



**RFI 23-1221-01**

**“Behavioral Health Facility”**

**NIGP Commodity Code: 94876**

**DUE DATE: February 15, 2024**

**10:00 A.M. MST**

## **GENERAL CONDITIONS**

RFI responses must include but are not limited to the requirements set forth in this RFI. Responses deposited with the City may be withdrawn or modified prior to the time set for opening of responses by delivering written or telegraphic notice to the City. Responders submitting responses may be afforded an opportunity for discussion and revision of responses.

The opening of responses shall be conducted in private to maintain the confidentiality of the contents of all responses during the consideration process. Upon reviewing the responses, qualified responders may be contacted for additional qualifying information.

The City will open and evaluate all responses; determine the need for and conduct any discussions; and make a final recommendation to the City Commission for issuing a Request for Information (RFI).

**CONFIDENTIALITY/PROPRIETARY INFORMATION:** Responders should give specific attention to the identification of those portions of responses deemed to be confidential, proprietary information or trade secrets, and provide justification of why such materials, upon request, should not be disclosed by the City under the New Mexico Inspection of Public Records Act, and must clearly indicate each and every section that is deemed to be confidential, proprietary, or a trade secret. It is not sufficient to preface the request with a proprietary statement. Unless materials are properly noted as confidential/proprietary and proper justification is provided as required above, all materials submitted by the Responder become the property of the City of Clovis and may be returned to the Responder at the sole discretion of the City. The City has the right to use any/all ideas, not noted as confidential/proprietary, presented in any response to the RFI.

**PREPARATION COSTS:** The City of Clovis is not responsible for any costs associated with the preparation of submittal or this RFI.

**INTRODUCTION:** The City of Clovis, along with Curry, Roosevelt, Quay, and De Baca, the City of Portales, Union County and the Village of Fort Sumner, completed a comprehensive feasibility study for a Regional Behavioral Health Facility in partnership with Initium Health, a public benefit company which conducted the study. This study included a needs assessment, gap analysis, financial analysis, benefit analysis, and community engagement. The assessment revealed significant gaps in behavioral health services within the region, particularly in terms of accessibility and proximity to inpatient and crisis care facilities. The study indicates that patients in need of specialized behavioral health services often face significant travel distances, resulting in inadequate access to essential care. This RFI is seeking insights from mental health treatment providers, behavioral health stakeholders, architects and contractors, and other relevant professionals to gather perspectives on the key elements that should be considered during behavioral health facility development and operations.

**BACKGROUND:** The behavioral health needs of rural residents often mirror those of urban areas, yet the resources available are starkly different. Understanding this disparity, the cities of Clovis, Portales, the village of Fort Sumner, along with Curry, De Baca, Quay, Roosevelt, and Union counties, united their resources to address the issue. This initiative resulted in a

comprehensive feasibility study aimed at understanding the extent of service gaps and the impact on individuals. It sought to outline ideal solutions for a behavioral health gap that would be both effective and attainable.

The gaps in care identified were profound and significantly worsened by geographical challenges. Residents referred to specialized centers often face travel times of 1.5 to 5 hours, including across state borders. Moreover, local ambulance services are also strained in these rural communities with the responsibility to transport patients to distant facilities.

Isolation from support systems impedes patient well-being and poses significant challenges to the healthcare system and economy. The widespread lack of accessible behavioral health facilities worsens this situation, leaving many residents without the vital care they require.

In response to the collected data and community input, this study found the facility should:

- Be comprehensive, to include inpatient care, intensive outpatient and partial hospitalization programs, outpatient care including medication-assisted treatment, and a crisis triage center for walk-in and law-enforcement drop-off.
- Offer an ecosystem of resources encompassing clinical, residential, social services, and family wellness.
- Coordinate with outpatient providers, law enforcement, hospitals, and EMS to create an effective, efficient, person-centered continuum of behavioral health care.
- Embrace a public health approach, reflecting a philosophy of the architecture of recovery.

Additionally, through community input, local residents expressed that the new center should:

- Provide 24/7 service availability.
- Account for transportation to/from the facility.
- Be aesthetically appealing so people feel comfortable (spaces to relax and socialize, with natural light).
- Be technologically advanced so it's relevant & efficient for years to come.
- Attract top-quality staff including bilingual staff.

Recently, New Mexico changed the state regulations pertaining to Crisis Triage Centers, which are facilities that provide stabilization, treatment, and connection to ongoing care for individuals experiencing a behavioral health crisis. As of 2023, Crisis Triage Centers are able to accept involuntary admissions, whereas previously they were only able to accept voluntary admissions. Involuntary admissions pertain to situations where an individual is admitted involuntarily to psychiatric care under specific circumstances such as risk of harm to themselves or others. This regulatory change provides a new option for involuntary psychiatric admissions to occur at a Crisis Triage Center instead of an inpatient psychiatric facility, broadening the scope and effectiveness of Crisis Triage Centers in behavioral health care. Due to this change, a Crisis Triage Center will be the first element of a regional behavioral health facility established to address the needs of these counties.

National Association of State Mental Health Program Directors Minimum Expectations and Best Practices for Crisis Receiving and Stabilization:

Expectations and Best Practices	
Operations	<ul style="list-style-type: none"> <li>Operate 24/7 365 days a year.</li> </ul>
Intake	<ul style="list-style-type: none"> <li>Offer walk-in and first responder drop-off options.</li> <li>Offer capacity to accept all referrals at least 90% of the time with a no rejection policy for first responders.</li> <li>Not require medical clearance prior to admission. Assess physical health needs and deliver care for most minor physical health challenges with an identified pathway to transfer the individual to more medically staffed services if needed.</li> </ul>
Staffing	<ul style="list-style-type: none"> <li>24/7 multidisciplinary team able to meet needs of individuals experiencing all levels of crisis.</li> <li>Team includes psychiatrists or psychiatric nurse practitioners, nurses, licensed/credentialed clinicians, and peers with lived experience.</li> </ul>
Services	<ul style="list-style-type: none"> <li>Address mental health and substance use crisis issues.</li> <li>Provide assessment and support for medical stability while in the program including delivery care for most minor physical health challenges, with an identified pathway to transfer the individual to more medically staffed services if needed.</li> <li>Screen for suicide risk and violence risk and, when clinically indicated, complete comprehensive suicide risk and/or violence risk assessments and planning.</li> <li>Incorporate some form of intensive support beds into a partner program (within the services' own program or within another provider) to support flow for individuals who need additional support.</li> <li>Coordinate connection to ongoing care.</li> <li>Provide follow-up.</li> </ul>

**PURPOSE:** The City of Clovis is planning the development and rollout of a regional behavioral health center to address the needs identified in the feasibility study. The goal of this facility is to provide accessible and high-quality behavioral health crisis care to the residents of eastern New Mexico. As part of this process, we are seeking insights and expertise through this RFI from behavioral health treatment providers, architects and contractors, and other relevant healthcare professionals to gather perspectives on the elements that should be considered during the facility's development and operation.

**RFI OBJECTIVE:** The primary objectives of this Request for Information (RFI) are as follows:

- To gather insights from professionals directly involved in behavioral health treatment to ensure the facility's design and operations are aligned with community needs.
- To identify potential partners, collaborators, and stakeholders who are interested in

participating in various phases of the procurement process.

**KEY AREAS OF INQUIRY:** *Interested parties are invited to provide insights and recommendations on the following areas.*

**TREATMENT OPTIONS (Clinical Services):**

- What therapeutic approaches do you recommend including at the crisis triage center to address mental health conditions?
- What services, programs, and/or treatments do you recommend to address substance use and mental health disorders?
- What strategies do you recommend for co-occurring mental health disorders and substance use disorders?

**TREATMENT APPROACH:**

- How do you recommend integrating technology and digital solutions into the behavioral health facility?
- How do you recommend the facility provide a culturally-sensitive approach to care?

**WRAPAROUND SERVICES:**

- What strategies or market partnerships would be most favorable in addressing social determinants of health (food insecurity, housing instability, etc.) of this patient population post-discharge?
- Based on your experience, what insight can you provide on aligning with community case management to address legal issues (i.e. disability benefits, guardianship)?
- What are methods to identify high risk patients, and collaborate across the care continuum and community to bridge social and economic needs for these patients?

**COORDINATION OF CARE AND COLLABORATION:**

- What is important to consider when developing the collaborative relationship between the crisis triage center and law enforcement and/or the justice system?
- What is important to consider when developing the collaborative relationship between the crisis triage center and local outpatient behavioral health providers?
- What is important to consider when developing the collaborative relationship between the crisis triage center and local hospitals?

**STAFFING and LOCAL TRAINING: WORKFORCE**

- Based on your experience, what insights can you provide to successfully support the recruitment, training, and retention of behavioral health professionals and staff?
- What strategies could the facility implement to attract and retain top-tier staff in the field of mental health?
- What opportunities exist to strengthen local training and education programs in order to better address the specific workforce requirements of the facility?

## **DESIGN and CONSTRUCTION APPROACH:**

- Based on your experience, what are the most important design elements for behavioral health facilities?
- What is your process to ensure ligature risks and compliance elements are addressed prior to the beginning of the design process?
- What is your approach in designing energy-efficient and economically friendly facilities?
- How the city should best proceed with cost estimating, in future years dollars, for all identified facility needs

## **MEASURES and KPIs:**

- Suggest benchmarks to measure the facility's impact, such as benefits to patients, families, and the community at large.

## **SCHEDULE OF EVENTS:**

Release Date: Sunday, January 21, 2024

Deadline for Questions by 5 p.m.: Thursday, February 8, 2024

Due Date: Thursday February 15, 2024

## **SUBMISSION INFORMATION:**

Interested parties are encouraged to submit their insights and recommendations via email to [acook@cityofclovis.org](mailto:acook@cityofclovis.org) by **Thursday, February 15, 2024 at 10:00 A.M.** Submissions should include the following:

1. Contact Information: Name, organization, title, email address, and phone number.
2. Expertise: Brief description of the organization's experience in the behavioral health field.
3. Insights: Detailed responses to the key areas of inquiry outlined above.
4. Collaboration Interest: Explanation of interest in participating in subsequent phases of the procurement process.

## **CONCLUSION:**

These insights will play a critical role in ensuring the successful development of a Crisis Triage Center that addresses the pressing behavioral health care needs of the eastern New Mexico communities.

Please contact Amanda Cook, CPO at (575) 763-9634 with any further questions or concerns.

Thank you for your participation.