

**SALISH BEHAVIORAL HEALTH ADMINISTRATIVE  
SERVICES ORGANIZATION**

**REQUEST FOR PROPOSAL**

**2026-010**

**R.E.A.L. PROGRAM**

**Submission Deadline:**

**April 2, 2026 2:00 P.M.**

**SALISH BH-ASO REQUEST FOR PROPOSAL  
R.E.A.L. PROGRAM SERVICES**

**TABLE OF CONTENTS**

<b>REQUEST FOR PROPOSAL COVER SHEET</b>	<b>1</b>
<b>TABLE OF CONTENTS</b>	<b>2</b>
<b>I. INTRODUCTION</b>	<b>3-5</b>
<b>II. PLANNING SCHEDULE</b>	<b>5</b>
<b>III. APPLICANT ELIGIBILITY</b>	<b>5</b>
<b>IV. PERIOD OF PERFORMANCE</b>	<b>5</b>
<b>V. PROPOSAL SUBMISSION</b>	<b>5-6</b>
<b>VI. PROGRAM ELEMENTS</b>	<b>6-8</b>
<b>VII. REVIEW AND SELECTION CRITERIA</b>	<b>8</b>
<b>VIII. GENERAL PROPOSAL REQUIREMENTS</b>	<b>8-10</b>
<b>IX. ATTACHMENTS List</b>	<b>11</b>
<b>ATTACHMENT A: Proposal Cover Sheet</b>	
<b>ATTACHMENT B: Statement of Work- R.E.A.L. Program</b>	
<b>ATTACHMENT B-1: Recovery Navigator Program Uniform Program Standards</b>	
<b>ATTACHMENT C: Program Data Table</b>	

**SALISH BH-ASO**  
**REQUEST FOR SUMMARY PROPOSAL**  
**R.E.A.L. PROGRAM SERVICES**

**I. INTRODUCTION**

The Salish Behavioral Health Administrative Services Organization (SBH-ASO) is requesting proposals for the provision of R.E.A.L. Program services across Clallam and Kitsap Counties.

R.E.A.L. PROGRAM: *RECOVERY.EMPOWERMENT.ADVOCACY.LINKAGE*

Each R.E.A.L. Program team provides full R.E.A.L. team services in accordance with the Recovery Navigator Program Uniform Program Standards with the staff makeup, including referral and outreach staff and care managers, that meets community needs. Referrals are accepted and responded to 24 hours a day. The R.E.A.L. Program provides community-based support to adults and youth in need, including:

- Community-based outreach;
- Brief Wellbeing Screening (intake);
- Referral services;
- Program Screening and Needs Scale (comprehensive assessment);
- Connection to services; and
- Warm handoffs to treatment and recovery support services along the continuum of care.

Additional supports to be provided as appropriate, include, but are not limited to:

- Long-term intensive outreach support/care management.
- Development of Success Plan.
- Recovery coaching.
- Recovery support services.
  - Utilize flexible participant funds within available funding.
- Treatment.

*Priority population:*

- The priority population of the R.E.A.L. Program are individuals with substance use disorders and/or co-occurring substance use disorder and mental health who are at risk of arrest and/or have frequent contact with first responders (including law enforcement and emergency medical services), community members, friends, family, and who could benefit from being connected to supportive resources and public health services when appropriate.

*Referral process:*

- Law Enforcement is considered a priority referral and R.E.A.L. Programs accept referrals from diverse sources, including community members and system partners.

- For counties with multiple R.E.A.L. Programs, referral is based on referent or individual choice and assessed needs.
  - R.E.A.L. Programs coordinate and transition individuals upon request.
- There is “no wrong door” for an individual to be referred to R.E.A.L. Programs.
- Referrals may be completed by direct access phone number, voicemail, in-person, or other means as indicated.
  - R.E.A.L. Programs accept referrals and coordinate appropriate response 24 hours a day, 7 days per week, 365 days per year.
    - All responses are expected to occur where the individual is at, including well-known locations, shelters, or community-based programs.
- Expected in-person response time is sixty (60) to ninety (90) minutes as indicated by geography.

*The R.E.A.L. Program provides community-based outreach support throughout the region in accordance with the Uniform Program Standards. The R.E.A.L. Program is expected to provide:*

- Field-based engagement and support.
- Support is ideally provided face-to-face. If barriers exist, virtual or telephone visits may be utilized.
- There is no specified time limitation for participation in the R.E.A.L. Program. Timelines are individually self-determined.
- Participation is voluntary and non-coercive.
- Intended to be staffed by individuals with lived experience with substance use disorder.
- Staff that reflects the visible diversity of the community served, e.g. Black Indigenous and People of Color (BIPOC) peers, trans peers, lesbian/gay/bisexual peers, peers with visible and non-visible disabilities.
- Engagement in and facilitates Cross Agency Coordination with Golden Thread Service Coordination.
- Engagement/education in Overdose Prevention and Response.
- Does not require abstinence from drug or alcohol use for program participation.

*Teams may provide (based on needs identified in the Program Screening and Needs Scale):*

- Outreach and engagement.
- Light case management.
- Intensive case management.

**Proposal Deadline:**

This Request For Proposal (RFP) is available on the Internet at <https://www.kitsap.gov/das/pages/online-bids.aspx> or by contacting Glen McNeil at: Kitsap County Department of Administrative Services, 614 Division Street, MS-07, Port Orchard, Washington 98366; 360-337-7036; or email: [purchasing@kitsap.gov](mailto:purchasing@kitsap.gov). SBH-ASO reserves the

right to make unilateral modifications to this RFP to address changes on the state and/or local level. For questions about the program content of the RFP, contact Jolene Kron at [jkron@kitsap.gov](mailto:jkron@kitsap.gov).

## II. PLANNING SCHEDULE

<u>DATE</u>	<u>ACTIVITY</u>
March 3-April 2, 2026	RFP Packet Available
April 2, 2026, 2:00 P.M.	Proposal Deadline
April 2-9, 2026	SBH-ASO Review
April 10-May 1, 2026	SBH-ASO Advisory Board Review and Scoring Independently
May 1-May 12, 2026	SBH-ASO Advisory Board Committee Review and Team Presentation
May 15, 2026	Present recommendations to SBH-ASO Executive Board

## III. APPLICANT ELIGIBILITY

SBH-ASO intends to contract with entities with existing R.E.A.L. Program contracts within Clallam and Kitsap Counties who can meet criteria outlined in the R.E.A.L. Program Statement of Work (Attachment B) to provide R.E.A.L. Program services.

Eligible entities must demonstrate the ability to meet requirements of the attached exhibits.

## IV. PERIOD OF PERFORMANCE

The period of performance for services solicited under this RFP is anticipated to begin July 1, 2026, and ends June 30, 2027. The period of performance is through 2027, or an end date determined by availability of funding.

## V. PROPOSAL SUBMISSION

All responses to this RFP must be complete. All proposals shall be on plain white bond paper (8.5 x 11 inches) and stapled once in the upper left corner. No binding or folders will be accepted. Binder clips may be used to keep pages together. The original response and five (5) additional copies with one electronic form (CD/disk or thumb drive), including all supporting material, must be sealed in an envelope or box and submitted to:

**Please submit by mail to:**

Glen McNeil, Buyer  
Kitsap County Purchasing Office  
614 Division Street, MS-7  
Port Orchard, WA 98366

**OR**

**For hand delivery, express, or courier:**

Glen McNeil, Buyer  
Kitsap County Administration Building  
Purchasing Office – Fourth Floor  
619 Division Street  
Port Orchard, WA 98366

Please ensure that the box or envelope has this address clearly marked on it.

**Applications must be received before 2:00 P.M. on April 2, 2026. Applications received after this time will not be accepted.**

## VI. PROGRAM ELEMENTS

### A. Proposal Format

In order to be considered, proposers must supply all the information requested. The proposal **must** contain the following sections for each individual program proposed:

1. Proposal Cover Sheet (Attachment A).
2. Letters of Support.
3. Program Activities and Services Narrative (Limited to 10 typed pages using 12-point font).
4. Fiscal Proposal (Limited to 3 typed pages using 12-point font).
5. Organizational Capability Narrative (Limited to 4 typed pages using 12-point font – not including organizational chart).
6. Program Data Table (Attachment C).

### B. Proposal Contents

All responses must contain sufficient information necessary to thoroughly describe the program design and operation.

1. Proposal Cover Sheet (Attachment A).
2. Letters of Support.
  - a) Please provide letters of support from key stakeholders to include type of relationship with entity, length of relationship with entity, reason for recommendation, level of engagement with the team, and the writer's role, organization, and business address.
3. Services Narrative (Limited to 10 typed pages using 12-point font). This does not include the Letters of Support nor the Program Data Table.

The program narrative should include a thorough description of all activities listed below.

- a) Please describe your agency's approach to providing R.E.A.L. Program services driven by harm reduction, trauma informed, and culturally inclusive principles.
- b) Please describe your experience with staffing the R.E.A.L. Program, including strategies used to:

- i. Hire and train individuals with lived experience.
    - ii. Retain program staff.
    - iii. Implement and supervise a peer-based program, including:
      - 1) Maintenance of scope
      - 2) Principles of peer-based work
      - 3) Continuing education
  - c) Please describe the expected work of the project manager, including:
    - i. Role in community coordination
    - ii. Partnership development
    - iii. Overall program function
  - d) Please describe your provision of the R.E.A.L. Program, including:
    - i. The primary population served by your program.
    - ii. Referral response, including your process for prioritizing referral response and screening referrals for alignment with the priority population.
    - iii. Outreach and engagement, including how the level of engagement is determined and how individuals' needs are screened.
    - iv. Case management, including how goals are identified, how wraparound support is coordinated along the continuum of care and system involvement, and how individuals are transitioned out of the program.
  - e) Please describe your implementation of the current Recovery Navigator Program Uniform Program Standards (Attachment B-1).
  - f) Please describe the improvements you would like to make to the implementation of this program and include the elements in the Services Narrative section 3(a) through 3(e) above (VI.B.3(a)-(e)).
4. Fiscal Proposal (Limited to 3 typed pages using 12-point font).

Provide a fiscal proposal including itemization of expected costs in narrative format with budget outline.

- a) Identify anticipated staffing costs broken down by type of position and full time equivalent (FTE) for each role that reflects a livable and competitive wage.

- b) On-going operational costs.
  - c) Provide an example annual budget for all program-related expenditures.
5. Organizational Capability Narrative (Limited to 4 typed pages using 12-point font – not including organizational chart).
- a) Summarize the qualifications of key staff members. Describe the provision of the elements below.
    - i. Staffing coverage plan
    - ii. 24/7 referral response
    - iii. Caseload management
6. Program Data Table (Attachment C).

## **VII. REVIEW AND SELECTION CRITERIA**

- A. Basic Minimum Criteria. The absolute minimum requirements of elements VII.A.1 and VII.A.2 below must be met before further consideration is given to a proposal.
- 1. Proposals will be evaluated according to the information contained within the written proposal.
  - 2. Proposals must include all indicated attachments.
- B. Program Design Elements. Proposals meeting the above minimum technical requirements will be further reviewed for program design elements included in the Services Narrative section 3(a) through 3(e) above (VI.B.3(a)-(e)).
- C. Fiscal Proposal.
- 1. Fiscal proposal will be reviewed to ensure inclusion of required program elements.
  - 2. Proposals will be evaluated for cost/price reasonableness. The price will be judged based on a comparison of prices among competing proposals. Price will also be compared to past prices offered by similar services, if applicable. Cost reasonableness will be judged by means of line item budget analysis. Line items will be reviewed for necessary and reasonable costs.
- D. Organizational Capacity.
- 1. Proposals will be reviewed for element 5(a) as listed above in the Organizational Capability Narrative section (VI.B.5(a)).
- E. Program Data Table.

1. Proposals will be reviewed for complete and correct data provided in the Program Data Table.

## **VIII. GENERAL PROPOSAL REQUIREMENTS**

### **A. Authorship**

1. Proposals developed with the assistance of organizations or individuals outside the bidder's own organization should be identified. No contingent fees for such assistance will be allowed to be paid under any contract or grant resulting from this RFP. All proposals submitted become the property of the SBH-ASO, and it is understood and agreed that the bidder claims no proprietary rights to the ideas contained therein.

### **B. Independent Price Determination**

1. The proposer guarantees that in connection with this proposal the prices and/or cost data have been arrived at independently, without consultation, communication or agreement for the purpose of restricting competition. This section does not preclude or impede the formation of a consortium of agencies which intend to respond to this RFP.

### **C. Subcontracting**

1. Proposers must include any plans for subcontracting of services or activities of the program. It is understood that the contractor(s) is held responsible for the satisfactory accomplishment of the service or activities included in such subcontract. The SBH-ASO reserves the right to approve all subcontractors.

### **D. Rejection of Proposal**

1. No applications (Proposals) submitted under this RFP will be returned for correction or clarification. If the application is incomplete, it will be rejected. Verbal, alternative, and late proposals will not be considered for selection. The SBH-ASO reserves the right to accept or reject any or all proposals received as a result of this RFP, to negotiate with all qualified sources, or to cancel in part, or in its entirety, this RFP if it is in the best interest of the SBH-ASO to do so.

### **E. Appeal Process**

1. Complaint and Grievance System. System procedures may be obtained from the SBH-ASO upon request.

### **F. Cancellation of Award**

1. The SBH-ASO reserves the right to cancel an award immediately if new State or Federal regulations or Health Care Authority determinations

make it necessary to substantially change the project purpose or content or prohibit such a project.

G. Price Warranty

1. The proposer warrants that the rates quoted for services in response to this RFP are not unreasonably greater than the rates for the same services performed by the same individuals under any other existing contracts or grants.

H. Waivers

1. The right is reserved by the SBH-ASO to waive specific terms and conditions contained in this RFP. It shall be understood that any proposal is predicated upon the acceptance of all terms and conditions in the RFP unless the proposer has obtained such a waiver.

I. Addenda to the Request for Proposals

1. In the event it becomes necessary to revise any part of this RFP, addenda will be provided to all proposers who received the RFP.

J. Publicity

1. No informational pamphlets, notices, press releases, research reports, or similar public notices concerning this proposal will be released by the proposer without obtaining prior written approval of the SBH-ASO.

K. Limitation

1. This RFP does not commit the SBH-ASO to award a contract, to pay any costs incurred in the preparation of a proposal to this request, or to procure or contract for services or supplies.

L. Signature

1. The proposal shall be signed by an official authorized to bind the bidder and shall provide the following information: name, title, address, and telephone number of individual(s) with authority to negotiate and contractually bind the bidder, and who may be contacted during the period of proposal evaluation.

M. Contract Award

1. The SBH-ASO may award a contract based on proposals received; therefore, each proposal should be submitted in the most favorable terms from a budgetary, technical, and programmatic standpoint. The SBH-ASO reserves the right to request additional data, discussion or presentation in support of written proposals.

**IX. ATTACHMENTS List**

**Attachment A: Proposal Cover Sheet**

**Attachment B: Statement of Work- R.E.A.L. Program**

**Attachment B-1: Recovery Navigator Program Uniform Program Standards**

**ATTACHMENT C: Program Data Table**