

STATE OF ALABAMA
DEPARTMENT OF MENTAL HEALTH

RSA UNION BUILDING
100 N. UNION STREET
POST OFFICE BOX 301410
MONTGOMERY, ALABAMA 36130-1410

www.mh.alabama.gov

July 24, 2024

RFP 2025-10

Dear Vendor:

The Alabama Department of Mental Health (ADMH) is soliciting proposals to provide **primary prevention** services through the ADMH Opioid Settlement Grant Program. Request for Proposals (RFP) will be accepted until **2:00 pm on Monday, September 23, 2024**.

The submission of a proposal does not guarantee the award of a contract. Any contract resulting from the proposal is not effective until it has received all required governmental approvals and signatures. In addition, the selected vendor shall not begin performing work under this contract until notified to do so by the departmental contracting agent.

When submitting a proposal, please read the entire RFP document and return your proposal in the requested format. All proposals should be submitted in ink or typed and contain an original signature. Submissions should be delivered to:

AL Department of Mental Health
Office of Contracts & Purchasing
100 North Union Street, Suite 570
Montgomery, AL 36104

MAILING NOTE: Proposals may be sent via Regular US Postal Service (USPS) Mail, Express/Overnight USPS Mail, commercial delivery service such as FedEx or UPS, or hand delivered by the closing date and time. Emailed or faxed responses are **not** accepted. Also, please note: All US Postal mail, including express/overnight mail that is dispatched to any State agency is processed thru the State mail facility before it is forwarded to the appropriate State agency, thus delaying its arrival to the department. By using the USPS, you assume the risk of delay that may result in your proposal being received late and therefore being determined to be untimely and will not be reviewed. Postmarks of the date mailed are insufficient; the proposal must **physically** be received at the listed office by the date and time specified regardless of the delivery service used. **All proposals received after the deadline will be deemed untimely and will not be reviewed.**

Sincerely,

Leola Rogers

Leola Rogers
Office of Contracts & Purchasing



Organization: ALABAMA DEPARTMENT OF MENTAL HEALTH (ADMH)

RFP Closing Date & Time: **2:00 pm on Monday, September 23, 2024**
Review the mailing note.

RFP Contact Info: Leola Rogers
ADMH
Office of Contracts & Purchasing
RSA Union Building
100 North Union Street, Suite 570
Montgomery, AL 36104
Telephone Number (334) 353-7440
Email: leola.rogers@mh.alabama.gov

MAILING NOTE:

Proposals may be sent via Regular US Postal Service (USPS) Mail, Express/Overnight USPS Mail, commercial delivery service such as FedEx or UPS, or hand delivered by the closing date and time. Emailed or faxed responses are **not** accepted. Also, please note: All US Postal mail, including express/overnight mail that is dispatched to any State agency is processed thru the State mail facility before it is forwarded to the appropriate State agency, thus delaying its arrival to the department. By using the USPS, you assume the risk of delay that may result in your proposal being received late and therefore being determined to be untimely and will not be reviewed. Postmarks of the date mailed are insufficient; the proposal must **physically** be received at the listed office by the date and time specified regardless of the delivery service used. **All proposals received after the deadline will be deemed untimely and will not be reviewed.**

ADDITIONAL INFORMATION

1. Who **may** respond to this RFP? Public or private non-profit organizations who meet one of the following:
 - 1) Certified by ADMH to provide substance use prevention service;
 - 2) Can be certified by ADMH to provide such services within four months of award; or
 - 3) Were awarded Opioid Settlement Funds in FY24 through the ADMH grant process and are applying for continuation funding.
2. Who **may not** respond to this RFP? Employees of ADMH and current State employees.
3. In order to transact business in the State of Alabama all businesses domestic and foreign must be registered with the Alabama Secretary of State Office. (Domestic means within the State of Alabama. Foreign means out-of-state.) Website: www.sos.alabama.gov
4. If contracted with the State of Alabama, all vendors must enroll and actively participate in E-Verify. Website: <https://www.e-verify.gov/>
5. ALL vendor payments are processed thru the State of Alabama Accounting and Resource System (STAARS). All vendors must register with STAARS Vendor Self Service. Website: <https://procurement.staars.alabama.gov/webapp/PRDVSS1X1/AltSelfService>
6. The ADMH reserves the right to reject any and all proposals if RFP instructions are not adhered to, such as: received after deadline (see mailing note), requested # of submissions not received.

7. **Protest** (Effective 10/1/2022): A bona fide prospective bidder or offeror who is aggrieved in connection with the solicitation of a contract may protest to ADMH Director of Purchasing **within 14 days of the date of issuance** of the solicitation or any amendment to it, if the amendment is at issue.

(2)a. Except as provided in paragraph b., a bona fide actual bidder or offeror who is aggrieved in connection with the intended award or award of a contract may protest to ADMH Director of Purchasing **within 14 days of the date the award or notification of intent to award**, whichever is earlier, is posted in accordance with this article.

b. A matter that could have been raised under subdivision (1) as a protest of the solicitation may not be raised as a protest of the award or intended award of a contract.

(3) A protest filed under subdivision (1) or (2) shall be in writing, be filed with ADMH, and set forth the grounds of the protest and the relief requested with enough particularity to give notice of the issues to be decided.

(b) ADMH, or his or her designee, may settle and resolve the protest of a bona fide actual or prospective bidder or offeror concerning the solicitation or award of a contract in accordance with rules adopted under this article.

(c) If the protest is not resolved by mutual agreement **within 10 days after** the protest is filed, ADMH shall commence an administrative review of the protest and issue a decision in writing within 14 days of the review.

(d) A copy of the decision under subsection (c) shall be mailed or otherwise furnished immediately to the protestor and any other party intervening.

(e) A decision under subsection (c) shall be final and conclusive, unless fraudulent, or a party adversely affected by the decision appeals administratively to the Director of Finance in accordance with Section 41-4-164.

(f) In the event of a timely protest under subsection (a) or an appeal under Section 41-4-164, the state may not proceed further with the solicitation or with the award of the contract until five days after notice of the final decision is provided to the protestor, except that solicitation or award of a protested contract is not stayed if ADMH, after consultation with the head of the using agency or the head of a purchasing agency, makes a written determination that the solicitation or award of the contract without further delay is necessary to protect the best interests of the state.

1. **Records Request:** ADMH recognizes and supports the public's right to inspect/request copies of public records in accordance with State law. Many public records and resources are available on the ADMH website: www.mh.alabama.gov for review. Please view the website prior to submitting a request for records as your request may be satisfied by the information contained therein.

Request for Proposal (RFP)

Leading Alabama's efforts to enhance the health and well-being of individuals, families, and communities impacted by mental illness, developmental disabilities, substance use, the Alabama Department of Mental Health (ADMH) is seeking proposals for the use of the ADMH Opioid Settlement Grant Program. Funds allocated for The ADMH Opioid Settlement Grant Program are appropriated through Act 2023-384. The purpose of this grant program is to **prevent, reduce, or mitigate the effects** of polysubstance, more specifically opioid and a secondary substance i.e. underage drinking, vaping, etc. and has a total grant amount of \$2,749,200. Each agency may request up to \$75,000 for prevention of opioid (polysubstance) use. Additionally, applicants must demonstrate they are not supplanting existing funding and should avoid using the dollars in areas where other funds are available.

I. INTRODUCTION

Alabama Acts 1965, No. 881, section 22-50-2. Its purpose is to provide for the diagnosis, treatment, rehabilitation, follow-up care, prevention and research into causes of all forms of mental or emotional illness, which includes alcoholism, drug addiction, epilepsy, and intellectual disabilities. ADMH has the statutory authority to supervise, coordinate, and establish standards for all operations and activities of the state related to mental health and the provision of mental health services.

The ADMH/Division of Mental Health and Substance Use Services (ADMHSUS), Office of Prevention is seeking proposals from ADMH certified prevention providers to implement prevention services aimed at preventing the onset and reducing the progression of substance use and reduction of substance use-related problems at the community level through utilization of the Substance Abuse Mental Health Services Administration's (SAMHSA) Center for Substance Abuse Prevention's (CSAP) strategies for prevention to impact large numbers of people, based on identified risk and protective factors.

II. BACKGROUND

From 2012 to 2017, Alabama was ranked number one in the nation for prescription opioids— a key contributor to the rising misuse of opioids and ultimately opioid overdose deaths. In 2021, overdose deaths were up 31% which led to Alabama having one of the highest increases in overdose rates in the country – the primary culprit being fentanyl overdoses by users who didn't know they were using fentanyl. The crisis worsened during the COVID-19 pandemic; an estimated 106,000 people died from opioid overdoses in 2020 alone - more than in any other year. The number of overdose deaths in Alabama rose from 739 to 979 in 2020. Over 100,000 nation-wide people died because of the overdose epidemic from September 2020 to September 2021. Approximately 75,000 of those deaths involved opioids, most of which were due to synthetic opioids such as fentanyl. Most recently, from 2021 to 2022, the CDC estimates nearly 110,000 lives lost from drug overdose deaths, largely driven by synthetic opioids. SAMHSA serves as the umbrella under which substance use and mental health service centers are housed, including: The Center for Mental Health Services (CMHS), The Center for Substance Abuse Prevention (CSAP), and The Center for Substance Abuse Treatment (CSAT).

According to the National Survey on Drug Use and Health, in 2020, an estimated 5.1 million people misused stimulants. While opioids and stimulants are separate classes of substances, trends showed increases in the use of stimulants as many opioid users would attempt to balance the highs and lows between these two different substances. However, these drugs are linked: people who use one may be introduced to the other, one may be substituted for the other, or mask the withdrawal effects of the other. The concurrent use of stimulants and opioids has led to higher rates of dependence and riskier use linking both substances to increased overdose rates.

In keeping with priorities from the 2022 Annual Report from the Alabama Opioid Overdose and Addiction Council, the following will be the priority of focus:

Support efforts to prevent or reduce overdose deaths and other opioid-related harms through evidence-based or evidence-informed programs or strategies.

Awareness of risk and protective factors are key. Embedded within the theory of risk and protective factors is to seek to modify risk factors and build upon existing protective factors. The risk and protective factor framework should be utilized in the effective planning of prevention programming.

Over the years, ADMHSUS prevention efforts have primarily focused on individual behaviors. In spite of the success of these efforts, Alabama has determined that implementing EBPPPs directed at population level change and using the SPF model as a part of comprehensive community prevention plans to complement the current strategies is needed and will serve as the hallmark of services delivered under this RFP.

The SPF is a community-based approach to substance use prevention that cuts across existing programs and systems. SPF executes a data-driven, five-step process to include Assessment, Capacity, Planning, Implementation and Evaluation. Sustainability and cultural competence are woven throughout the five steps of the SPF:

1. Assessment

The SPF Assessment is the first step of Alabama's SPF process. The assessment step provides guidance questions to get a clearer understanding of the problems, needs, resources and readiness of communities to address community problems. During this process, community capacity and readiness is determined to utilize the necessary resources to address the problems in ways that can be sustained over time. This process will be heightened by mobilizing community leaders and other key stakeholders across disciplines and communities. The establishment and identification of data sources and partnerships will enhance sustainability beyond SPF.

2. Capacity

SPF Capacity is the second step of Alabama's SPF process. Capacity is the ability to mobilize the community and resources to address the needs identified through the assessment. By building an inclusive multi-sector partnership, establishing a culture of commitment, educating key stakeholders and identifying and securing resources, Alabama's capacity will extend beyond SPF. The ultimate goal is to not create an environment of burnout of a few people, but rather active engagement of various sectors creating steady, sustained efforts over time.

3. Planning

Planning is the third step of Alabama's SPF process. This step involves creating a logical, data-driven plan. Understanding that many funding sources are short-term in nature, specific strategies will be employed to develop an action plan to help ensure long-term sustainability. Resources and competencies to include financial, political, administrative, and managerial will be considered in attaining long-term goals. Adaptability to changing conditions in funding and policy environments will also play an integral planning role regarding long-term sustenance.

4. Implementation

SPF Implementation is the fourth step of Alabama’s SPF process – putting your plan into practice. Here you carry out the various components of the prevention plan, as well as identifying and overcoming any potential barriers. Based on the identified plan, what activities will address the targeted population, in what community, size and type of community. Detail the EBPPPs that need to be undertaken, develop specific timelines, and decide on ongoing program evaluation needs. Implemented strategies will be detailed on the Prevention Activity Sheet and information submitted through the ADMH Alabama Substance Abuse Information System (ASAIS). Additional data reports are required in the information system.

5. Evaluation

Evaluation is the final step of Alabama’s SPF process. The evaluation component is crucial because it tells you what works, what doesn’t work, what to improve and how to improve it. Evaluation is the systematic collection and analysis of information about program activities, characteristics, and outcomes to reduce uncertainty, improve effectiveness, and make decisions. Evaluation helps organizations recognize what they have done well and what areas need improvement.

There must be clear linkage between each step of the SPF process. The assessment must include current capacity and readiness to utilize the program/strategy identified in the plan. Implementation must be clearly identified and relate to the plan. There then must be a clear description of how this process will be monitored and evaluated. Equally, sustainability and cultural competence are integral components that are woven throughout the SPF.

Sustainability is the process through which a prevention system becomes a norm and is integrated into ongoing operations. Sustainability is vital to ensuring that prevention values and processes are firmly established, that partnerships are strengthened, and that financial and other resources are secured over the long term.

Cultural Competence is the process of communicating with audiences from diverse geographic, ethnic, racial, cultural, economic, social, and linguistic backgrounds. This dynamic process requires cultural knowledge and skill development at all service levels, including policymaking, administration and practice.

Sustainability and cultural competence should be a constant throughout each step of planning and implementation and should lead to the creation of a long-term strategy to sustain effective policies, programs and practices.

The five steps of SAMHSA’s SPF along with sustainability and cultural competence are designed to help states and communities build prevention competencies and the infrastructure necessary to implement and sustain effective prevention programs, policies and practices. For more detailed information on the SPF process, go to <http://www.samhsa.gov/resource/ebp/strategic-prevention-framework>

III. TARGET POPULATION

The target population for this proposal will be any county, city, or community within the state of Alabama. The proposal must address the following priority: Support efforts to prevent or reduce overdose deaths and other opioid-related harms through evidence-based or evidence-informed programs or strategies.

Applications must reflect a clear understanding of the priority and demonstrate an ability to utilize the SPF to implement and sustain culturally specific EBPPPs that will address the identified priority(ies) with consideration given to high-risk youth, youth in tribal communities; and/or military families.

IV. PROGRAM GOALS

Through implementation of this project, the ADMH/ADMHSUS is striving to accomplish the following goals:

1. Prevent the onset and reduce the progression of polysubstance, more specifically opioid use and a secondary substance i.e. underage drinking, vaping, etc. use-related problems;
2. Implement strategies for prevention through adoption of the SPF to impact large numbers of people, based on identified risk and protective factors; and
3. Build capacity through sustainable culturally relevant prevention prepared communities to address one or more of the priorities.

V. CONTRACTUAL LIMITATIONS

Any and all contracts resulting from this RFP shall be annual, expiring with the end of the state fiscal year, September 30. All contracts shall be subject to availability of funds and continuation of this project is subject to one time funding. All contract awards will be contingent upon the successful submission and approval of a prevention plan containing SPF steps 1-5 post initial award notification and prior to the execution of the contract ⁽¹⁾. Should the funding or service requirements relative to this project be altered, contracts will be amended, accordingly.

VI. VENDOR ELIGIBILITY

Applicants must meet the following eligibility criteria in order to submit a proposal in response to this RFP:

1. Certified by ADMH to provide substance use prevention service.
2. Can be certified by ADMH to provide such services within four months of award.

VII. PROPOSAL REQUIREMENTS

The ADMH/ADMHSUS, Office of Prevention is seeking proposals from ADMH certified prevention providers or an agency that can be certified by ADMH within four months of award to implement prevention services aimed at preventing the onset and reducing the progression of polysubstance, more specifically, opioid use and a secondary substance i.e. underage drinking, vaping, etc. The aim is to reduce opioid use-related problems at the community level through utilization of the SAMHSA's CSAP strategies for prevention to impact large numbers of people, based on identified risk and protective factors. Proposals are sought for areas (county, city, or community) represented within the state of Alabama and will be limited to one per agency. Each agency may request up to \$75,000 for prevention of opioid (polysubstance) use.

The proposal shall be developed following the outline below. Each section, A-I, in the Statement of Work must be addressed, and appendices provided where indicated.

¹ No funds will be released without the timely successful submission and acceptance of a prevention plan in accordance with Prevention Standards. Upon notification of award, the prevention plan due date and parameters will be communicated.

The information provided under each heading explains the intent of the section and/or describes the minimum information you are required to provide. Although minimum requirements must be addressed, it is the responsibility of the applicant to ensure that each response thoroughly describes the strategies, and approaches, or provides other relevant information to ensure that the topic of the section is fully and distinctly addressed.

Information in **Bold Type** in each section provides the evaluation criteria for review and scoring of the application. The proposal should be single-spaced, using a standard 12-point font (Times New Roman is preferred) with 1-inch margins, and should **not exceed the page requirements listed below.**

STATEMENT OF WORK

A. Cover Page (Applicant cover page includes the **legal name** of the submitting agency; contact person; address, phone number, fax number, email of contact person; date of submission; and area of focus (county, city, or community). **Not to exceed 1 page.**) **(2 Points)**

B. Abstract (Applicant must provide a single page abstract that includes: the prevention of Opioid Use Disorder and secondary substance i.e. underage drinking, vaping, etc.; the priority(ies) being addressed by county, city, or community; the prevention strategies to address the priority(ies) by county, city, or community; who the priority(ies) will primarily focus on *i.e.* high-risk population; college students; transition-age youth; American Indian/Alaska Natives; ethnic minorities experiencing health and behavioral health disparities; service members, veterans, and their families; LGBT individuals; or other data driven population by county, city, or community; an overview of the goals for the priority(ies) by county; anticipated number of people to be served by county, city, or community. **Not to exceed 1 page.**) **(6 Points)**

C. Organizational Capacity and Project Overview (Applicant must address the following: 1). Provide a brief description of the organization, including a brief overview of the organization's history, key programs, and services. 2). Describe the organization's capacity to implement the proposed project and any relevant experience with similar projects or programming, including past achievements and evidence of impact. 3). Describe the purpose of the proposed project, types of services to be provided, and how services will be delivered. Included a description of how the proposed project is science and data driven. 4). Describe the population to be served by this project, including an estimated number of individuals to be served and any relevant demographic information related to individuals to be served. **Not to exceed 3 pages.**) **(20 Points)**

Continuation Funding Awards - Grants may be awarded to agencies having received prior Opioid Settlement Funding awards based on a continuation funding consideration. Continuation of funding will require and be contingent on the agency's ability to provide established, documented outcomes from the use of previously awarded funds. Outcome measures required of the agency for this consideration will include but not be limited to: (1) numbers served (included by demographics), (2) prevention outcomes as a result of previous funding, (3) documented prescription drug take back collection amounts, (4) distribution of harm reduction/naloxone - quantitative data, and (5) participation measures. **Not to exceed 2 pages.**

D. Goals (Applicant must address the following: 1). Identify reasonable goals with a timeline for completion of the proposed project. (Goals should be specific, measurable, achievable, relevant, and time-bound i.e., SMART goals). 2). Describe the process(es), plan(s), and/or project activities to be completed to meet goal(s) and to deliver the proposed project/services. 3). List what project outcome(s) would be expected and how the applicant plans to measure. **Not to exceed 2 pages.) (15 Points)**

E. Need (Applicant must address the following: 1). Description of the need for the proposed project, including quantitative and/or qualitative data as appropriate, how the proposed project will address the need, and what the organization is currently doing to address the need was included. 2). Describe how the proposed project is innovative in its approach to addressing the impact of the opioid epidemic. 3). Identify potential barriers to implementation and how the organization will work to mitigate them. In addition, must also complete Appendix 1. **Not to exceed 3 pages.) (25 Points)**

F. Resources (Applicant must address the following: 1). List the key staff that will be responsible for the project and what role each of them will play, including their relevant experience. 2). Described any additional resources and/or funding that will be used to support this project or related projects. Applicant list any relevant funding sources the organization receives for associated programming such as SOR, OD2A, Block Grant, SB123, SPF Rx, SAMHSA, CDC, HRSA, BJA, Community funding or other funding source. 3). Described how the organization is/will collaborate with other organizations to accomplish implementation of this project. The Applicant described how the organization will ensure activities are not duplicated. In addition, must also complete Appendix 2. **Not to exceed 2 pages.) (15 Points)**

G. Sustainability (Applicant must address the following: 1). Include plans for sustaining the project after the grant period ends. As a result of the grant funding, what work will be sustained, enhanced, or expanded? **Not to exceed 1 page.) (6 Points)**

H. Evaluation (Applicant must address the following: 1). Explain how the applicant plans to evaluate the project: i.e., how will they measure the project did or did not achieve the goal(s) outlined above. 2). What does the applicant organization expect will be different in a year because of the funding? In two years? For instance, what systems will be changed? What populations will benefit? Be specific. **Not to exceed 1 page.) (6 Points)**

I. Budget (Using the provided template, applicants provide a detailed budget that demonstrates by line item the proposed utilization of funding towards the CSAP strategies (information dissemination, environmental, community-based processes, education, problem identification and referral and alternatives), travel, contractual, and operating expense utilizing the form provided. A narrative justifying the travel, contractual, and operating expense should be included.) See Appendix 3. **(5 Points)**

VIII. REVIEW CRITERIA

The ADMH reserves the right to request necessary amendments, reject any and all proposals received, or cancel this RFP according to the best interest of the ADMH.

The ADMH, also, reserves the right to waive any informality in this process, providing such is in the best interest of the ADMH. Where the ADMH may waive any informality, such waiver shall in no way modify the RFP requirements or excuse the applicant from full compliance with the contract.

All proposals, which satisfactorily meet the submission requirements specified in item “IX” below, will be evaluated based upon the criteria indicated in each section of the Statement of Work.

IX. SUBMISSION REQUIREMENTS

Proposals shall be submitted in the following written format:

STATEMENT OF WORK (SOW):

Each item listed in the RFP under the statement of work (A-I) must be addressed. Section dividers shall delineate each area with the required cover pages titled accordingly.

COVER PAGE:

Shall include the submitting agency; contact person; address, phone number, fax number, and email of contact person; date of submission; and county, city, or community.

TABLE OF CONTENTS:

Page numbers shall be listed for each of the major sections of the proposal, including each Appendix.

ABSTRACT:

Shall include the items listed from section B of the RFP.

ORGANIZATIONAL CAPACITY AND PROJECT OVERVIEW:

Shall include the items listed from section C of the RFP using the template provided from Appendix 3.

GOALS:

Shall include the items listed from section D of the RFP.

NEED:

Shall include the items listed from section E of the RFP.

RESOURCES:

Shall include the items listed from section F of the RFP.

SUSTAINABILITY:

Shall include the items listed from section G of the RFP.

EVALUATION:

Shall include the items listed from section H of the RFP.

BUDGET:

Shall include the items listed from section I of the RFP using the template provided from Appendix 3.

LITERATURE CITATIONS:

Complete citations shall be provided for any literature referenced in your proposal.

APPENDICES:

Include any appendix(es) listed in the guidelines for the Statement of Work.

Questions relative to this RFP must be received, in writing, no later than August 9, 2024. Questions should be mailed to the above address or emailed to leola.rogers@mh.alabama.gov.

In the event it becomes necessary to revise any portion of the RFP, ADMH will post these changes on its web site: www.mh.alabama.gov.

This announcement does not commit ADMH to award a contract or pay any costs incurred in the preparation of proposals. ADMH reserves the right to accept or reject, in whole or in part all proposals submitted, and/or to cancel this announcement. The contract award(s) shall be based upon the proposal(s) most advantageous to ADMH.

Proposal Content

Instructions must be followed or responses will not be graded.

Each proposal is to contain **specific responses** to each of the requests listed in section **A-I**, and respondents are encouraged to respond fully to each inquiry, but to be as concise as possible. **Submit the response as instructed in the proposal.**

Four (4)—1 original, 2 copies, and 1 complete electronic copy of your proposal must be received at the following address no later than **2pm on Monday, September 23, 2024.**

Office of Contracts & Purchasing
AL Dept. Of Mental Health
RSA Union Building
100 North Union Street, Suite 570
Montgomery, AL 36104

Proposals envelope must be clearly marked **RFP 2025-10 Prevention Services**. All proposals received after the deadline will NOT be opened. **Postmarks of the date mailed are insufficient.**

The ADMH assumes no responsibility for expenses incurred in the preparation of the proposal. The ADMH reserves the right to reject any and all proposals. Additionally, the ADMH reserves the right to waive irregularities in any proposals and request clarification of any information, and negotiate with the firm and/or individual submitting the best proposal to secure more favorable conditions.

Evaluation Process

A review committee will examine each eligible proposal submitted. The ADMH may elect to conduct interviews with finalists. ADMH expects a final selection on or around the end of October 2024.

Evaluation Criteria

Evaluation Criteria	Page Requirement	Points
A. Cover page	Not to exceed 1 pg.	2
B. Abstract	Not to exceed 1 pg.	6
C. Organizational Capacity and Project Overview	Not to exceed 3 pgs.	20
D. Goals	Not to exceed 2 pgs.	15
E. Need	Not to exceed 3 pgs.	25
F. Resources	Not to exceed 2 pgs.	15
G. Sustainability	Not to exceed 1 pg.	6
H. Evaluation	Not to exceed 1 pg.	6
I. Budget	NA	5
Total		100

Selection Criteria

Selection shall be based on the factors to be developed by the procuring state entity, which may include among others, the following:

1. Specialized expertise, capabilities, and technical competence, as demonstrated by the proposed approach and methodology to meet project requirements.
2. Resources available to perform the work, including any specialized services within the specified time limits for the project.
3. Record of past performance, quality of work, ability to meet schedules, cost control and contract administration.
4. Availability to a familiarity with the project locale.
5. Proposed project management techniques.
6. Ability and proven history in handling special project contracts.

**SECTION III
SCHEDULE OF EVENTS**

RFP 2025-10 Prevention Services

The following RFP Schedule of Events represents the ADMH’s best estimate of the schedule that shall be followed. Except for the deadlines associated with the vendor question and answer periods and the proposal due date, the other dates provided in the schedule are estimates. ADMH reserves the right, at its sole discretion, to adjust this schedule as it deems necessary. Notification of any adjustment to the Schedule of Events shall be posted on the RFP website at www.mh.alabama.gov for review. **Please note the date for submitting any questions. ADMH will not accept any questions after this date.** All times are in **Central Time**.

Date	Event	Notification
July 24, 2024	RFP Release	USPS, ADMH Website, and STAARs website
August 1, 2024 12:00pm	Bidder’s Conference	Via Zoom https://mhalabama.zoom.us/j/81758158142
August 9, 2024 by 12:00 pm	Deadline for RFP questions. Submit in Word—No tables	Email to leola.rogers@mh.alabama.gov
August 15, 2024	RFP Q&A to be posted for review	ADMH website www.mh.alabama.gov
September 23, 2024 2:00 pm	RFP Submissions: Four (4): One original, two copies, & 1 digital copy on a USB flash drive	USPS or FedEx or UPS (Review mailing note)
September 23, 2024 2:00 pm	RFP Closing Date	USPS or FedEx or UPS (Review mailing note)
End of October 2024 Approximately	Notification of selection status	USPS (In writing)
The RFP is posted on ADMH website at www.mh.alabama.gov for review.		
<p>Submit RFP Responses To: AL Department of Mental Health Office of Contracts & Purchasing RSA Union Building 100 N. Union Street, Suite 570 Montgomery, AL 36104</p>		

Appendix 1 – Assessment

ASSESSMENT. Assessment involves the systematic gathering and examination of data related to substance use and related problems, as well as related conditions and consequences in the community. Assessing the problems means pinpointing where the problems are in the community, as well as the populations that are affected. It also means examining the conditions within the community that put it at risk for problems, and identifying conditions that now or in the future could protect against the problems. Based on the assessment of need, resources, and readiness, this will help you identify the priority(ies) on which to focus prevention efforts.

List the Supporting Data next to the Data Source that supports Assessment of Need. Sound assessment includes data representing the following: national data, state, county, city and community.

AEOW Epidemiological Profile (AL Dept of Mental Health)

AYP / ARMT (AL State Department of Education)

Census Data (census.gov)

Community Mapping

Compliance Data (Alcohol Beverage Control ie ABC)

County Health Rankings

Department of Justice

Free and Reduced Lunch Data

Graduation Rate

Juvenile Arrests (acjic.alabama.gov)

Kids Count

Local CPC Assessment

Morbidity & Mortality Weekly (Center for Disease Control)

National Survey on Drug Use and Health (SAMHSA)

ONDOP (Alabama Drug Control Update)

Police Incidence Reports (DUI, Drug Possession & Sales, Public nuisances, etc)

Poverty

PRIDE

Student Incident Reports

Treatment Admissions

YRBS

Vendor Density (ABC)

Other, specify

Appendix 2 – Capacity

CAPACITY. Communities must have the capacity—that is, the resources and readiness—to support the prevention programs, policies, and strategies they choose to address identified substance use problems. Capacity will not only improve the effectiveness of prevention activities in the short term, but also help to ensure the sustainability of prevention efforts. Capacity building involves mobilizing human, organizational, and financial resources to meet project goals.

List the Community Partner/Stakeholder and the Service(s) they provide.

Community Partner/Stakeholder

Service Provided

Community Partner/Stakeholder

Service Provided

Community Partner/Stakeholder

Service Provided

Community Partner/Stakeholder

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Service Provided

Community Partner/Stakeholder

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Appendix 3 – Budget Template

This template is a MS Excel document. A copy is available on the ADMH website, <http://mh.alabama.gov/prevention-budget-request-template/> listed as Prevention Budget Request template.

Appendix 4 – Additional Requirements for New Providers

In the event a provider has been awarded funds based on RFP, as a new provider, the following need to be submitted and/or completed:

- Registered with Secretary of State.
 - Need Tax ID number
 - Legal Business name
 - There is a cost of approx. \$200.00
 - SOS will do the name registration. This is good for 12 months. Then the provider will complete the registration and will be assigned an entity ID number.
- Must enroll in eVerify Memorandum of Understanding (MOU) for employers:
 - Once enrolled, verify produces an eVerify MOU.
 - Submit a copy of the eVerify to ADMH. This is about 15-17 pages.
- Must enroll in State of Alabama Accounting and Resource System (STAARS):
 - https://procurement.staars.alabama.gov/LoginExternal/Pages/register_for_a_new_account.htm
 - STAARS should have the correct billing address for invoice processing.
 - STAARS will issue a vendor number.
- Submit a copy of the TAX ID letter to ADMH.
 - Legal business name must match Tax ID name. if there are any name changes, provide any information to support the changes. Since all information should correspond with IRS.
 - If a provider is “doing business as” (DBA), DBA must be on TAX ID letter.
- Submit a copy of Certificate of Insurance. If it’s a community provider, submit a copy of the liability insurance.