

## MEMORANDUM

**TO:** Consolidated Homeless Fund Vendors

**FR:** Josh Saal, Secretary of Housing – Rhode Island Department of Housing  
Michael Tondra, Chief – Office of Housing and Community Development  
Ana Novais, Acting Secretary, Executive Office of Health and Human Services

**RE:** 24/7 Warming Station

**DA:** November 30, 2022

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The State is interested in developing a 24/7 warming station to accommodate the current and projected needs of persons experiencing homelessness who are living in a place not meant for habitation (e.g. street, car or in an abandoned building). Therefore, the State, through its Office of Housing and Community Development (OHCD) in partnership with the Executive Office of Health and Human Services (EOHHS), is soliciting proposals to develop a 24/7 warming station located at the Cranston Street Armory in Providence.

The Cranston Street Armory is a state-owned property, managed by the Division of Capital Asset Management and Maintenance (DCAMM). OHCD in partnership with EOHHS and DCAMM proposes leasing the space to a current consolidated homeless fund vendor to operate a 24/7 warming station starting after December 7, 2022 and ending April 15, 2023. The population is limited to 50 individuals due to fire code and safety. Due to the size and layout of the building, portable toilets and showers are necessary. Existing toilets in the building are not ADA accessible and there are no showers in the building.

The Provider will be responsible for all costs associated with operating the warming station. Examples of eligible activities for operating the 24/7 warming station may include, but are not limited to the following:

- Purchase of equipment, such as furniture or mobile air filters
- Leasing of equipment, such as portable toilets, showers, and hygiene products
- Rent (Provider may assume that the rent is \$1/month), utilities, maintenance, and security
- Storage needs and supplies for personal items
- Technology such as phones, laptops/tablets, wi-fi, and charging stations, upon approved justification
- Supplies and food for 3 meals a day for up to 50 individuals
- Administration fee of no more than 5%
- Transportation to 24/7 warming station
- Staffing
- Security
- Case management to support new clients at the 24/7 warming station
- Client supports (transportation, birth certificate fees, drug testing, etc.)

- Limited costs for supportive services (see below), upon approved justification

The State acknowledges that interested parties may require technical assistance and expertise in developing full specifications. In acknowledgment of this and to accelerate the process, OHCD is requesting Letters of the Interest (LOIs) from existing Consolidated Homeless Fund vendors rather than accepting new proposals. **While this solicitation applies only to existing Consolidated Homeless Fund vendors, such agencies are encouraged to collaborate with non-CHF vendors in developing and submitting proposals.**

The State is requiring the chosen Provider to coordinate closely with the following Support Service Partners to ensure individuals being served by the 24/7 warming station are connected with the services they need:

**Support Services and Suggested Partners**

TIER	SERVICE NEED	EXAMPLE PARTNER
1	Translational Services and Multi-Lingual Supports (including American Sign Language)	Community-Based Organizations
1	Medical Care and Infectious Disease Supports	Federally-Qualified Health Center
1	Medicated Assisted Treatment	Substance Use Provider
1	Behavioral Health / Trauma-Informed Services	Community Mental Health Center
1	Harm Reduction, Mobile Outreach, and Peer Recovery Supports	Harm Reduction Organizations
1	Criminogenic Supports	Justice-Serving Organization
1	Hospital Coordination and Assistance	Local Hospital System
1	Emergency Medical Services (EMS) – Local EMS	Local Public Safety Organization
1	Place-Based Community Supports	Health Equity Zones
2	Veterans Supports	Veterans-Focused Organization
2	Benefits Enrollment	SNAP Outreach Providers
2	Medicaid Home Stabilization Services	Home Stabilization Providers
2	Employment Assistance Providers	Job Coaching Agencies
2	Nutritional Services	WIC Centers
2	Healthy Aging Supports	Community-Based Organizations
2	Transportation Services	Ride Share or Public Transit
2	Family and Child Supports, If Needed	Family Care Community Partnership
2	Pet Care and Service Animal Supports	Local Veterinarian

**Insurance Requirements**

In accordance with this solicitation, or as outlined in Section 13.19 of the General Conditions of Purchase, found at <https://rules.sos.ri.gov/regulations/part/220-30-00-13> and **General Conditions - Addendum A** found at <https://www.ridop.ri.gov/documents/general-conditions-addendum-a.pdf> the following insurance coverage shall be required of the awarded Respondent(s):

**General Requirements:**

- a)  Liability - combined single limit of \$1,000,000 per occurrence, \$1,000,000 general aggregate and \$1,000,000 products/completed operations aggregate. The State

should be an additional insured on a primary and non-contributory basis with a waiver of subrogation in favor of the State.

- b)  Workers compensation - \$100,000 each accident, \$100,000 disease or policy limit and \$100,000 each employee. There is to be a waiver of subrogation in favor of the State.
- c)  Automobile liability - \$1,000,000 each occurrence combined single limit. The State should be an additional insured on a primary and non-contributory basis with a waiver of subrogation in favor of the State.

***Professional Services:***

- d)  Working with Children, Elderly or Disabled Persons – *(Only required for a Contract Party if serving children, elderly, or disabled.)* Physical Abuse and Molestation Liability Insurance - \$1 Million per occurrence. A waiver of subrogation in favor of the State. The State should be an additional insured for work performed by Contract Party for the State to the extent that coverage is not subject to an insured versus insured exclusion. The additional insured status for the State is to be on a primary and non-contributory basis.

Any party interested in applying should submit a letter of interest c/o

Maryrose Mensah  
Office of Housing and Community Development  
315 Iron Horse Way, Providence, RI 02908  
[Maryrose.Mensah@doa.ri.gov](mailto:Maryrose.Mensah@doa.ri.gov)

Letters of the interest should provide a narrative of the proposal and must include at a minimum:

- A detailed description of the activities to be undertaken
- A detailed description of how the building space located at the Cranston Street Armory will be used to serve additional clients
- Population to be served (individuals, families, couples, etc.)
- Staffing detail
- General requested budget (as available – OHCD acknowledges any budget provided may be preliminary and require refinement/adjustments as the details are worked out subsequently); and

The deadline to submit Letters of Interest (hard copy or electronically) is Wednesday, December 7, at 1:00pm EST. **The State intends to review applications and make an award decision as fast as possible so the chosen vendor(s) can begin operating as soon as possible.**

A required information session will be held in-person at the Cranston Street Armory on **Friday, December 2, at 10:00am** for interested applicants. The Department of Housing reserves the right to request additional information from applicants on submitted applications. Applicants are required to respond to questions within 2 business days.

**APPLICATION DUE: Wednesday, December 7, at 1:00pm**

**24/7 Warming Station**

**Application Instructions:**

1. Please read the entire application before filling it out. Answer all questions concisely and clearly, addressing all inquiries in the prompt.
2. Applicants must submit one original and one electronic copy (via email) by **Wednesday, December 7, at 1:00pm:**

<b>Original Submitted to:</b>	<b>Electronic Copy Submitted to:</b>
24/7 Warming Station Maryrose Mensah Office of Housing and Community Development 315 Iron Horse Way, Suite 101 Providence RI 02908	Maryrose Mensah <a href="mailto:Maryrose.Mensah@doa.ri.gov">Maryrose.Mensah@doa.ri.gov</a> Subject Line: <i>24/7 Warming Station</i>

**APPLICATION DUE: Wednesday, December 7, at 1:00pm**

**24/7 Warming Station**

**1. Proposed Program Information**

Name of Program:	
Lead Agency:	
Collaborating Agencies:	
Program Address:	
Current HMIS Provider:	YES NO
Funds Requested:	

**2. Lead Agency Information**

Agency's Federal ID #:	
Agency's DUNS #:	
Agency's Mailing Address:	
Main Phone Number:	
Main Fax Number:	

<b>Position</b>	<b>Name</b>	<b>Direct Line</b>	<b>Email</b>

**a. What is the per person cost of individuals being served?**

### **3. Agency Capacity**

Describe your agency's capacity to carry out this activity:

### **4. Description of Crisis**

Briefly describe the need for a 24/7 Warming Station for the population that you serve and how this need puts pressure on your existing program:

What kind of solutions to this crisis has your program initiated in order to resolve the issue?

**5. Detailed Budget Worksheet**

Applicant:	
Program:	
Amount Requested:	

Please detail your program’s projected budget for the grant period.

<b>1. 24/7 Warming Station Personnel (e.g., staff, security) Include fringe in rate per hour</b>	<b>Estimated Hours</b>	<b>Rate per hour</b>	<b>Estimated cost</b>
<b>Total Personnel &amp; Fringe Benefits Cost:</b>			

<b>2. Client Assistance Costs (e.g., meals, birth certificates, RIPTA products)</b>	<b>Quantity</b>	<b>Unit Cost</b>	<b>Estimated Cost</b>
<b>Total Cost:</b>			

<b>3. 24/7 Warming Station Operating Costs</b>	<b>Estimated Cost</b>
<b>Total Operating Costs:</b>	

<b>Administrative Costs</b>	<b>Estimated Costs</b>

Total Administrative Costs:	
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**Total Estimated Cost:**

**Narrative describing cost reasonableness:**

**6. Additional Information**

Please provide information on any discrepancies, changes in program services, target population, or staffing, or any other issues you consider relevant to the evaluation of your program.