**RFS 25-80876**

**Regional Recovery Hubs**

**Attachment D - Technical Proposal Template**

**Overview:**

Request for Services (RFS) 25-80876 is a solicitation issued by the State of Indiana in which organizations are invited to compete for the contract amongst other respondents in a formal evaluation process. Please be aware that the evaluation of your organization’s proposal will be completed by a team of State of Indiana employees and your organization’s score will be reflective of that evaluation. The evaluation of a proposal can only be based on the information provided by the Respondent in its proposal submission. Therefore, a competitive proposal will thoroughly address all components of the Scope of Work (SOW) (Attachment A). The Respondent is expected to provide the complete details of its proposed operations, processes, and staffing for the Scope of Work detailed in the RFS document and supplemental attachments.

**Instructions:**

Respondents shall use this template (Attachment D) to prepare their Technical Proposals. In their Technical Proposals, Respondents shall describe their relevant experience and explain how they propose to perform the work, specifically answering the prompts in the template below.

Please review the requirements in Attachment A (Scope of Work) carefully – the requirements in the Scope of Work should inform how Respondents complete their Technical Proposals in this template as the “Sections” referenced below correspond to the sections in the Scope of Work.

Respondents should type or paste their text in the provided yellow boxes which appear below the question/prompts. Respondents are allowed to reference attachments or exhibits not included in the boxes provided for the responses, so long as those materials are clearly referenced in the boxes in the template. The boxes may be expanded to fit a response.

**For all areas in which subcontractors will be performing a portion of the work, clearly describe their roles and responsibilities, related qualifications and experience, and how Respondents will maintain oversight of the subcontractors’ activities.**

**RESPONDENT NAME:**

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| Indiana Addictions Issues Coalition |

**REGION RESPONDENT PROPOSES TO SERVE:**

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| 9: Marion, Hamilton, Madison, Tipton, Howard |

**SOW Section 1-3 - Overview of Project**

1. Provide a high-level summary of how you will execute the responsibilities of a Regional Recovery Hub. Please explain how your experience positions you as the ideal choice for maintaining peer support services as a Hub.

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| Indiana Addictions Issues Coalition (IAIC) served as a Regional Recovery Hub (RRH) from 2020 through 2023 as one of the original RRHs at the inception of the RRH program. The previous Director of IAIC, Brandon George, played a critical role in the development and launch of the RRH program in partnership with the Indiana Division of Mental Health and Addiction (DMHA) and the Governor’s office Next Level Recovery Program. As an RRH, IAIC first provided peer recovery support services (PRSS) in nine central Indiana counties including Marion and Hamilton counties, both included in region nine (9) of the restructured RRH program and map for 2025.  The current Interim Director of IAIC, Heather Rodirguez, serves as Director of the Indiana Recovery Network, a sister program of IAIC which has provided oversight for the RRH program since its inception in April 2020 in partnership with DMHA. Ms. Rodriguez is proficient in understanding the required activities for being a RRH and understands the roles and responsibilities of being a RRH, including the importance of data collection and utilization of RecoveryLink, as well as the critical role of establishing partnerships in each county within an assigned RRH region. Ms. Rodriguez recognizes the significance of offering PRSS as a RRH and implements best practices as the most effective strategies for supervising peers.  Under Ms. Rodriguezs’ leadership IAIC will not only meet but will exceed DMHA’s expectations as a RRH given the provisional insight and experience current IAIC leadership has with the RRH program.  IAIC will provide peer recovery support services (PRSS) through a team of certified peers who have lived experience with recovery from substance use disorder (SUD), mental illness (MI), and/or co-occurring disorders (COD). IAIC peer professionals will receive weekly supervision from a certified peer supervisor for one hour per week, including bi-weekly group peer supervision. The IAIC team will engage in outreach efforts to establish new partnerships and strengthen existing ones with service providers in the five counties assigned to region nine, such as but not limited to housing assistance providers, recovery residences, medication assisted recovery (MAR) providers, SUD, COD, MI treatment providers, Recovery Cafe’s, recovery community organizations (RCOs), and assistance with transportation needs. As a certified recovery community organization (RCO) IAIC peers will provide individual, family, and group PRSS supporting all pathways of recovery. |

**SOW Section 4 and 5 – Desired Contractor Experience, Region and Mandatory Minimum Requirements**

1. For your region, describe any experience managing the direct delivery of peer recovery services, including experience as an active Recovery Community Organization (RCO). Highlight any subject matter expertise you have, especially in mental health, substance use recovery, and recovery-oriented systems of care.

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| Indiana Addictions Issues Coalition (IAIC) has been a member of the Association of Recovery Community Organizations (ARCO), a program of Faces and Voices of Recovery since 2018 (now referred to as the Association of Recovery Centered Organizations) and became an Indiana State Certified recovery community organization (RCO) in 2023. The foundation of IAIC as an organization and RCO is based on providing advocacy and education on substance use disorder (SUD) and co-occurring disorders (COD) as a chronic illness rather than a moral failing and began offering peer recovery support services (PRSS) in 2020.  As a regional recovery hub (RRH) from 2020 through 2023, IAIC established relationships and partnerships with community-based service providers in two of the three counties listed in region nine of the revised RRH program (Marion and Hamilton counties). IAIC currently has a contract with the Marion County Health Department Safe Syringe Access Service (SASS) program where PRSS is provided during the mobile unit hours of SASS. IAIC has also held contracts with Community Health Network and Wheeler mission in Marion County for the delivery of PRSS, these contracts have since expired without the option for renewal based on funding sources. As an accessible, unrestricted CRCO based in Marion County, IAIC provides individual PRSS when an individual is unable to receive services from another entity based in Marion County for various reasons.  Through IAIC’s sister organization the Indiana Recovery Network (IRN) peers provide individual, adolescent, and family PRSS at various locations throughout Hamilton County, the IRN and IAIC peers are providing services through both organizations and programs. IRN and IAIC are members of the Hamilton County Council on Alcohol and Other Drugs (HCCOAOD) and provides PRSS for the Hamilton County Opioid Prevention Efforts (COPE) program and its Quick Response Team (QRT). In 2024, the IRN established formal partnerships with NuLife and Ignite Transform to provide individual and weekly group PRSS to their participants. The IRN is also launching a 90-day pilot program to provide PRSS for Hamilton County Community Corrections effective August 1, 2024, which will then be transferred to IAIC beginning January 1, 2025, as the CRCO.  IAIC has yet to provide services in Howard and Madison Counties but has relationships with clinical and recovery service providers in these counties which will be utilized to establish a two-way referral process as well as a connection to other service providers throughout these counties. IAIC has yet to provide services or establish partnerships in Tipton County, so this will be a high priority county for outreach efforts should IAIC be awarded the RRH contract for region nine.  As Indiana’s oldest recovery advocacy organization and statewide RCO, IAIC is considered a subject matter expert in the behavioral health field, specifically regarding SUD and COD recovery programs and the importance of utilizing peer professionals across systems. IAIC’s Interim Director Heather Rodriguez has helped organizations start, implement, and sustain peer-led substance use and mental health recovery programs throughout Indiana and multiple states throughout the country. Ms. Rodriguez has served as a subject matter expert presenting at conferences in Indiana and multiple states throughout the country since 2019. |

1. Describe any experience developing and maintaining relationships with non-profit organizations, including coordinating linkages to care for individuals across different systems. Please explain how you will leverage current relationships to ensure individuals receive the necessary services. Please identify how this work will be done for your proposed region.

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| Indiana Addictions Issues Coalition (IAIC) was established in 1999 as a statewide coalition comprised of individuals and families in recovery and non-profit organizations who provide behavioral health services.  IAIC provides education for individuals and non-profit organizations about the behavioral health care system, the recovery ecosystem and has offered training on the process of policy, systems changes, and advocacy. As a coalition, IAIC has developed and maintained partnerships with non-profit organizations throughout Indiana in prevention, treatment, and recovery since its inception.  Through a SAMHSA grant IAIC created and launched the Indiana Recovery Network (IRN) which is a statewide network of over 100 recovery focused organizations, IAIC has developed and maintained relationships with these non-profit organizations since the launch of the IRN in 2019. The IRN serves to provide linkages to care through member organizations who make up the network. IAIC will leverage partnerships IRN members have established in region 9 of the 2025 RRH program, which includes member organizations based in the region nine counties. Through these partnerships IAIC will have the ability to connect participants located in the five region nine counties to services that include, but will not be limited to, mental health and or substance use clinical services, recovery housing, harm reduction services, community-based recovery organizations (where available), and other social service programs.  IAIC will leverage current relationships to help coordinate care across systems for the unique needs of participants in each of the counties served through PRSS. The needs of participants will be identified through a brief needs assessment administered by IAIC to ensure we are connecting participants to the requested resource and service provider. |

1. Describe any experience collecting and reporting data on peer recovery activities, outcomes, and impact. Briefly explain your experience operating and reporting data in RecoveryLink.

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| Indiana Addictions Issues Coalition (IAIC), as a Regional Recovery Hub (RRH), utilized RecoveryLink beginning in January 2022 when the RRH program transitioned to RecoveryLink from the Recovery Data Platform (RDP) for data collection. IAIC peers and the peer supervisor utilized RecoveryLink to enter all participant data and interactions. Additional information collected in RecoveryLink by IAIC peers included brief intakes; brief check-ins; full intakes, which included the recovery characteristic assessment and recovery capital assessment; ongoing engagements; initial recovery plans; documenting follow-up engagements, which included the recovery capital assessment and participant outcomes; and group sessions.  The MHAI Recovery and Advocacy Manager, who is part of the IAIC team, has trained RRH peer team members, Peer Supervisors, and RRH administrators on how to use RecoveryLink and currently provides ongoing technical support for system utilization to the RRHs. |

**SOW Section 6 – Peer Services and Supervision**

1. Please provide an estimate for the total annual amount of funds required to complete the duties listed in Section 6 of the SOW. This total should include the amount you would need from the State as well as the amount you might obtain through other sources. This estimate should exclude any administrative or costs required to maintain certified peers.

The State may utilize the estimates supplied to determine the resources needed for each region in the State. The ultimate amount for these services in each Hub’s contract will be determined during contract negotiations.

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| The estimated total annual amount to complete duties in Section 6 of the SOW is $154,664. |

1. Please indicate if your organization is currently receiving any alternate funding source(s) to provide peer recovery services and the annual amount received. Please describe how you anticipate utilizing alternate funding source(s) to complement funds awarded through this RFS.

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| Indiana Addictions Issues Coalition (IAIC) currently receives funding from the Marion County Health Department via a contract to provide peer recovery support services (PRSS) for the Safe Syringe Access and Support (SSAS) program with the annual amount being $9,296. The current contract with MCHD for PRSS at SSAS expires on 8/31/24. However, IAIC and MCHD are having discussions about renewing this contract for the next federal fiscal year. Funding from this alternative source would complement this RFS, as these services are provided in Marion County, one of the five counties included in region nine of the revised RRH program. While this alternative funding source complements the RFS proposal, these funds may only be used to provide ongoing PRSS for SSAS participants, meaning IAIC is unable to use these funds for Marion County residents who are not engaged in the SSAS program, or for anyone outside Marion County. |

1. Please complete the following table and provide your best estimate for the monthly average / amount of certified peers needed for your selected region. This includes: the estimated number of full-time and part-time certified peers needed to provide adequate peer support service for your region, and the average wages you propose to pay them (including benefits if applicable).

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| ***Position*** | ***Number of Proposed Monthly Part-Time Employees (PTEs)*** | ***Number of Proposed Monthly Full-Time Employees (FTEs)*** | ***Average Hourly Pay (including benefits if applicable)*** |
| Certified Peer(s) | 0 | 3 | 23.00 |
| Peer Supervisor(s) | 1 | 0 | 25.00 |

1. Please explain your experience with peer services. Please explain how your experience informed your above estimates.

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| Indiana Addictions Issues Coalition’s (IAIC) began providing PRSS in central Indiana, initially as a Regional Recovery Hub (RRH) from 2020 to 2023. During this time, the organization employed up to five certified peer professionals. IAIC has contracted with the Marion County Health Department for PRSS services as part of the Safe Syringe Access and Support (SSAS) Program from 2021-current date, providing PRSS during hours of operation for the mobile SASS program. Additionally, IAIC partnered with Community Health Network to launch a pilot program providing PRSS in various settings from November 2021 to January 2022.  IAIC’s experience providing PRSS in multiple counties informed estimates on the number of fulltime peers the organization would like to employ for community-based PRSS in the five counties that will make up region nine of the RRH program beginning in 2025.  While Marion County has a significant number of social service providers in Indianapolis there continues to be individuals who are not engaged with PRSS for a variety of reasons, including not meeting eligibility requirements of programs, transportation barriers, and stigma. Many providers based in Indianapolis have contacted IAIC seeking to connect their participants with PRSS. However, due to a lack of funding to provide services in the county IAIC has had to make referrals to external organizations. Considering Marion County's significant population and recognizing that communities beyond Indianapolis require PRSS, as well as receiving service requests from various organizations across the county, IAIC deems the demand in this county substantial enough to necessitate at least one full-time peer dedicated solely to Marion County.  The request for two additional peers, who would be assigned to the remaining four counties of region nine (Hamilton, Howard, Madison, and Tipton), is based on the number of recovery service providers established in each county, the population size, and experience providing PRSS in rural/urban-rural counties through IAIC’s sister organization the Indiana Recovery Network (IRN) who currently operates as a Regional Recovery Hub (RRH). The need for PRSS services in these counties is high as Howard and Madison counties have consistently had high rates of overdose deaths and hospital admissions for all drugs. Indiana Department of Health data for 2022 shows that Howard County had rates of 54.7 (per 100,000) overdose deaths and 308.6 (per 100,000) hospital admissions for all drugs; Madison County had rates of 60.0 (per 100,000) overdose deaths and 349.2 (per 100,000) hospital admissions for all drugs; Hamilton County had rates of 15.9 (per 100,000) overdose deaths and 138.2 (per 100,000) hospital admissions; and Tipton County had rates of 35.0 (per 100,000) overdose deaths and 238.7 (per 100,000) hospital admissions for all drugs. While Tipton County doesn’t have as high of rates as Howard or Madison, it is more rural creating unique barriers such as a lack of public transportation throughout the county. Given the available data for these counties, our experience building partnerships with local organizations and coalitions, and our experience providing PRSS in two of the five counties in region nine we feel three fulltime peers is a justifiable amount to provide PRSS within the five counties as a RRH. |

1. Describe how the peer supervisor(s) will oversee the certified peer(s) employed by the Hub. Please refer to Section 6.a.iii of the Scope of Work (Attachment A) for more details on peer supervision duties.

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| Certified Peers employed through IAIC are supervised by an ICAADA Certified Supervisor of Peer Recovery (CSPR-PR) through individual and group supervision sessions.  Monitoring the fidelity of evidence-based practices (EBP) used by IAIC peer recovery coaches will be done through weekly peer supervision sessions, individual and group caseload discussions, review of documentation, and the use of EBP's like Motivational Interviewing and Mental Health First Aid. Data collection, including baseline data at intake and ongoing assessments for growth and social determinants of health, as well as feedback from participants, will inform continuous improvement and adaptation of services to promote holistic wellness and sustained recovery in program participants. Observation of services provided by peers further contributes to quality control and enhancement. Utilizing RecoveryLink for data entry and tracking facilitates the monitoring process and aids in optimizing service delivery and quality control. |

1. Please describe how you will ensure ethical services are provided and staff understands the peer support professional code of ethics and its implications.

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| The Indiana Addictions Issues Coalition (IAIC) delivers peer recovery support services (PRSS) through Certified Peer Recovery Coaches (CPRCs) who have attended the CCAR Recovery Coach Academy 5-day training and have received certification through ICAADA or Certified Peer Support Professionals (CPSP) trained and credentialed through DMHA. Every peer recovery coach working with IAIC is committed to upholding the code of ethics and standards prescribed by the credentialing bodies, CPSP via DMHA, and CPRC through ICAADA, to guarantee that the care provided to participants is of the utmost quality. If a breach of ethics is found, CPRCs and CPSPs will not be able to provide peer support services until an ethics investigation is completed with the corresponding certifying agency. IAIC will implement recommendations from the corresponding credentialing ethics committee, either ICAADA or DMHA, ensuring ethical standards and practices are followed.  IAIC peers receive ongoing peer ethics education during supervision where the code of ethics is frequently reviewed. IAIC peers sign the code of ethics during the employment onboarding process and must attend the CPRC Peer Ethics training every two years. |

**SOW Section 7 – Peer Workforce Development**

1. Describe the peer supervision and support system you will establish for certified peer(s). This should include but is not limited to, the frequency of regular one-on-one supervision sessions, the content of supervision sessions, and additional support services for staff.

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| Peer professionals employed with Indiana Addictions Issues Coalition (IAIC) receive supervision from an ICAADA Certified Supervisor of Peer Recovery (CSPR-PR) through individual and group supervision sessions. IAIC peers attend one-hour, bi-weekly individual supervision sessions and a one-hour bi-weekly group supervision session. The peer supervisor maintains an “open-door” policy, meaning peers may meet with the supervisor between weekly scheduled sessions, as needed. Topics discussed during individual and group peer supervision sessions include peer ethics, teamwork, active listening skills, soft skills, communication skills, self-care, motivational interviewing, boundaries and oversharing, and documentation best practices.  Peer supervision sessions are structured as follows: Peer workload and caseloads are reviewed and discussed, the peer supervisor will provide feedback, recommendations, and support as needed. The peer then has a list of topics or concerns they would like to discuss with the supervisor where feedback, recommendations, and support is provided. Next the peer supervisor will have a pre-determined topic for professional development selected where an open conversation is held regarding this skill and how the peer can enhance this skill if needed. The individual session ends with the peer suggesting topics to be discussed during the next group supervision meeting.  The format for group peer supervision is as follows: The peer supervisor will provide updates to the group relevant to PRSS, each peer then provides an update to the group regarding their case load and has the opportunity to ask team members for feedback and recommendations if the peer is experiencing any challenges or concerns with their case load. The meeting concludes with an open discussion on a pre-selected topic based on recommendations made during individual peer supervision sessions from the previous week.  IAIC peers are encouraged to attend monthly peer support professional virtual meetings offered through SAMHSA’s Peer Center of Excellence and the Indiana Association of Peer Recovery Support Services (IAPRSS). MHAI, IAICs fiscal agent, offers an Employee Assistance Program (EAP), which all staff members have access to for additional support, including clinical services.  IAIC values and promotes self-care for all team members and encourages staff to utilize PTO for self-care and/or mental health days. IAIC makes every effort to accommodate scheduling requests from peer team members, so they may have time to attend recovery meetings and events that support their individual pathway of recovery. |

**SOW Section 8 – Additional Programming Support**

1. Describe any existing relationships with Opioid Treatment Programs (OTPs) and medication providers in the proposed region, including challenges and opportunities to continue developing relationships. If not applicable, please explain how you will establish these relationships.

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| Of the counties listed in region 9 of the RRH 2025 map, Marion County is the only one with FSSA/DMHA Opioid Treatment Programs (OTPs), Indianapolis Comprehensive Treatment Center, Midtown Narcotics Treatment Center/Eskenazi, and New Vista, all of whom IAIC has established a relationship with for participant referrals. In addition to the OTPs in Marion County IAIC has relationships with medication assisted recovery (MAR) providers such as Groups Recover Together, Apple Gate Recovery Indianapolis, Clean Slate, A Better Way Outreach, Community Fairbanks Behavioral Health Indianapolis, The Kolbe Center, Miller Care Group, and others.  While Hamiton County, Madison County, Tipton County, and Howard County do not have any FSSA DMHA OTP providers, each of these counties do have MAR providers. Hamilton County has Bridges of Hope, Clean Slate, and Groups Recover Together as MAR service providers, all of whom IAIC has a relationship with for participant referrals. Madison County has Bridges of Hope, Clean Slate, Groups Recovery Together, and The Center for Mental Health as MAR providers of which IAIC has a relationship with for participant referrals. While IAIC does not already have an established partnership with the MAR service providers in Tipton County, we will work to initiate those connections with 4C Health and Groups Recover Together. In Howard County IAIC already has a relationship for participant referrals with the MAR service providers, Clean Slate, Community Fairbanks Behavioral Health- Kokomo, Groups Recover Together, and Apple Gate Recovery-Kokomo. |

1. Describe any existing relationships with local jails and Integrated Reentry and Correctional Support (IRACS) programs in the proposed region including challenges and opportunities to continue developing relationships. If not applicable, please explain how you will establish these relationships.

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| Indiana Addictions Issues Coalition (IAIC) has a relationship with Hamilton County jail and Hamilton County Community Corrections. IAIC peers are shared with the sister organization Indiana Recovery Network (IRN) and provide PRSS through the Hamilton County Opioid Prevention Efforts (COPE) program and its Quick Response Team (QRT). The IRN is also launching a 90-day pilot program to provide PRSS for Hamilton County Community Corrections effective August 1, 2024, which will then be transferred to IAIC beginning January 1, 2025, as the CRCO. Hamilton County jail has a TOWER Re-entry program which includes recovery support services. The IAIC Interim Director has attended meetings with the TOWER Program Coordinator where it was conveyed that Hamilton County jail was not interested in launching the IRACS program or partnering with another external organization for PRSS within the jail. The IAIC Interim Director has maintained a relationship with the Project Coordinator and has encouraged them to share information with individuals exiting the jail about the RRH program, 211, and the Lyft RRH program. The IAIC Interim Director will continue cultivating this relationship.  IAIC is in the beginning stages of establishing a relationship between Marion County jail and IAIC, with a meeting between the IAIC Interim Director and the Marion County jail Deputy Chief scheduled for August 19, 2024. IAIC would like to learn more about the possibility of providing PRSS inside Marion County jail and if the jail would consider implementing the IRACS program. IAIC will propose offering training on the statewide recovery ecosystem with a focus on resources throughout Marion County for the jail staff and various departments and will seek to be a resource for individuals exiting the jail.  IAIC does not currently have a relationship with Madison, Tipton, or Howard County jails but will prioritize building these relationships should we be awarded the contract to serve as the RRH for region 9.  Currently, the IRACS program has not been established in region 9 counties (Marion, Hamilton, Madison, Howard, and Tipton), but Hamilton County Community Corrections has expressed interest in the IRACS program. |

1. Describe how you will establish and/or maintain relationships with the Indiana Department of Corrections (IDOC), trauma informed recovery-oriented systems of care initiatives, local syringe service programs, harm reduction organizations, recovery community organizations, and other recovery services in the proposed region.

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| **IDOC:** Indiana Addictions Issues Coalition (IAIC) has a relationship with the Indiana Department of Corrections (IDOC) for referrals when an individual is scheduled to be released from an IDOC facility. Once IAIC receives the individual's information a peer team member will contact them within 48 hours (about 2 days) of their release date to assess if the individual would like to engage in PRSS and if they need assistance with resource navigation to connect with other social services programs, housing needs, transportation needs, etc. IAIC will maintain this relationship by continuing to receive referrals from IDOC when an individual is being released from one of the facilities.  In region nine of the 2025 RRH program Marion and Madison counties are the only ones with IDOC facilities, Hamilton, Tipton, and Howard counties do not have an IDOC facility. Should IAIC be awarded the region nine contract the Interim Director will lead outreach efforts to the two IDOC facilities located in Madison County; Correctional Industrial Facility and Pendleton Correction Facility to schedule meetings and establish a partnership with the goal of providing PRSS inside both facilities as well as being a resource and support system when individuals are exiting these facilities.  As the Indiana Women’s Prison is in Marion County, IAIC Interim will lead outreach efforts for this IDOC facility as well to establish a relationship with the goal of providing PRSS inside the facility and serving as a resource and part of an individual's support system once they are exiting the facility.  **TI-ROSC:** IAIC is not currently engaged in trauma informed recovery-oriented systems of care (TI-ROSC) initiatives in the five counties that will make up region nine of the 2025 RRH program. However, should IAIC be awarded the contract to serve as the RRH for the region the Interim Director will hold discussions with county stakeholders and decision makers about the TI-ROSC model and will utilize the TI-ROSC Toolkit supported by FSSA and developed by the National Council in 2022 to conduct assessments and gauge county interest in this model. IAIC will ask to facilitate training for community partners on stigma elimination, multiple pathways of recovery, the power of peer support, and other topics related to mental health and substance use recovery.  **SSP and Harm Reduction:** Of the counties that will comprise region nine of the 2025 RRH program, Marion and Madison Counties are the only two that have local syringe service programs (SSP): Hamilton, Tipton, and Howard Counties do not have a SSP. IAIC currently has a contract with the Marion County Safe Syringe Access and Support (SSAS) program where IAIC peers provide PRSS during the hours of operation of the SSAS mobile Unit. This contract allows for IAIC peers to provide a limited number of hours per week for individuals engaged in SSAS to receive peer support outside of the SSAS program when requested.  IAIC has relationships with multiple harm reduction organizations based in Marion County such as Step-Up, Overdose Lifeline, and the Damien Center which also has a SSP.  IAIC does not yet have a relationship with the Madison County Health Department or a linkage to the SSP, however if awarded the contract to serve as the RRH for region nine IAIC will establish a relationship and partnership with the MCHD as well as Lifepoint Syringe Services/Vivent Health who has a SSP program located in Madison County. IAIC will also establish a relationship with the Madison County Harm Reduction Program, a program of Aspire Indiana Health.  IAIC has a relationship with Ship Happens, a Zero Barrier Access Point to Naloxone based in Howard County. Ship Happens focuses on mail-based Naloxone distribution, which IAIC will use when Naloxone is unavailable through Overdose Lifeline with whom IAIC is currently a registered distributor. IAIC will also inform Ship Happens that as a RRH for region nine, if awarded the contract, that IAIC peers will be available to provide community based PRSS throughout Howard County. IAIC does have a relationship with the Howard County Health Department who also distributes Naloxone. If awarded the region nine contract IAIC will develop this relationship further to establish a two-way referral process and leverage this relationship to connect with other social services providers throughout the county. Howard County Health Department does provide harm reduction services and supplies, such as safe use kits and Naloxone which IAIC as a RRH would utilize as a resource for residents of the county who would like to access these services.  Tipton and Hamilton County do not have a harm reduction focused organization located in the counties nor do they have a naloxone distributor that IAIC was able to identify. Should IAIC be awarded the RRH contract for region nine, IAIC will host naloxone training and distribution events at various locations throughout both counties.  **RCOs:** There are currently no certified recovery community organizations located in Hamilton, Madison, Tipton, or Howard Counties. In Marion County there are three CRCOs; PACE, In Touch OutReach (ITOR), and IAIC. IAIC has a relationship with both PACE and ITOR and will continue these partnerships for two-way referrals, resource collaboration and navigation for participants, transportation resources, and other activities to support Marion County residents.  **Other recovery services:** IAIC has relationships with multiple DMHA certified Recovery Residences located in Marion County including but not limited to Dove House, Progress House, Stagz Transitional Housing, Heart Rock, and Oxford House. IAIC will enhance these relationships to establish partnerships for referrals and will offer individual and group PRSS to residents at these locations or elsewhere throughout the community. IAIC also has a relationship with Recovery Cafe Indy and will serve as a resource for Cafe’ members seeking additional PRSS and will establish a two-way referral process. IAIC also has relationships with multiple 12-step clubhouses throughout Marion County and will connect participants interested in this pathway of recovery to these mutual aid groups and will offer to accompany participants to meetings.  IAIC has a relationship with Recovery Cafe Hamilton County and will serve as a resource for Cafe’ members seeking additional PRSS and will establish a two-way referral process. Another recovery organization based in Hamilton County IAIC has relationships with is Ignite Transform and Ignite Center 4 Community. Ignite Transform provides mental health and co-occurring support through health and wellness for women. Ignite Center 4 Community offers programs and services available to all community members. IAIC will strengthen this relationship by providing individual and group PRSS at the community center for participants of both organizations and will establish a two-way referral process with the organizations. IAIC also has a relationship with the Suburban North Club, a 12-step clubhouse based in Hamilton County and will connect participants interested in this pathway of recovery to this mutual aid support group and will offer to accompany participants to meetings.  In Howard County IAIC has relationships with Wabash Recovery and Still Water on the Wildcat, both of which are recovery residences for men, and Oxford House. IAIC will enhance these relationships to establish partnerships for referrals and will offer individual and group PRSS to residents at these locations or elsewhere throughout the community.  Additional recovery organizations IAIC has relationships with who are based in Howard County include Recovery Cafe’ Turning Point Kokomo and Howard County Recovery Resources Recovery Center Organization. IAIC will maintain these relationships by providing individual and group PRSS at the community center or Cafe’ for participants of both organizations and will establish a two-way referral process with both organizations.  In Madison County IAIC has a relationship with Oxford House, Recovery Cafe of Madison County, and Madison County Mental Health and Addictions Coalition. IAIC will strengthen these relationships by providing individual and group PRSS at each location upon request or elsewhere in the community for participants of these organizations and will establish a two-way referral process with the organizations.  For Tipton County, IAIC does not have any previously established relationships with community-based organizations or service providers in Tipton County, making this a high priority for outreach and partnerships should IAIC be awarded the RRH contract for region nine. |

1. Describe how you will support all pathways to recovery for individuals that are seeking support.

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| The Indiana Addictions Issues Coalition (IAIC) understands that substance use disorder is a complex issue that doesn't conform to a one-size-fits-all solution. The journey to recovery involves various recovery processes supporting multiple pathways of recovery. IAIC acknowledges that individuals respond differently to various pathways of recovery and encourages a personalized and holistic approach to recovery, meeting the unique needs and circumstances of the participants served. IAIC understands that these pathways are not mutually exclusive, and a participant’s recovery journey may involve components from one or more pathways. IAIC does not use stigmatizing language, nor promotes any one pathway of recovery, instead provides education and advocacy on the multiple pathways of recovery to the public, statewide partners, coalition members, and peer participants. IAIC peers facilitate all recovery support meetings where participants are informed the meeting is not a 12-step meeting and does not have affiliations with any specific mutual aid program or format.  IAIC peer team members provide education for participants on the multiple pathways of recovery categorized by clinical pathways (clinical treatment, pharmacotherapy and MAR, behavioral therapy and holistic therapy), non-clinical pathways (peer-led support groups, faith and culture-based recovery support, education-based support, recovery housing, RECs), and self-management pathways (meaning there is no formal process of recovery, no engagement in professional or peer-led groups). The peer team member will assist with recovery resource navigation to aid participants in connecting with service providers for the pathway(s) of recovery they are interested in learning more about or engaging with. IAIC peers will accompany participants upon request when connecting with recovery pathway services and programs provided by external partners. Peer team members provide a warm handoff to community-based recovery support providers and will follow up with participants to assess how the engagement went if the participant does not wish to have their peer accompany them to initial engagements. Peer team members will document recovery pathways of interest and engagement in wellness recovery action plans of participants to assess with the participants which pathways they have deemed a good fit, if another pathway should be integrated, and additional information relevant to the participants recovery journey. |

1. Please describe how you will ensure the availability and distribution of harm reduction supplies such as Narcan and fentanyl testing strips to those in need.

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| The Indiana Addictions Issues Coalition (IAIC) is registered with the Indiana Department of Health for the Opt. IN program to receive and distribute Narcan and is registered with Overdoes Lifeline, Inc. (ODL) as a Narcan distributor. IAIC currently receives Narcan, along with fentanyl and xylazine test strips from ODL. IAIC will ensure availability and distribution of Narcan and test strips through either ODL or county health departments within region nine who have harm reduction programs which includes the Madison County Health Department and Marion County Health Departments. Narcan is available through the Howard County Health Department, Hamilton County Health Department and Fishers Health Department (based in Hamilton County) upon request. IAIC will request Narcan from these County Health Departments should Narcan be unavailable through ODL. |

1. Please indicate whether you’d like to serve as a Contractor furnishing peer recovery services for Indiana’s 2-1-1. If applicable, please describe how many certified peers you plan to utilize in servicing the 2-1-1 phone line. Please indicate what the hourly cost for this service would be.

Please note - an indication of interest to provide these services does not necessarily mean that the State will select you to provide these services. The number and identity of which Hubs will provide services to 2-1-1 shall be a negotiated element of the final contracts and a decision made at the State’s discretion.

Please also note - a Respondent may decline to offer to furnish these services in this box without penalty. This is a separate element from a proposal’s evaluation.

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| Indiana Addictions Issues Coalition declines the offer to furnish peer recovery services for 2-1-1 |

**SOW Section 9 – Referral Process**

1. Describe your proposed process for making a warm handoff to a formalized partner when a participant's needs cannot be fully met by your organization. Please highlight any relevant experiences with warm handoffs and coordinating referrals with partners.

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| IAIC has established partnerships for referrals when a participant's need cannot be fully met by IAIC. When referrals are made to a partner organization the IAIC peer team ensures a connection is made through a warm handoff to stabilize the recovery process.  IAIC’s warm hand-off process is as follows:   * Identify the needs of each participant seeking PRSS through a brief intake form and questionnaire * Provide the participants with information on their options, which allows them to make an informed decision based on their needs. For example, our peers have information as it pertains to food and clothing pantries, a mobile shower unit, the Landlord Mitigation Program, etc. * If a participant is seeking counseling services, IAIC peers will discuss available options with the participant regarding service providers in specialized areas of focus, the geographical location of providers, forms of payment accepted, hours of operation, and what the intake and assessment process entails. * IAIC peers give a brief description to the referral organization of the participants' needs (i.e. needing food, clothing, employment support, mental health support, substance use support, etc.) * If/when the referral is being made through email or phone, IAIC peers ask for receipt/acknowledgment of the referral. * IAIC peers ensure the participant understands any instructions needed for follow-up engagement with the organization they are being referred to and that participants have the necessary contact information for the organization. * IAIC peers encourage participants to contact their peer if they have any questions or concerns regarding the organization in which they were referred to. * IAIC peers will follow-up with participants to ensure the participants needs are being met.   Highlights of relevant experiences providing warm handoffs and coordinating referrals with partners are provided below:  Interview/Employment Attire Referral – A participant was seeking formal clothing for job interviews and was referred to Dress for Success, where the IAIC peer team member provided a warm handoff to the Program Manager of Dress for Success through introductions and helping to understand the needs of the participant. The IAIC peer also assisted the participant with completing the required documentation to obtain services through Dress for Success. Through this referral, the participant was able to get a “styling” appointment scheduled and can continue receiving services through Dress for Success for further employment support and networking.  Housing Referral - A participant who was seeking assistance with locating housing services was referred to South Central Community Action Program, where the IAIC peer team member assisted in locating the resources and accompanied the participant to the above-mentioned agency. The IAIC peer team member provided a warm handoff through in-person introductions and helped convey the participant's specific needs. Specific instructions were given to the housing referral partner, and the IAIC peer team member assisted the participant in filling out the necessary documents for services and to be placed on a waitlist for housing vouchers. |

1. Identify any referral partners that will be contracted for this project. Be sure to clearly describe their roles and responsibilities, related qualifications and experience, and how you will maintain oversight of the subcontractors’ activities.

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| Indiana Addictions Issues Coalition (IAIC) will not be establishing paid contracts or contracting with referral partners for the RRH region nine contract. |

**SOW Section 10 – Ridesharing Services**

1. Please propose an estimated total monthly cost to coordinate and provide ridesharing services for one (1) month. Please provide a narrative explaining the various factors contributing to the estimated monthly cost. If your region includes public transportation detail how you will leverage this resource to serve your clients.

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| The estimated total monthly cost to provide Lyft ridesharing services is $1,500. This estimate is based on historical average monthly costs for rideshare services provided by current Regional Recovery Hubs (RRHs) in the counties included in region nine of this request for services proposal (Marion, Hamilton, Howard, Madison, and Tipton).  Indiana Addictions Issues Coalition (IAIC) is applying for a grant through IndyGo to obtain and provide bus passes for participants in Marion County.  Hamilton County offers public transportation through Hamilton County Express (HCE), a demand-response (reservation based) transportation service requiring 24-hour notice with one-way fares of $3.00, two-way fares of $6.00, and a 10-trip pass available for $30.00. Rides are available Monday through Friday from 6 a.m. to 6 p.m. and on Saturdays from 7 a.m. to 3 p.m. Currently there are no grant opportunities or non-profit discounts available for the Hamilton County Express services. IAIC will leverage this resource as an alternative to using the RRH Lyft service for participants in Hamilton County. HCE provides limited-service connections to additional counties such as Marion, Boone, and Madison, meaning this service may present challenges for participants needing transportation to or from a county not covered by HCE.  Madison County has the Transportation for Rural Areas Madison County (TRAM) service which provides demand-response (reservation-based) transportation to the public. TRAM offers one-way fares for $4.00, a monthly pass for Madison County residents at $33.00, one-way fares for over 60 years of age for $2.50, and an unlimited monthly pass for Madison County residents over the age of 60 for $25.00. TRAM is available Monday through Friday from 7 a.m. to 5 p.m. and is restricted to Madison County only. IAIC will leverage this service to assist with transportation needs of participants located in Madison County, peers will assist participants with scheduling rides as needed. TRAM does not offer grants or discounted fares for non-profit organizations to alleviate financial barriers Madison County participants might experience accessing this service.  Howard County offers free transportation services in the city of Kokomo through CityLine Trolley with five fixed routes and over 250 stops. CityLine Trolley services are available Monday through Friday from 6:30 a.m. to 7 p.m. Another transportation service offered in the City of Kokomo is the Spirit of Kokomo which is a para-transit service for individuals who are differently abled or over the age of 65. Spirit of Kokomo services are available Monday through Friday from 6:30 a.m. to 7 p.m. IAIC will leverage transportation services available in the city of Kokomo to aid participants with transportation needs with peer team members ensuring participants are familiar with the routes and locations of stops for their transportation needs. IAIC peers will offer to accompany participants during rides upon request if a participant is unfamiliar or uncomfortable riding public transportation until the participant is comfortable doing so independently.  Transportation services offered in Tipton County are available through Encore Lifestyle & Enrichment Center through the Encore Express programs. Encore Express is an on-demand, door-to-door transportation service for residents of Tipton County. Rides are available on a first-come-first served basis Monday through Friday from 8 a.m. to 4 p.m. A seven-day advance notice is preferred for ride request, rides are available for out of county travel however riders must request these rides from two weeks to three months in advance. Encore Express fares are as follows; local rides are $5.00, to the city of Kokomo area $20.00, the Elwood area $12.00, the Noblesville area $20.00, and Carmel or North Indianapolis area at $35.00. IAIC peers will educate participants who reside in Tipton County on this resource and will assist with scheduling rides as needed. Currently there are no grants or non-profit discounts offered for Encore Express rides. |

**SOW Section 11-12 – Data Requirements & Project Management**

1. Describe your approach to project management. Identify a Regional Recovery Hub Liaison, as described in Section 12.a of the Scope of Work (Attachment A). Please describe their experience with project management and attach their resume to your submission, if applicable.

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| The Regional Recovery Hub Liaison for Indiana Addictions Issues Coalition (IAIC) will be the Interim Director, Heather Rodriguez. IAIC’s approach to project management as described in section 12 are as follows:  **Monthly reports:** the IAIC Interim Director will submit the monthly report to the State which will include a summary of all activities related to ensuring adherence to peer workforce requirements and will include barriers or challenges related to meeting the contract requirements. IAIC understands the State reserves the right to revise and adjust data required in the monthly reports.  **Data for operating costs of peer support services:** The IAIC Interim Director and Peer Supervisor will collaborate to collect data required for the quarterly management and technology report. The Interim Director will submit this quarterly report to the State by the specified quarterly deadline.  **Meeting and Touchpoint Requirements:** The IAIC Interim Director will attend the kickoff project meeting with the State within two weeks of the finalization of the contract, unless otherwise directed by the State. The Peer Supervisor will attend the kickoff meeting with the State for introductory purposes. The Interim Director will schedule, facilitate, and coordinate the virtual monthly touchpoints with the State and will be responsible for creating the meeting agenda which will be submitted to the State for review prior to each meeting. IAIC understands that the State may adjust the meeting agenda as deemed necessary. The Interim Director will be available to attend additional meetings as requested by the State.  **Project Management Experience:** The IAIC Interim Director, Heather Rodriguez, is an experienced administrator for state and federal level projects with responsibilities for grant development and implementation, program administration, fidelity and evaluation. Below is a brief list of some of the programs Ms. Rodriguez has been responsible for managing since joining IAIC in May of 2018.  As the Project Coordinator for the SAMHSA Recovery Community Statewide Program- Statewide Network (RCSP-SN) grant awarded to IAIC for federal fiscal years 2017 through 2020 Ms. Rodriguez was responsible for the day-today oversight and implementation of the goals and objectives of the RCSP-SN grant which included 1) developing a sustainable recovery coach member organization (IAPRSS), 2) develop and support regional recovery networks in order to better engage RCOs and other organizations providing RSS, provide a vehicle for ongoing regional trainings, and assist RCOs and prospective RCOs with organizational capacity-building, and 3) develop a statewide infrastructure – Indiana Recovery Network – to support regional recovery network efforts, and secure project-specific and/or sustainable funding for local, regional, and statewide recovery efforts.  As Director for the Indiana Recovery Network and Indiana Addictions Issues Coalition Manager of Recovery Community Development, Ms. Rodriguez was responsible for program oversight and management, including data collection and reports for the SAMHSA ROTA grant in partnership between Purdue Extension and the Indiana Recovery Network from federal fiscal years 2021 through 2023. During this grant period under the IRN, Ms. Rodriguez was responsible for the below list of activities:   * Creating and facilitating community education trainings on OUD, SUD, public policies, and recovery support services * Creating and disseminating recovery community readiness assessments. * Creating and facilitating Recovery Community Organization (RCO) training * Providing technical assistance to four aspiring RCOs * Creating and facilitating training to Purdue Extension staff on SUD recovery support services, SUD policies, recovery ecosystems and recovery infrastructure * Create and disseminate education and marketing materials on SUD recovery, SUD recovery support services, and stigma elimination   In 2022 and 2023, the Indiana Recovery Network partnered with the Wellness Council of Indiana to deliver a series of regional employer trainings where the IRN with Ms. Rodriguez as the Director, was responsible for creating and facilitating a stigma elimination training to employers in attendance at each of the regional trainings. Additional activities Ms. Rodriguez was responsible for through this partnership included assisting the Wellness Council in securing locations for seven regional trainings in partnership with local recovery organizations, assisting with agenda development for Education Workplace Mental Health and Recovery Event Series, assisting with identifying recovery community members to participate in an educational video series for statewide employers, and curating statewide recovery resources for employers.  As Director of the Indiana Recovery Network in March of 2020 Ms. Rodriguez worked with then Director of IAIC Brandon George, DMHA, and the Governor's office to help create and launch the statewide Regional Recovery Hub (RRH) program. The RRH program launched in April of 2020 with Ms. Rodriguez assisting in identifying additional recovery organizations to serve as a RRH, collected monthly reports from RRHs to compile comprehensive monthly reports for DMHA, provided technical assistance to all RRHs, assisted in trainings for the Recovery Data Platform (RDP), later replaced by RecoveryLink. Ms. Rodriguez has managed the RRH program in partnership with DMHA and IRN team members from April 2020 through the current date of August 2024. |

1. Describe your preferred approach to coordination and collaboration with DMHA.

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| Indiana Addictions Issues Coalitions (IAIC) emphasizes an open and transparent communication strategy for collaboration, incorporating in-person and virtual meetings as well as various modes of correspondence like emails and phone calls. The organization values its partnership with the State and is flexible in meeting the collaboration and coordination needs of DMHA. IAIC adopts a person-to-person approach, leveraging collaboration tools for knowledge exchange and real-time interactions, while also embracing asynchronous methods for broader information dissemination. Additionally, IAIC utilizes a process-driven approach, employing collaborative software to manage tasks and workflows effectively, thus facilitating a structured collaborative effort towards shared goals. |

1. Confirm your commitment to meet all reporting, meeting, and project management requirements outlined in Section 12 of the Scope of Work (Attachment A).

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| IAIC is dedicated to fulfilling all reporting, meeting, and project management requirements specified in Section 12 of the Scope of Work (SOW) and is committed to affecting a significant and positive transformation in region nine's counties as part of the RRH program in 2025, contingent upon being awarded the contract. |