

Attachment A

Proposal Cover Sheet

(Must precede all pages submitted with Proposal)

Date Received _____

STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES (DMHAS)

Name of RFP Super Storm Sandy Initiatives-Supportive Housing-Substance Use Disorder

Incorporated Name of Applicant: Collaborative Support Programs of New Jersey, Inc.

Type: 501 (c)(3)

Public _____ Profit _____ Non-Profit x or Hospital-Based _____

Federal ID Number: [REDACTED] Charities Reg. Number [REDACTED]

Address of Applicant: 11 Spring Street, Freehold, NJ 07728

Contact (name/title): Mark Duffy, Dir. of Operations Phone No.: 732-780-1175

Email mduffy@cspnj.org

Fax [REDACTED]

Total dollar amount requested: n/a Fiscal Year End: June 30

Funding Period: From July 1, 2013 to June 30, 2014

Total number of unduplicated clients to be served: 10

County in which housing and services are to be provided Hudson County

Authorization: Chief Executive Officer: Jody Silver
(Please print)

Signature: Jody Silver Date: March 31, 2014

Collaborative Support Programs of New Jersey, Inc. (CSPNJ) is responding to the New Jersey Division of Mental Health and Addiction Services (DMHAS) REQUEST for PROPOSALS FOR SUPER STORM SANDY RECOVERY AND REBUILDING INITIATIVES FOR SUPPORTIVE HOUSING FOR INDIVIDUALS WITH A SUBSTANCE USE DISORDER.

CSPNJ is proposing to assist a minimum of ten adults who are at least 18 years of age and that have a diagnosis of a substance use disorder in Hudson County, one of the identified counties affected by Super Storm Sandy between October 28, 2012 and October 30, 2012. CSPNJ intends to assist these individuals in securing permanent housing by supporting them in their recovery journeys toward increased self-sufficiency. This initiative would provide tenants access to wraparound services and subsidized housing on a temporary basis up to September 30, 2015. CSPNJ will explore supportive services and housing assistance options to assist these individuals to become more self-sufficient so they can move towards a goal of maintaining their own housing. CSPNJ intends to build upon existing services in Hudson County, which primarily serves very low income homeless individuals and mental health consumers who are not served in traditional service systems. This includes persons who are homeless, have mental health issues, substance use disorders, formerly incarcerated persons and individuals in need of health care services, basic necessities and a safe living environment. In the results of the Hudson County sheltered and unsheltered 2013 Point in Time Survey conducted on January 30, 2014, 947 homeless men, women and children were counted according to the U.S. Department of Housing and Urban Development (HUD) methodology. Persons with mental health issues were the largest sub-population in the count at 33%, with 26% reporting substance use issues and 10% with HIV. 30% of the persons counted reported having no income and 33.5% reported having an income of less than \$5,000. 79% reported needing housing, 31% needing emergency food and 30% needing employment assistance.

B. Describe the assessment and screening process.

The assessment and screening process that will be utilized to determine eligibility for housing and services will be as follows:

- The Community Enterprises Corporation (CEC – the housing affiliate of CSPNJ) Housing Department will screen individuals to ensure that they meet the eligibility requirement that they resided within one of the designated counties during Super Storm Sandy from October 28 to October 30, 2012, and are US citizens and/or permanent residents. In addition to our standard housing application, applicants will need to supply documentation of residency for the period of October 28 – 30, 2012, such as a lease, utility bill, letter from a homeless shelter, or notarized statement of residency. Additionally, CEC currently requires a copy of an individual’s birth certificate and social security card to ensure citizenship status. For those with permanent residency status the appropriate Immigration and Naturalization Service Identification will be required. CEC has experience in documenting citizenship status of applicants through our current administration of federal housing funds.
- The Hudson County Self-help Center will be responsible for documenting that candidates have a substance use disorder and would potentially benefit from using these services (that they have the self-direction, capacity and commitment to work toward self-sufficiency). The center will work in partnership with Hudson County agencies, including MASSH (Medical and Social Services for the Homeless) and Kaleidoscope Healthcare, Inc. in Jersey City to document eligibility. CSPNJ will utilize the services of an Addictions Specialist who will perform assessments on all clients who have been preliminarily approved for program participation.

Project staff will engage and outreach to eligible individuals at the time of award notification and will assist individuals with program screening, ID documents and housing application to help them enter

housing quickly. Once in housing individuals can begin work on their Recovery and Wellness Plan including substance use issues, and also their goals and strategies to secure employment income. A plan for permanent housing will be initiated at the onset of participation in the project to include the critical components essential to housing permanency: recovery and treatment; health care; employment; appropriate income benefits and individual choice for housing type and location in the community. This would allow persons who are currently homeless to access permanent housing and career development supports. Individuals would also be able to access other wrap around services at program initiation. CSPNJ would be able to recruit persons from the center, from throughout Hudson County and from throughout the state that lived in one of the Sandy affected counties during the designated storm period.

CSPNJ believes in choice and individual responsibility: we do not coerce tenants into services but attempt to build therapeutic alliances and encourage self-management, where individuals choose strategies for recovery and wellness. We support them in their decisions while helping them to explore their goals and recovery choices and by providing guidance with respect to opportunities and consequences. As it is for most residents of New Jersey, housing tenure is based on compliance with leasing and landlord/tenant responsibilities. CSPNJ service staff supports the clients and housing staff follow federal and state housing policies and regulations. All CSPNJ/ CEC supportive housing is leased based.

C. Identify the maximum number of individuals that the provider can serve.

The maximum number that will be provided services will be 10 individuals. Individuals will be served on a first come, first served basis. The program will accept referral from anyone who meets the program criteria stated in this RFP, and work closely with the individuals and referral sources to ensure they are provided equal opportunity to be served by this initiative. Individuals who have completed long term residential, halfway house treatment in a DHS licensed substance abuse facility or those who are homeless or at risk of homelessness will be prioritized for award.

D. Describe how staffing and services will be phased in.

Staffing and services will be phased in during a startup period. CSPNJ will hire an experienced member of the self-help center part-time as a support worker /coordinator, and initially rely on existing program staff to take additional responsibility in recruiting, screening and assessing potential program clients (staff will be compensated separately for the additional working hours through this proposal). Existing supported employment and housing locator staff will begin building upon relationships in the community. Fiscal staff will also be engaged to coordinate billing. As well as the newly hired support worker/coordinator, CSPNJ will rely initially on the self-help center manager, the peer wellness coordinator, the director of community outreach, and Hudson County Self-help Center facilitators for program coordination and recruitment. An Addictions Specialist consultant will be engaged at project inception to assess and assist in coordinating substance use service need. This individual will also train staff in substance use treatment. CEC housing staff will be utilized from the beginning in screening potential tenants to ensure they meet program requirements. As clients are identified and pass the screening process, CSPNJ will bring the new staff person (support worker/coordinator) on full time. After the initial 4 persons are identified and clients are rapidly housed, CSPNJ will hire a .5 support worker to assist clients in move-in and also provide ongoing support.

The Hudson County Self-help Center has a number of volunteers and facilitators who have worked in the existing housing project and have expressed willingness to work from a few hours per week to full time in this effort. The center has gained significant experience in the past year in identifying, documenting, and rapidly housing individuals. It is anticipated that clients will view the chance of being

rapidly housed for a short period as an opportunity that will get them out of an existing inadequate housing placement (homeless, motel etc.) so we will be able to fully staff the program by the end of the first month. CSPNJ will provide 24/7 on-call/on duty staffing coverage for this program.

The existing onsite identified positions for this project are currently staffed. The 880 Peer Homeless Services Team is comprised of three staff: Self-help Center Manager Pam Baker, Peer Wellness Coordinator Randee Lesser, and the 880 Homeless Services Peer Mentor Sam Clark. This team will coordinate initial activity and phase in and oversee/support program operations throughout the project.

E. Describe the engagement and integration process.

CSPNJ will use the Hudson County Self-help Center as the site for engaging clients into the services. This is a peer run self-help center that offers a menu of services and supports including substance use self-help groups and other Substance Abuse supports. The center has a safe, welcoming atmosphere with a low threshold of requirements. Members staff the center, plan activities and conduct groups, and participate as they choose. Program candidates will be welcomed and integrated into all center activities and become members of the CSPNJ community (if they are not already). The center has a van for local transportation; an additional vehicle will be leased for the length of the project for staff travel and client program travel.

A Personal Medicine and strength based Psychiatric Rehabilitation approach will be used to meet the needs of this population. CSPNJ will also employ a “Harm Reduction” approach. By using a model of support based upon principles of Personal Medicine, Psychiatric Rehabilitation and Harm Reduction, the services offered will focus on the development of skills and supports that promote wellness, recovery and resiliency; including community integration, illness management, socialization, work readiness and employment, peer support and skills and opportunities that foster increased personal responsibility and self-direction.

The Personal Medicine approach developed by Pat Deegan PhD. through Common Ground is described as “what we *do* to be well. It's the things that put a smile on our face and that make life meaningful. Personal Medicine is also the smaller things we do to take care of ourselves and to manage our distress.” For example, Personal Medicine could be working out with weights to manage anger or going to AA meetings to stay sober. Personal Medicine is active, not passive. It is:

- The things that give my life meaning and purpose and that put a smile on my face
- The things I do that help make me well
- The things I do that help me remain in the community, gain and retain employment, maintain custody of my children, develop and improve health and wellness habits, etc.

Psychiatric Rehabilitation (Psych Rehab) is the process of restoration of community functioning and well-being of an individual diagnosed with a mental disorder that is considered to have a psychiatric disability. Psych Rehab promotes recovery, full community integration and improved quality of life. The focus is on helping individuals develop skills and access resources needed to increase their capacity to be successful and satisfied in the living, working, learning, and social environments of their choice. While these individuals will not have serious mental illness diagnosis many of the tenets and practices of Psych Rehab will be applicable to meeting their needs.

Harm reduction interventions view the participant as capable of taking a greater degree of control in their own lives. Harm Reduction is based upon four principles:

- 1) While absolute abstinence may be preferable for many or most substance abusers, very few will achieve it, and even that small group will take time to do so and may relapse periodically;
- 2) Ordinary medical treatment readily accepts and practices ameliorative therapies, which preserve health and well-being even when people fail to observe all recommended health behaviors;
- 3) Therapists should present accurate information to clients and may even express their own beliefs, but they cannot make judgments for clients;
- 4) There are many shades of improvement in every kind of therapy – this improvement may be all that people are capable of and should be encouraged and nurtured.

The collaborative nature of these approaches that mix guidance with self-direction, wellness orientation, risk taking , hope, community integration and using a balance of personal medicine along with medical drug treatment (when appropriate) lead to a model of care that develops a true therapeutic relationship based upon best and promising practices.

F. Describe how you will provide employment assistance and career linkages.

CSPNJ shall promote the client’s recovery to his or her fullest potential. The agency will conduct assessments of skills, including literacy. CSPNJ will provide educational opportunities (GED, certification program, job readiness skills, vocational training, employment placement and retention and career development). Through our northern regional support service office (Clifton, Passaic County) we have the ability to assist these clients in accessing career services such as supported employment and financial services (budgeting and financial literacy) which both assist clients in achieving self-sufficiency and transition from this program’s time limited rental assistance.

CSPNJ currently operates a supported employment (SE) program using the Individual Placement and Support model (IPS). Staff time funded under this initiative would be added to the SE team to work on this project. CSPNJ has achieved high fidelity to this model, which is the evidence based practice supported by SAMHSA. IPS is based on 8 principles, all of which CSPNJ adheres to. Those principles include a focus on competitive employment, eligibility based on client choice (zero exclusion), integration of services, attention to client preferences, personalized benefits counseling, rapid job search, systematic job development, and time unlimited & individualized supports.

The supported employment program at CSPNJ aims to assist individuals in obtaining real employment in the mainstream labor market, rather than sheltered or enclave work. The team operates under a zero exclusion policy, meaning that anyone interested in supported employment services is eligible. Potential clients are not excluded from services on the basis of readiness, employment history, symptoms, legal involvement, or substance abuse. Supported employment staff work closely with other CSPNJ staff to collaborate on service provision and offer seamless support. It is typical for clients to engage in rapid job search, and most have had employer contact within 30 days of program entry. Supported employment staff engages in rigorous job development in the community in order to build a network of employer relationships that will benefit clients in the program. Once employed, individuals in the supported employment program have access to individualized follow along supports for as long as they need or desire them. CSPNJ would initially use existing regional resources, and would enhance those resources if additional funding became available.

CSPNJ has the capacity to build upon existing career services within CSPNJ’s northern region of the state. If awarded funding CSPNJ would initiate supported employment and financial support services, including establishing partnerships with local Hudson County employment and educational organizations. If an additional RFP was developed CSPNJ would apply to enhance those services

including supported education and offer them within the Hudson County Self-help Center or at an adjacent setting making service delivery more efficient.

G. Indicate your ability to provide housing that is accessible.

CSPNJ has seasoned housing location staff on the Northern Support Services team located in Clifton. The housing locator would work with the Sandy team in housing search for accessible units that meet ADA requirements when/if this becomes necessary. The center also has gained experience locating and leasing housing in Hudson County and has established relationships with local realtors over the past year. Throughout New Jersey, CSPNJ/CEC has accessible housing mixed through its housing stock and has multiple relationships with realtors and landlords allowing a strong possibility of locating accessible housing that would meet individuals needs.

H. Describe and demonstrate a detailed emergency response plan.

CSPNJ will integrate the center staff with the existing support services offered by our northern regional team out of Clifton. The team will offer enhanced on call 24/7 services for persons either experiencing psychiatric or medical emergencies or any other issues considered an emergency by the program coordinator. Staff will be provided cell phones for quick response to clients in need. Clients will be provided an existing answering service number for off hour or emergency staff notification of a problem. This on-call emergency service is already in place for existing residents in the region. The service will be enhanced to include program residents and integrated with program staff who will take some responsibility for weekend and/or night on call/on duty coverage. New staff will be trained in assessing risk and safety, handling emergencies, coordinating with medical, mental health, law enforcement, and other professionals and implementing health and safety procedures.

Experienced supportive housing staff will consult with center staff on an as needed basis for guidance and support. It is CSPNJ policy that staff respond in person after consulting with senior backup staff to insure staff safety. On-call staff is available to respond in case of an emergency. If it is an immediate emergency, staff will encourage the tenant to call 911 or may call on their behalf. Staff is trained in assessing risk when it comes to the safety of minor children, older adults and individuals who may be a danger to self or others. CSPNJ mandates reporting and linkage in such cases to DYFS, Adult Protective Services or the County Screening Center. In the case of fire or other disaster CSPNJ staff are accessible to offer assistance. CSPNJ staff can also arrange for a temporary alternate living option in case of fire or other emergency that renders a dwelling unlivable. CSPNJ's Emergency Plan requires staff to assist residents to plan in advance for any expected emergency such as a hurricane. Staff recommends and works with tenants to follow the FEMA emergency guidelines. In addition, staff also works with residents to register them for any county disaster special needs program that is available.

I. Describe the full range of recovery and support services.

CSPNJ provides a menu of supports to persons in supportive housing. All services are directed by the resident through their Individual Service Plan (ISP) which is jointly constructed by the support worker and the resident under the resident's direction. These services include assisting residents with financial services for budgeting, savings and economic literacy, assisting persons with wellness and health related activity, supported employment, benefit coordination and assistance with ADLs.

Supports include providing information about and referrals to community resources available for consumers of substance use and mental health services in Hudson County. Particular emphasis is placed on linking supportive housing tenants to community services such as: medical care and dental services, legal services, public library, Food Bank, financial services, local colleges, education, Community Work

Experience Program (CWEP), employment and language programs, recreational programs, parks and places for spiritual enrichment.

The Hudson County Self-help Center posts current information regarding community resources such as Narcotics Anonymous Meetings, soup kitchens, AA Meetings, Mobile Healthcare services, Detox and Addiction Recovery Services, and Family Planning Services. The center also provides clothing, shoes, and winter attire distribution to many individuals especially those who are homeless or transient.

The center offers computer use and Wi-Fi access to enable members to research rehabilitation options available to them. Many members also use the computers to file and collect unemployment benefits, and to search for and complete online employment applications as well as housing search. As in many centers, computers are also used to communicate with family members, spouses, partners, and/or friends incarcerated in the Hudson County Jail and prison.

The center provides transportation on an as-needed basis for center activities and member's services, including trips to Trenton to secure Identification documents. Transportation services may be provided to assist member with access to mental health treatment programs, health care and activities such as meetings, shopping, and appointments for services. CSPNJ will assist tenants in accessing public transportation. The agency when possible will also make transportation available when there is no public transportation.

The center provides a variety of services including: self-help groups, wellness and recovery education, socialization and recreation activities. These services enhance mental health consumers' ability to live productively in the community through improving community living skills and by building community relations.

Many homeless individuals are denied basic services due to lack of identification documents. In addition to assisting individual to obtain ID documents, the Team also refers individuals to shelters almost on a daily basis and also refers individuals to rapid rehousing services. These housing related activities are in addition to the ongoing support provided to 15 persons who have been placed in permanent supportive housing with rental assistance vouchers through the United Way of Hudson County. For some of the 15 residents, services include substance use treatment.

CSPNJ's peer operated Self-help Center in Hudson County focuses on a recovery and wellness model which promotes individually driven services.

The center has become a "safe haven" and place where they can go to get off the streets or out of substandard housing, to receive services, volunteer, work, socialize and rest. CSPNJ employs and utilizes the skills of people who have been diagnosed as having a serious mental illness and/or substance use issues and who may have experienced homelessness themselves. The center provides part time employment and stipends to 12 members under the supervision of the Center Manager, as well as the Homeless Services Coordinator. The stipend positions include center facilitators who open and close the center, receptionists, van drivers and outreach and engagement mentors. The agency meets the needs of a diverse group of individuals, besides people with serious mental illness; including persons who are chronically homeless, have substance abuse issues, formerly incarcerated persons, those with co-occurring physical health issues, developmental and, or behaviors resulting from lengthy periods of institutionalization. Additionally, CSPNJ has a track record of working together as partners with the

professional community to improve community based treatment and services for persons who are vulnerable and at risk of hospitalization.

J. State and justify specific client outcomes related to successful tenancy.

The Quality Improvement Department will assist in the tracking of established program outcomes and will track high risk, problem prone and/or high volume processes. This is done to insure successful program implementation. We will also track those denied for program entry and also those individuals that don't follow through on their applications for residency.

CSPNJ understands the program will be monitored by DMHAS and potentially federal monitors. CSPNJ has over 20 years of working with state and federal program monitors to ensure program and fiscal fidelity for our services and housing agency. The CSPNJ Corporate Compliance office will assist in the development of policies and procedures, conduct a risk assessment and audit program implementation to insure compliance with regulatory and licensing bodies.

CSPNJ has continually enhanced its supportive housing program with educational opportunities, supported employment initiatives, financial support services and the adoption of a recovery and wellness culture throughout the agency. We are the largest peer employer in New Jersey and one of the largest in the country. CSPNJ encourages service recipients to become increasingly self-sufficient and believe that "If you can work, you should work". Although our housing is permanent we encourage people who can to move on and become self-supporting.

Outcome Measurement Framework: Promoting Housing and Economic Self-Sufficiency for Sandy Survivors (Mission: To assist Super Storm Sandy Survivors with substance use disorders become housed and financially self-sufficient through the delivery of supported housing, financial and wellness services)

Outcomes	Activities/Outputs	Capacity	Data Source
Participation in CSPNJ services will elicit the following outcomes:	Intake Assessment and Service Plan: The program coordinator completes an intake assessment and service plan with each person meeting program eligibility criteria within 5 days of program admission. The service plan identifies specific actions to address housing, substance use, employment, financial literacy, and community integration.	Skilled, trained staff in recovery from substance abuse disorders. Staff are available on-call to provide 24/7 support.	Progress is tracked through these sources:
Stably Housed: Participants become stably housed in lease-based housing within 60 days of program enrollment	<ul style="list-style-type: none"> ▪ Support worker assists participant in identifying affordable lease-based housing opportunities in community of choice. ▪ Support worker facilitates housing process with participant from locating housing through lease up and move-in. 	<ul style="list-style-type: none"> ▪ Existing relationships with housing providers in Sandy affected counties ▪ Experienced in property management, locating housing, managing housing subsidies, vouchers ▪ CSP owns a 4 bedroom apt. for use as transitional housing/sober house 	Existing Database Systems: <ul style="list-style-type: none"> ▪ Foothold ▪ SHOUT

<p>Substance Abuse Recovery: Participants attend a community-based substance abuse program within 7 days of program enrollment</p>	<ul style="list-style-type: none"> ▪ Support worker provides participant with community-based SA recovery program options, and information on harm reduction. ▪ CSP's on-site substance abuse counselor meets weekly with each participant. ▪ 12-step groups are provided on-site at CSP's Learning Recovery and Wellness Center (Alcoholics Anonymous, Narcotics Anonymous, Nicotine Anonymous). ▪ The center offers on-site and off-site sober recreation opportunities to support healthy socialization and recovery. 	<ul style="list-style-type: none"> ▪ CSPNJ has over 25 years of experience in peer-operated self-help centers. ▪ The Learning and Recovery Center has established relationships with SA referral network in Sandy-affected counties 	<p>Existing Database Systems:</p> <ul style="list-style-type: none"> ▪ Foothold ▪ SHOUT
<p>Wellness: Participants identify a wellness goal and create a plan to achieve the goal within 14 days of program enrollment.</p>	<p>Support worker helps participants identify personal wellness goals based on Personal Medicine and SAMHSA's 8 Dimensions of Wellness models.</p>	<ul style="list-style-type: none"> ▪ Skilled wellness and recovery trainers and support service providers 	<p>Existing Database System:</p> <ul style="list-style-type: none"> ▪ Foothold
<p>Financial Literacy: Participants develop a budget and debt reduction and savings plan within 30 days of program enrollment</p>	<p>Support worker completes a financial assessment and budget with each person served. The financial assessment includes an evaluation of debts, assets, source of income, entitlements, and credit score. The budget identifies a plan to meet routine expenses, pay down debt, and establish savings.</p>	<ul style="list-style-type: none"> ▪ Experienced Financial Services staff and cross-trained Support Services staff 	<p>Existing Database Systems:</p> <ul style="list-style-type: none"> ▪ Foothold ▪ SHOUT
<p>Job Placement: Unemployment participants become competitively employed within 180 days of program enrollment</p>	<ul style="list-style-type: none"> ▪ Support worker completes an employment assessment with each person served, based on IPS Supported Employment rapid job search model. ▪ Support workers teach resume writing, job search, job interview skills and help participants navigate public transportation to get to interviews and workplaces. 	<ul style="list-style-type: none"> ▪ Experienced Supported Employment staff trained in Dartmouth's IPS SE model 	<p>Existing Database Systems:</p> <ul style="list-style-type: none"> ▪ Foothold ▪ SHOUT
<p>Transportation: Participants will learn the public transportation system to access work, health and social services, community resources within 30 days of program enrollment</p>	<ul style="list-style-type: none"> ▪ Support worker identifies destination points of interest with each person served, including medical, dental, mental health, social services offices, public libraries, post offices and business districts for shopping. ▪ Support worker accompanies people served on their selected transportation routes to teach transportation navigation skills. 	<ul style="list-style-type: none"> ▪ Skilled in teaching public transportation navigation skills. ▪ Agency vehicles also available. 	<p>Existing Database System:</p> <ul style="list-style-type: none"> ▪ Foothold

K. Describe your policies which prohibit discrimination against clients of substance abuse prevention, treatment and/or recovery support services.

While CSPNJ does not have a specific policy that says we don't discriminate against clients of substance abuse prevention, treatment and/or recovery support services, it is not one of our exclusionary criteria for any program. CSPNJ does not exclude anyone from services for the treatment they require/prefer unless they require 24 hour nursing service or are an imminent danger to themselves or others, as we are not staffed to provide these services.

CSPNJ believes primarily in client choice when it comes to treatment. While we believe that a person should not be forced to take medication and should take the least amount needed, we also believe that medication can be necessary for an individual to continue on their recovery journey whether it is recovery from substance dependence or mental distress.

CSPNJ can assist in monitoring a person's medication when it is helpful to the person's recovery and it is agreed to in their Individual Service Plan (ISP). CSPNJ supports individual's relationship with their medical provider and encourages service recipients to choose professionals with whom they can develop a partnership, so their thoughts, fears, hopes and dreams can be expressed in order for their individual treatment to be optimized. Particularly if a client is pursuing or receiving Medication Assisted Treatment (MAT), CSPNJ will support the individuals' choice of taking Methadone, Suboxone, or injectable naltrexone and monitor their medication use. The Hudson County Self-help Center assists interested members in securing addiction treatment of choice. They do not provide the Medication Assisted Treatment on site, but will refer to Addiction Recovery Services (ARS), and assist with transportation to begin/sustain desired addiction services.

L. Describe your agency's ability to affirmatively link individuals to primary care practitioners.

For members who do not have a primary care physician, the center refers people to a Federally Qualified Health Center – Metropolitan Family Health Network which is located on Bergen Avenue, right across the street from the center. Metropolitan provides medical and dental care as well as prenatal services. Metropolitan Family Health Care also has a Healthcare for the Homeless Program, to which we frequently link our members for assistance. Metropolitan also assists individuals who have no insurance to apply for insurance through the Affordable Care Act.

Roughly 90% of the consumers served by CSPNJ support services are connected to primary care practitioners. Beginning at intake, staff obtains a medical history including any current or past primary care providers. If needed, staff assists with healthcare linkages, appointment setting and transportation arrangements. CSPNJ believes in prevention and discourages service recipients from overuse of emergency services. CSPNJ has demonstrated clear success at connecting individuals to primary care in its Supportive Housing Programs. Staff also encourages tenants to participate in preventive health care.

M. Describe how the agency will collaborate with the local board of social services.

Hudson County Self-help Center has an ongoing relationship with Hudson County and providers that attend the Continuum of Care meetings. Our center manager Pam Baker sits as board member on the County's Executive Board Hudson County Alliance to End Homelessness (HCAEH), and is knowledgeable in Hudson County social services and systems.

The center also receives CWEP (Community Work Experience Program) volunteers through the Welfare Department who work at the center facilitating, cooking, cleaning and assisting in daily activities. The center will continue to work closely with the Hudson County Board of Social Services in partnering on services, recruitment of program participants and working on the sustainability of program participants' housing and income.

The center also has a peer facilitator who works as an advocate with consumers who need help in navigating the local Social Security Office and Welfare. The center has ongoing collaborations with the Community Health Law Project, which is a statewide nonprofit advocacy and legal services organization

that we refer to daily, in addition to the two days a month of outreach done by them in our center. The center collaborates with the Jersey City Medical Center, which includes outpatient services, Intensive Outpatient Programs (IOP) as well as The Ryan White Program (HIV services) and MASSH, which is the mental healthcare program for the homeless population. Kaleidoscope Healthcare has outpatient substance abuse services such as the methadone program, as well as mental health services on site. Bridgeway Crisis Intervention Services provides crisis intervention and support services for up to 30 days on site and creates proper linkage to available resources if needed and available for clients. Mount Carmel Guild also provides mental healthcare services for a long term period when needed. The center also works with Dress for Success in helping clients obtain clothing needs for job interviews.

N. Describe how the provider agency will conduct medication monitoring and ensure the necessary blood work is completed.

We will have an open and communicative relationship with the client's primary care physician. We have a great working relationship with Metropolitan Healthcare that includes: any necessary blood work that the client will need, weekly conversations about patient services and needs of a particular client we are working together with. CSPNJ can assist in filling prescriptions with our collaboration with a local pharmacy. Staff will not dispense medication to participants, but will track individual's medications, ask about any side effects and monitor if participants are taking medications as prescribed, as well as schedule appointments and make referrals. Staff will act as a liaison between participants, pharmacists and primary care physicians to support participant's medication monitoring.

Medication monitoring will be assisted through the use of WRAP (Wellness Recovery Action Planning) to assist individuals with providing a vehicle to be partners in their own care.

O. Provide a brief description of the housing models that will be made available.

CSPNJ follows a housing first scattered site model of supportive housing. Whenever possible, clients are key contributors to the type and location of their housing. Clients who have emergency housing needs, such as those who are homeless are individuals we see as using this option.

Community housing will primarily consist of 1 and 2 bedroom apartments. The Jersey City area has many multifamily and apartment buildings which have proved in the last year to be appropriate for center clients that have been housed through our existing 880 program. CSPNJ housing location staff from the CSPNJ Clifton office will provide ongoing support and guidance in locating appropriate housing.

All housing proposed in this initiative will provide private bedrooms, reasonably comfortable shared living space, and adequate kitchen and bathroom facilities (as is the case for all CSPNJ/CEC housing). Clients will be charged no more than 30% of their income for rent.

CSPNJ recognized the importance of separating services and housing twenty years ago when we created Community Enterprise Corporation (CEC), an independent but affiliated corporation to handle housing development landlord responsibility, leasing, renting and property management. Together, we have considerable experience in managing rental units, providing subsidies, locating housing and working collaboratively with landlords and tenants. CSPNJ/CEC has a strong working relationship with the DMHAS's housing office and subsidy program, and understands the required procedures and necessary documentation. CSPNJ and separately CEC are certified by HUD as Housing Agencies: we administer

federal vouchers such as Shelter Plus Care and have experience complying with HUD housing standards.

P. Provide the municipality and county where housing will be located.

The housing will be located primarily in Jersey City, Hudson County.

Q. Specify the process through which potential program participants would be identified and recruited into the program. Describe your inclusionary and exclusionary criteria for client selection.

There will be several methods of making people aware of the housing opportunity and recruiting them into the program:

- I. The Peer Wellness Coordinator will inform all members of their community of the existence of the service and will hold forums both within the center and throughout the community informing persons of the opportunity, the criteria for admission and the temporary nature of the subsidies.
- II. The Center Manager will ask to speak at the County's Continuum of Care Meeting.
- III. The Center Manager will ask to speak at all Hudson County's substance abuse agencies, including all Sandy Relief agencies, as well as all county shelters.
- IV. All Self-help as well as Recovery Centers across the state will be provided with a flyer describing the service.

CSPNJ will accept all referred persons coming to the program as long as they voluntarily apply, agree to sign a lease and meet program criteria set by the state. If people are noticeably intoxicated or under the influence during the application process they will be requested to come back when they are sober.

R. Describe your organization's plan to address client's substance abuse issues, drug and alcohol relapse prevention or harm reduction strategies.

The program will be based at the Hudson County Self-help Center but will work with individuals in the community. The offered menu of substance abuse service support will consist of self-help groups including AA/NA, recreation and socialization at the center including a weekly night out in the community of movies, bowling etc. to build community and enhance relationship with staff. The Center will hire a part-time (10 hours per week) Addiction Specialist who besides being involved in initial program assessment will divide his/her time between assisting clients directly who are experiencing alcohol/drug related issues or distress, and consulting with staff providing information and practices for successful interventions.

Staff will mix guidance with self-direction, wellness orientation, risk taking, hope, community integration and using a balance of personal medicine along with medical drug treatment (when appropriate) leading to a model of care that develops a true therapeutic relationship based upon best and promising practices.

CSPNJ will provide transportation to encourage members to participate in the many programs available through the county. Participants will also be offered the opportunity to obtain inpatient or outpatient detox and rehabilitation services when available from facilities such as Bergen Regional and Jersey City Medical Center for inpatient Detox, Kaleidoscope for outpatient Methadone services, Integrity House and Odyssey house for inpatient services if needed.

Through the CSPNJ Wellness and Recovery Institute, program staff will be trained not only in principles of Recovery and Wellness but also service coordination and skills building in the areas of: medication self-management, rehabilitation, relapse prevention and personal assistance. Additionally staff that has been trained in public benefit acquisition will be on tap to provide both training and support to program staff. All these services will be available to program participants as well as linkages and /or referrals to appropriate providers to comprehensively address the client's physical and behavioral health needs.

S. How will your organization support clients in attaining the daily living skills necessary to live integrated lives in the community?

CSPNJ believes in Recovery and Wellness. CSPNJ supports persons in their recovery journeys and believes that assisting an individual in increasing their self-direction and self-sufficiency are key to successful community integration, recovery and wellness. This will be further emphasized in this program as the candidates will have less than 16 months to accrue the resources to become self-sufficient, so that message will be conveyed to staff as well as tenants from the outset.

CSPNJ will assist person in gaining ADLs in vivo by working alongside clients in cleaning, cooking, preparing budgets, writing shopping lists, grocery shopping, procuring transportation etc. The center also has or will develop self-help groups/ trainings that will assist clients adapt to managing their own households such as: healthy cooking, hygiene, clothes washing etc. CSPNJ will also assist with landlord and neighbor liaison, clients acquiring IDs, teaching clients to use public transportation, budgeting assistance and financial literacy.

T. Demonstrate how your organization will integrate the following principles into service delivery.

- I. Promotion of wellness and recovery (grounded in SAMHSA's 8 Dimensions of Wellness)
- II. Promotion of Community integration
- III. Culturally competent and linguistically accessible services
- IV. Demonstration of best practices

CSPNJ/CEC will follow all principles of supportive housing that prohibit removal due to lack of service participation, hospital admission or incarceration and that preservation of housing is primary and recognized as essential to overall wellness and recovery. CSPNJ follows a model of support that includes the 8 dimensions of wellness with a person's environment seen as extremely important for their overall wellness and recovery.

Wellness and recovery are integral to client centered CSPNJ supportive services programs. During the admission process clients are introduced to a range of wellness and recovery tools that include Illness Management and Recovery (IMR), Wellness Recovery Action Planning (WRAP), Crisis Planning and Supported Employment. The tenets of supportive housing will be introduced. These Best Practice Services will be offered to clients who are interested. CSPNJ sees recovery as a deeply personal and unique process of changing one's attitudes, values, feelings, goals, skills and/or roles. Recovery is a way of living a satisfying and hopeful life even with limitations caused by an illness, trauma, addiction or disability.

Menu of Recovery and Wellness Services:

We embrace the idea of overall wellness. The services offered are based on the eight dimensions of wellness listed below. Because the dimensions are so inter-connected, many of these examples could fit into more than one category. Here are some examples of how we can help consumers:

1. Physical Wellness

Learning to access and use medical and dental care, including recommended preventive screenings; Organizing medical appointments, bills, and insurance records; Developing skills for adequate personal care; Handling medical emergencies; Shopping for and preparing balanced meals; Developing sleep hygiene skills; Reducing/eliminating use of alcohol, tobacco, other drugs of abuse; joining a fitness program or facility; Finding and joining community and/or support groups for health and addiction conditions;

2. Environmental Wellness

Keeping your home clean and safe, including making/requesting needed repairs; Making your home a comfortable and attractive place to live; Learning about options for moving on from your current residence, including ways to move from renting to homeownership.

3. Financial Wellness

Personal budgeting; Making wise financial decisions; Paying bills, and developing the skills for independent banking and money handling; Managing benefits and reducing your dependence on public benefits; Resolving prior debts, clearing credit record, and obtaining loans/credit cards; Starting a savings program; Paying taxes.

4. Spiritual Wellness

Locating a congregation or faith-based community of your choice; Choosing and following activities that bring meaning and purpose.

5. Social Wellness and Community Integration

Dealing with house-mate/neighbor issues; Reuniting with family, resuming parenting or visitation; Building and maintaining friendships; Registering to vote; Restoring driver's license and/or buying a car; Understanding your legal rights, etc.

6. Occupational Wellness

Choosing, getting, and keeping a part-time or full-time job; Getting involved in community volunteer activities; Exploring your career goals; Connecting with CSPNJ Supported Employment; Linking with certified benefits planners and financial resources; Locating a job/career match that fits your preferences, choices, and abilities; Writing or updating your resume and applying for a job; Using a computer to do a job search.

7. Intellectual Wellness

Getting back to school, including GED, college, and trade/technical schooling; Getting/becoming comfortable using a computer; Learning new skills, or hobbies; Finding a group of people who share your intellectual interests.

8. Mental/Emotional Wellness

Finding the right mental health/addiction treatment services; Linking to or providing education programs such as Illness Management and Recovery Education; Establishing an advance directive for mental health care; Locating and accessing peer support groups for addictions.

CSPNJ will engage and design individual services geared to a persons' cultural or linguistic needs as is the case throughout the programs.

U. Describe your experience and success in providing supportive services to, and/or development of housing opportunities for, clients with substance use disorders in the community.

The Hudson County Self-help Center is a unique mental health peer operated service in Hudson County that provides counseling, outreach and engagement services. The center is staffed by a fulltime Center Manager and the Peer Wellness Coordinator, a part-time Peer Mentor and peer facilitators and volunteer consumers. The Peer Wellness Coordinator works with the Center Manager and peer facilitators to provide outreach and engagement services to assist homeless persons to obtain identification documents and needed community services. The membership of the center includes a significant number of persons

with histories of mental illness, addictions and homelessness. In response to the need for a safe place to find shelter, food and supports, the center has initiated programming to expand its community outreach. This center, which serves 96 persons daily, partners with various community providers in offering a menu of supports. Members of the team providing services are fully trained by CSPNJ in HMIS and Wellness and Recovery planning and services. Services provided by the team are guided by the CSPNJ Wellness and Recovery model, including person centered Recovery and Wellness Plans to achieve goals and develop strategies to self-manage illness and recovery. The Center Manager and staff actively participate in the Hudson County Continuum of Care where information is shared including outreach to community homeless service providers and partnerships with other homeless providers. Starting in 2013, the 880 Peer Homeless Services Team identified and moved 15 individuals into permanent supportive housing in partnership with the United Way of Hudson County. If these temporary funds are awarded to CSPNJ it will allow us to build upon the housing service model implemented in 2013.

CSPNJ/CEC's Supportive Housing Model practices separation between housing and services, with CEC assuming the role of the housing provider and CSPNJ assuming the role of the supportive services provider. This model meets or exceeds the key principles of supportive housing and these will be followed for this initiative:

- All housing will be leased based or there will be an occupancy agreement with the protection of New Jersey's landlord/tenant laws.
- Leases will be held in the name of the tenant.
- Housing will promote community inclusion, normalization and independence.
- Services will be available yet provided in a flexible, individualized manner.
- Services will be available, but not mandated as a stipulation to maintain housing with service providers actively seeking engagement and relationship building and strengthening, especially during times when the client may be ambivalent or reluctant.

The Hudson County Self-help Center has a long history of supporting people with substance use addictions and serving this population, integrating service supports for them into the programming the center provides. The center operates multiple Substance Abuse support programs and linkages. The center is well integrated into the Hudson County Addictions and homelessness service communities. CSPNJ will coordinate all support services directly with appropriate DMHAS licensed providers as well as others located within Hudson County.

Through its supported housing program and self-help centers, CSPNJ either directly or indirectly has assisted persons with substance use disorders especially those with a dual diagnosis (Mental Illness and Substance Abuse) for over 25 years.

Attachment B

STATE OF NEW JERSEY DEPARTMENT OF HUMAN SERVICES

Addendum to Request for Proposal For Social Service and Training Contracts

Executive Order No. 189 establishes the expected standard of responsibility for all parties that enter into a contract with the State of New Jersey. All such parties must meet a standard of responsibility that assures the State and its citizens that such parties will compete and perform honestly in their dealings with the State and avoid conflicts of interest.

As used in this document, "provider agency" or "provider" means any person, firm, corporation, or other entity or representative or employee thereof that offers or proposes to provide goods or services to or performs any contract for the Department of Human Services.

In compliance with Paragraph 3 of Executive Order No. 189, no provider agency shall pay, offer to pay, or agree to pay, either directly or indirectly, any fee, commission, compensation, gift, gratuity, or other thing of value of any kind to any State officer or employee or special State officer or employee, as defined by N.J.S.A. 52:13D-13b and e, in the Department of the Treasury or any other agency with which such provider agency transacts or offers or proposes to transact business, or to any member of the immediate family, as defined by N.J.S.A. 52:13D-13i, of any such officer or employee, or any partnership, firm, or corporation with which they are employed or associated, or in which such officer or employee has an interest within the meaning of N.J.S.A. 52:13D-13g.

The solicitation of any fee, commission, compensation, gift, gratuity or other thing of value by any State officer or employee or special State officer or employee from any provider agency shall be reported in writing forthwith by the provider agency to the Attorney General and the Executive Commission on Ethical Standards.

No provider agency may, directly or indirectly, undertake any private business, commercial or entrepreneurial relationship with, whether or not pursuant to employment, contract or other agreement, express or implied, or sell any interest in such provider agency to, any State officer or employee or special State officer or employee having any duties or responsibilities in connection with the purchase, acquisition or sale of any property or services by or to any State agency or any instrumentality thereof, or with any person, firm or entity with which he is employed or associated or in which he has an interest within the meaning of N.J.S.A. 52:13D-13g. Any relationships subject to this provision shall be reported in writing forthwith to the Executive Commission on Ethical Standards, which may grant a waiver of this restriction upon application of the State officer or employee or special

State officer or employee upon a finding that the present or proposed relationship does not present the potential, actuality or appearance of a conflict of interest.

No provider agency shall influence, or attempt to influence or cause to be influenced, any State officer or employee or special State officer or employee in his official capacity in any manner which might tend to impair the objectivity or independence of judgment of said officer or employee.

No provider agency shall cause or influence, or attempt to cause or influence, any State officer or employee or special State officer or employee to use, or attempt to use, his official position to secure unwarranted privileges or advantages for the provider agency or any other person.

The provisions cited above shall not be construed to prohibit a State officer or employee or special State officer or employee from receiving gifts from or contracting with provider agencies under the same terms and conditions as are offered or made available to members of the general public subject to any guidelines the Executive Commission on Ethical Standards may promulgate.

Attachment C

Department of Human Services

Statement of Assurances

As the duly authorized Chief Executive Officer/Administrator, I am aware that submission to the Department of Human Services of the accompanying application constitutes the creation of a public document that may be made available upon request at the completion of the RFP process. This may include the application, budget, and list of applicants (bidder's list). In addition, I certify that the applicant:

- Has legal authority to apply for the funds made available under the requirements of the RFP, and has the institutional, managerial and financial capacity (including funds sufficient to pay the non Federal/State share of project costs, as appropriate) to ensure proper planning, management and completion of the project described in this application.
- Will give the New Jersey Department of Human Services, or its authorized representatives, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with Generally Accepted Accounting Principles (GAAP). Will give proper notice to the independent auditor that DHS will rely upon the fiscal year end audit report to demonstrate compliance with the terms of the contract.
- Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain. This means that the applicant did not have any involvement in the preparation of the RFI, including development of specifications, requirements, statement of works, or the evaluation of the RFI applications/bids.
- Will comply with all federal and State statutes and regulations relating to non-discrimination. These include but are not limited to: 1) Title VI of the Civil Rights Act of 1964 (P.L. 88-352;34 CFR Part 100) which prohibits discrimination based on race, color or national origin; 2) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794; 34 CFR Part 104), which prohibits discrimination based on handicaps and the Americans with Disabilities Act (ADA), 42 U.S.C. 12101 et seq.; 3) Age Discrimination Act of 1975, as amended (42 U.S.C. 6101 et. seq.; 45 CFR part 90), which prohibits discrimination on the basis of age; 4) P.L. 2975, Chapter 127, of the State of New Jersey (N.J.S.A. 10:5-31 et. seq.) and associated executive orders pertaining to affirmative action and non-discrimination on public contracts; 5) federal Equal Employment Opportunities Act; and 6) Affirmative Action Requirements of PL 1975 c. 127 (NJAC 17:27).

- Will comply with all applicable federal and State laws and regulations.
- Will comply with the Davis-Bacon Act, 40 U.S.C. 276a-276a-5 (29 CFR 5.5) and the New Jersey Prevailing Wage Act, N.J.S.A. 34:11-56.27 et seq. and all regulations pertaining thereto.
- Is in compliance, for all contracts in excess of \$100,000, with the Byrd Anti-Lobbying amendment, incorporated at Title 31 U.S.C. 1352. This certification extends to all lower tier subcontracts as well.
- Has included a statement of explanation regarding any and all involvement in any litigation, criminal or civil.
- Has signed the certification in compliance with federal Executive Orders 12549 and 12689 and State Executive Order 34 and is not presently debarred, proposed for debarment, declared ineligible, or voluntarily excluded. The applicant will have on file signed certifications for all subcontracted funds.
- Understands that this provider agency is an independent, private employer with all the rights and obligations of such, and is not a political subdivision of the Department of Human Services.
- Understands that unresolved monies owed the Department and/or the State of New Jersey may preclude the receipt of this award.

Collaborative Support Programs of NJ

Applicant Organization



Signature:
Chief Executive Officer or Equivalent

March 31, 2014

Date

Jody Silver, Executive Director

Typed Name and Title

Attachment D

PLEASE READ THE ATTACHED INSTRUCTIONS BEFORE SIGNING THIS CERTIFICATION.

THE INSTRUCTIONS ARE AN INTEGRAL PART OF THE CERTIFICATION.

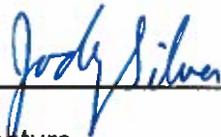
**Certification Regarding Debarment, Suspension, Ineligibility
and Voluntary Exclusion**

Lower Tier Covered Transactions

1. The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by an Federal department, or agency.
2. Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Jody Silver, Executive Director

Name and Title of Authorized Representative



Signature

March 31, 2014

Date

This certification is required by the regulations implementing Executive order 12549, Debarment and Suspension, 29 CFR Part 98, Section 98.510

**Certification Regarding Debarment, Suspension, Ineligibility, and
Voluntary Exclusion
Lower Tier Covered Transactions**

Instructions for Certification

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.
2. The certification in this clause is a material representation of facts upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
3. The prospective lower tier participant shall provide immediate written notice to the person to whom this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.
4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the

certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Non-procurement Programs.

8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

**Assurances for the Super Storm Sandy Initiatives RFP
Supportive Housing – Substance Use Disorder**

1. Collaborative Support Programs of New Jersey, Inc. (CSPNJ) will pursue available resources (e.g. grants, vouchers, rental assistance, etc.) and collaborate with local housing authorities and/or other related housing development entities to develop, expand, and/or enhance housing options for enrolled clients;
2. CSPNJ will keep funding for this initiative segregated from funding for all other initiatives/programs operated by the organization and will have ability to specifically report on the individuals served in this initiative.
3. CSPNJ will work in cooperation with the regional and central offices of DMHAS (including the DMHAS Women’s Coordinator, DMHAS MATI Coordinator), County Drug and Alcohol Directors, Local Advisory Committee on Alcoholism and Drug Abuse (LACADA), and State psychiatric hospitals to identify people to be served, meet data collection requirements, and participate in any standardized affiliation agreements that may be developed.
4. CSPNJ will comply with DMHAS reporting and monitoring requirements specific to this initiative.