding through the Neighborhood-Specific awards? Or would we be out of the running entirely?	Agencies can apply for both interventions. If you do not receive an award from one, that does not automatically disqualify you from the other.
26	For populations specific, are we able to focus on families? Our scope is in working with those with parents and children under 18. Wondering if we would need to expand to single adults to qualify?	See #21.
27	How is street-based care coordination defined? Does it require going out to tents, encampments, etc., or could operating a drop-in space for unsheltered/unhoused individuals count as outreach?	For the purposes of this RFQ, street-based outreach means that agencies will be required to go to tents, vehicles, encampments, and other places not meant for human habitation to work with individuals where they live. Drop-in spaces will not be considered as an outreach strategy for this RFQ.
28	Will HMIS access be required or optional, will there be access and to and training on HMIS or related reporting when reporting data on individuals encountered?	Yes, HMIS access and reporting will be required. Contracted agencies will work with the City of Seattle and King County Regional Homelessness Authority to gain access and receive training on the system.
29	Would Intensive Outreach for the population specific to SUD qualify under that umbrella?	HSD is procuring behavioral health specialists as part of the seven neighborhood teams, so it would not be one of the Population-Specific services.
30	Regarding receiving referrals, does this RFP require agencies to be 'on call' to respond to particular people and/or encampments? Would these agencies be asked to be present at planned sweeps?	This RFQ does require agencies to receive referrals from HSD Regional Coordinators and other awarded Neighborhood- or Population-Specific outreach agencies. Agencies will not be required to offer shelter or other services once a site has been posted for removal. Through weekly neighborhood outreach meetings, agencies may be requested to participate in encampment drawdown efforts (i.e., efforts to resolve an encampment through shelter referrals and housing placements before an encampment removal occurs).
31	We Heart Seattle has not been given training or access to HMIS in the past since we are private funded. If we are	See #28.

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	awarded a portion of this fund can we assume we would receive training and access to HMIS?	
32	Will the agencies be allowed to follow the clients assisted after the street-level outreach goals have been reached? In other words, stay in contact with clients to ensure they remain stable in housing?	Yes, agencies will be expected to exit the individual or household from services once they are stable in their permanent housing, are connected with a housing case manager at a shelter, ultimately decline services, or have not been engaged for six months or more. Please see the Guidelines and Applications document pg. 6-7 for additional details.
33	How much is the average hourly rate for outreach staff, per previous and existing city contracts?	HSD hasn't identified an average hourly rate. Applicants are encouraged to submit staffing budgets they believe will be sufficient to provide the proposed service(s) in the neighborhood(s) they seek to serve and are aligned with organizational policies and practices.
34	Does Behavioral Health Outreach include Substance Use Disorder (SUD)?	Yes, see the Guidelines and Applications document pg. 8. Agencies selected for behavioral health outreach should provide evidence-based or promising approaches to serving individuals with behavioral health and substance use disorders.
35	Are service providers self-selecting the areas of the city they are proposing to work in?	Applicants are asked to indicate which neighborhoods they intend to provide outreach services in as part of their application. Please see the Guidelines and Applications document pg. 22.
36	Contracts are with HSD, is there any information on how the support will be assessed and measured?	Please see the Guidelines and Applications document pg. 8. Data collection and measurement tools, outside of HMIS, will be negotiated with all providers at the time of contracting.
37	Since this is neighborhood/district specific are the City Councilmembers involved and able to help identify where services are most needed?	HSD expects that neighborhood teams will receive referrals from a variety of community stakeholders. Referrals will be coordinated in weekly neighborhood outreach meetings facilitated by HSD Regional Coordinators.