

# CITY OF CHICAGO



## REQUEST FOR PROPOSALS (RFP) for Narcotics Arrest Diversion Program

RFP# 46576:

**All Proposals must be submitted through eProcurement system**

**<http://www.cityofchicago.org/eprocurement>**

For further information:  
Dora Khoury  
Chicago Department of Public Health  
312-745-1898  
[dora.khoury@cityofchicago.org](mailto:dora.khoury@cityofchicago.org)

BRANDON JOHNSON  
MAYOR

Dr. Olusimbo Ige  
Commissioner

City of Chicago  
Department of Public Health  
Office of Substance Use and Recovery Services

## I. Purpose

The City of Chicago (City), through the Department of Public Health (CDPH), is pleased to invite the submission of proposals for a community outreach and treatment provider for its Narcotics Arrest Diversion Program (NADP). NADP is a police-led diversion program that provides supportive interventions to individuals apprehended for drug possession. Through this funding opportunity, CDPH seeks to offer substance use treatment in lieu of prosecution for individuals arrested for possession of small amounts of an illicit substance as described in the Illinois Controlled Substance Act (e.g., 2 grams or less of heroin).<sup>1</sup> CDPH is issuing this RFP to fund the linkage to care component of this work, which will be conducted by a community outreach and treatment provider. CDPH also works closely with the Chicago Police Department (CPD) to ensure implementation fidelity and quality improvement.

The Chicago Department of Public Health's (CDPH) mission is to work with communities and partners to create an equitable, resilient, safe, and Healthy Chicago. Our efforts build toward our vision where everyone in Chicago thrives and achieves their optimal health and wellness. CDPH's approach is guided by our community health improvement plan, [Healthy Chicago 2025](#) that is focused on racial and health equity, especially eliminating Chicago's racial life expectancy gap. This RFP aligns with Healthy Chicago 2025's Health and Human Services and Public Safety priority areas and acknowledges that opioid-related overdose is one of the top five contributors of the racial life expectancy gap in Chicago.<sup>2</sup> Further, this opportunity aligns with the [Healthy Chicago 2025 Strategic Plan](#) substance use priority area.<sup>3</sup> This program is designed to foster community-level resilience and address health disparities in opioid overdose and opioid use disorder by providing pre-arrest diversion and linkage to treatment services to communities and populations most affected by overdose in Chicago.

### A) Program Goals and Outcome Objectives

This program seeks to sustain the expansion of the Narcotics Arrest Diversion Program in the City of Chicago over the next year with two one-year extensions. The goals of this program include:

1. Divert persons arrested for possessing small amounts of illicit substances to improve public safety and reduce recidivism
2. Link diverted persons to low-barrier, trauma-informed harm reduction and treatment services for people with substance use disorder (SUD)
3. Reduce the number of fatal and nonfatal opioid-related overdoses in Chicago.

---

<sup>1</sup> Narcotics Arrest Diversion Program. Special Order S06-17. Chicago Police Department.

<https://directives.chicagopolice.org/#directive/public/6979>

<sup>2</sup> Healthy Chicago 2025. Chicago Department of Public Health.

[https://www.chicago.gov/content/dam/city/depts/cdph/statistics\\_and\\_reports/HC2025\\_917\\_FINAL.pdf](https://www.chicago.gov/content/dam/city/depts/cdph/statistics_and_reports/HC2025_917_FINAL.pdf)

<sup>3</sup> Healthy Chicago 2025 Strategic Plan. Chicago Department of Public Health.

<https://www.chicago.gov/content/dam/city/depts/cdph/community-health/healthy-chicago/Healthy-Chicago-Report-2025-v5.pdf>

## B) Project Overview

Through this funding opportunity, CDPH seeks to expand the Narcotics Arrest Diversion Program (NADP). NADP is the largest program of its kind in the country to divert individuals experiencing a substance use disorder (SUD) before being formally charged with a crime.<sup>4</sup> NADP was conceptualized by the Chicago High Intensity Drug Trafficking Area (HIDTA) and borne out of a partnership between the Chicago Police Department (CPD), the University of Chicago Crime Lab, and CDPH. This program offers diversion away from criminal charges for individuals in Chicago arrested for possession of personal use amounts of illicit substances under the Illinois Controlled Substance Act. Substance use disorder (SUD) has long been criminalized in the United States. Punitive solutions, such as arrest and imprisonment, are used to deter crime. However, there is no correlation between increasing drug imprisonment, and lowering rates of drug use, arrests, or overdose deaths.<sup>5</sup>

In 2018, NADP was piloted in CPD District 11, which serves Humboldt Park, East Garfield Park, and West Garfield Park. These 3 community areas, along with Austin and North Lawndale, are the most impacted by the opioid epidemic and account for over one-third of all opioid-related overdose EMS responses in the city.<sup>6</sup> By November 29, 2021, NADP expanded to all 22 police districts. In its pilot, NADP eligibility criteria included a maximum possession weight of 1 gram or less of heroin or cocaine, and no prior felony convictions. In 2022, eligibility criteria were expanded to 2 grams or less of any substance containing fentanyl, methamphetamine, morphine, PCP, ketamine, MDMA, oxycodone/hydrocodone, and LSD. Past felony convictions are disqualifying only if they occurred within the last 10 years.<sup>7</sup>

Individuals diverted are connected with a substance use counselor, released without charge and face no threat of future prosecution related to the arrest. Diverted individuals are offered treatment, and if they consent, are placed in substance use treatment either by the counselor's affiliated organization or referred to alternative agencies depending on prior engagement with treatment and other considerations. Individuals do not have to consent to treatment to be released. Hours of operation for onsite counselors are currently 3:30 pm to midnight, however, officers are encouraged to call counselors during off hours if they have an eligible individual in custody, and off-hour diversions have been occurring.<sup>8</sup>

Between the program start in 2018 and June 2023, over 1500 individuals have been diverted through NADP. Over 98% of individuals offered diversion opted-in and 79% of diverted

---

<sup>4</sup> Narcotics Arrest Diversion Program Research Brief. University of Chicago Crime Labs. June 2023.

<https://crimelab.uchicago.edu/resources/nadp-research-brief/>

<sup>5</sup> More Imprisonment Does Not Reduce State Drug Problems. Pew Charitable Trust. 2018.

<https://www.pewtrusts.org/en/research-and-analysis/issue-briefs/2018/03/more-imprisonment-does-not-reduce-state-drug-problems>

<sup>6</sup> Chicago Fire Department

<sup>7</sup> Narcotics Arrest Diversion Program. Special Order S06-17. Chicago Police Department.

<https://directives.chicagopolice.org/#directive/public/6979>

<sup>8</sup> Arora, Ashna and Bencsik, Panka, Policing Substance Use: Chicago's Treatment Program for Narcotics Arrests (October 11, 2023). Available at SSRN: <https://ssrn.com/abstract=4599291> or <http://dx.doi.org/10.2139/ssrn.4599291>

participants began treatment.<sup>9</sup> Early findings indicate that NADP participants are 72% less likely to be rearrested in the future.

Applicants must be a licensed behavioral health provider within categories: Level 1 Adult Outpatient Treatment Services,<sup>10</sup> a licensed OTP (opioid treatment program),<sup>11</sup> or a certified community behavioral health center (CCBHC).<sup>12</sup> Providing higher American Society of Addiction Medicine (ASAM) Levels of Care<sup>13</sup> is encouraged but not required. The applicant must accept Medicaid and be committed to providing care to diverted individuals regardless of citizenship status and ability to pay.

Applicants must serve people in the City of Chicago with this funding and must have a physical location in Chicago where substance use treatment services are provided to be eligible for funding. There are no further geographic requirements attached to this funding, however applicants that propose a service model that provides treatment and linkage to care in the CPD Districts most affected by overdose will be prioritized (see Figure 1).

Applicants that offer citywide coverage are strongly preferred. Due to the overdose burden on the West and Southwest regions of Chicago (Figure 1), applicants who are able to provide services in CPD districts that correspond to these most impacted regions will be prioritized. It is encouraged that applicants demonstrate how they can cover priority areas.

**Figure 1: Opioid-Related Overdose EMS Responses (2024) and Chicago Police Districts**

---

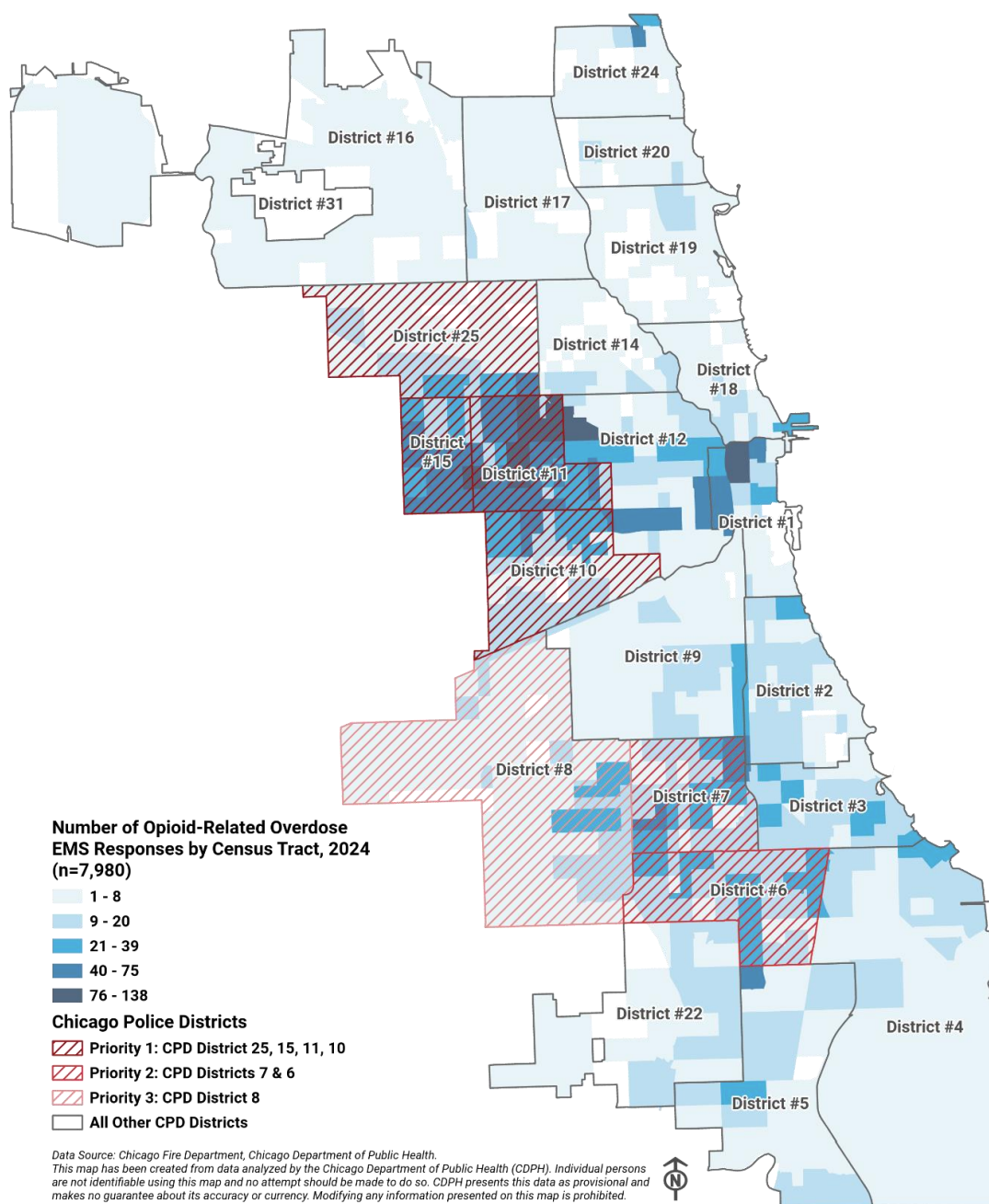
<sup>9</sup> NADP Research Brief. University of Chicago Crime Lab. <https://crimelab.uchicago.edu/resources/nadp-research-brief/>

<sup>10</sup> See: [Section 2060 \(ilga.gov\)](#)

<sup>11</sup> [Opioid Treatment Program \(OTP\) - How to Become Certified? | SAMHSA](#)

<sup>12</sup> [Certified Community Behavioral Health Clinics \(CCBHCs\) | SAMHSA](#)

<sup>13</sup> [What are the ASAM Levels of Care?](#)



## II. Background

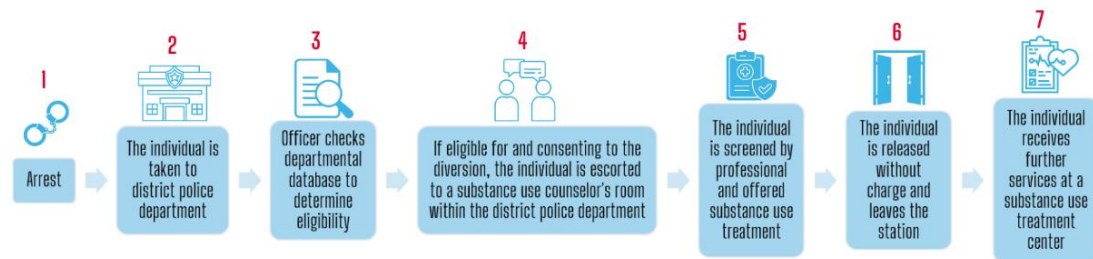
### *Overdose Burden Among Justice-Involved Individuals*

People who have been arrested and/or incarcerated experience higher rates of substance use disorder (SUD) than the nation at large, with 41% of justice-involved individuals experiencing SUD compared with 8% of people in the general population.<sup>14</sup> Individuals recently returning from jail or prison are particularly at high risk, being 40-129 times at risk of a fatal opioid-related

<sup>14</sup> Widra, Emily. Addicted to punishment: Jails and prisons punish drug use far more than they treat it. Prison Policy Initiative. January 30, 2024. <https://www.prisonpolicy.org/blog/2024/01/30/punishing-drug-use/>

overdose after release compared to the general public.<sup>15</sup> Overdose risk is particularly high in the first two weeks after release, but drug-related mortality risk can remain elevated at least a year after release.<sup>16</sup> Opioid-related overdose remains a leading cause of death for justice-involved individuals.<sup>17</sup> There is mounting evidence that non-punitive alternatives to drug-related offenses have a public health benefit and reduce recidivism.<sup>18</sup>

**Figure 2: The NADP Diversion Process**



Source: Chicago Police Department.<sup>19</sup>

As NADP currently operates, after an individual is arrested for possession of an illicit substance, they are transported to a CPD district station, where an officer determines eligibility. If an individual is found eligible, they are escorted to a substance use counselor to screen the individual for SUD. The counselor then offers treatment, and the individual is released without charge, regardless of whether they consent to treatment (Figure 2). In 2023, over half of all arrests eligible for diversion through NADP occurred in District 11, which roughly corresponds to the Garfield Park and Humboldt Park neighborhoods.

### *Overdoses in Chicago*

Between 2015 and 2023, opioid-related Emergency Medical Services (EMS) responses in Chicago increased from under 3,000 responses annually to nearly 10,000 responses annually.<sup>20</sup> The number of fatal overdoses in Chicago rose to an all-time high of 1441 in 2021 but remains more than 1,300 per year for 2022 and 2023.<sup>21</sup> Illegally made fentanyl (IMF), a potent synthetic opioid, plays a significant role in the overdose crisis in Chicago. Fentanyl-involved overdose deaths account for the majority of opioid overdose fatalities, with fentanyl being the sole opioid

<sup>15</sup> Vera Institute of Justice. *Overdose Deaths and Jail Incarceration: National Trends and Racial Disparities*. <https://www.vera.org/publications/overdose-deaths-and-jail-incarceration/national-trends-and-racial-disparities#:~:text=A%20seminal%20study%20in%20Washington%20State%20found%20that%2C,of%20an%20opioid%20overdose%20two%20weeks%20post-release.%2010>

<sup>16</sup> Cooper, J.A., Onyeka, I., Cardwell, C. et al. Record linkage studies of drug-related deaths among adults who were released from prison to the community: a scoping review. *BMC Public Health* 23, 826 (2023). <https://doi.org/10.1186/s12889-023-15673-0>

<sup>17</sup> Hartung DM, McCracken CM, Nguyen T, Kempny K, Waddell EN. Fatal and nonfatal opioid overdose risk following release from prison: A retrospective cohort study using linked administrative data. *J Subst Use Addict Treat*. 2023;147:208971. doi:10.1016/j.josat.2023.208971

<sup>18</sup> Chandler RK, Fletcher BW, Volkow ND. Treating drug abuse and addiction in the criminal justice system: improving public health and safety [published correction appears in *JAMA*. 2009 Mar 11;301(10):1024]. *JAMA*. 2009;301(2):183-190. doi:10.1001/jama.2008.976

<sup>19</sup> Chicago Police Department, Special Order S06-17. <https://directives.chicagopolice.org/#directive/public/6979>

<sup>20</sup> Chicago Fire Department as of 4-1-2024.

<sup>21</sup> Cook County Medical Examiner's Office as of 4/25/24. Data is provisional and subject to change.

involved in many cases. In 2022, fentanyl was involved in 94% of opioid-related overdose deaths in the city.<sup>22</sup> Moreover, the use of more than one drug, or polysubstance use, is common among opioid-related overdose deaths in Chicago. In 2020, 50.8% of fatal opioid-related overdoses in the city included cocaine, methamphetamine, or benzodiazepine.<sup>23</sup>

While overdose occurs in all 77 of Chicago's community areas, some communities have a significantly elevated overdose burden (Figure 1). The West Side, specifically the community areas of Austin, East Garfield Park, West Garfield Park, Humboldt Park, and North Lawndale, have the greatest opioid-related overdose burden in the city, accounting for 34% of all opioid-related overdose EMS Responses in 2023.<sup>24</sup>

### *Evidence Base for Drug Arrest Diversion in Chicago*

There is widening evidence and expert consensus that a punitive approach to drug use has not only failed to reduce drug use but increased associated risks and health harms.<sup>25</sup> Nevertheless, drug offenses remained the leading cause of arrest nationwide, with over 1.1 million drug-related arrests made in 2020. The racial disparities around drug-related incarceration are also pronounced, with Black people making up 24% of all arrests despite being only 13% of the U.S. population.<sup>26</sup>

Seattle's Law Enforcement Assisted Diversion (LEAD), first established in 2011, utilized diversion pre-booking (post-arrest and pre-charge) for sending people suspected of low-level drug and prostitution offenses into harm reduction case management instead of possible incarceration. In a non-randomized controlled study of LEAD, persons diverted had 60% lower odds of re-arrest six months after evaluation compared with the controls who were not in the program.<sup>27</sup> As of 2024, LEAD programs have spread to over 70 sites across the U.S.<sup>28</sup>

Compared to LEAD, Chicago's NADP showed potentially stronger evidence for the benefits of pre-arrest diversion for reducing recidivism and linking individuals to treatment. People diverted into NADP are 44% less likely to be re-arrested in the future. Additionally, 79% of participants enter treatment, and over 52% of individuals remain in treatment after 30 days.<sup>29</sup> Moreover, Black men on Chicago's West Side make up the majority of the individuals served by NADP,

---

<sup>22</sup> Cook County Medical Examiner's Office as of 4/25/24. Data is provisional and subject to change.

<sup>23</sup> Chicago Department of Public Health. Opioid Surveillance Report. <https://www.chicago.gov/content/dam/city/depts/cdph/overcome-opioids/resources-2023/2020-opioid-surveillance-report.pdf>

<sup>24</sup> Cook County Medical Examiner, Chicago Fire Department.

<sup>25</sup> United Nations Office on Drugs and Crime (UNODC), "The Alternative World Drug Report: Counting the Costs of the War on Drugs," 2012

<sup>26</sup> Cohen A, Vakharia SP, Netherland J, Frederique K. How the war on drugs impacts social determinants of health beyond the criminal legal system. *Ann Med*. 2022 Dec;54(1):2024-2038. doi: 10.1080/07853890.2022.2100926. PMID: 35852299; PMCID: PMC9302017.

<sup>27</sup> Collins, S. E., Lonczak, H. S., & Clifasefi, S. L. (2017). Seattle's Law Enforcement Assisted Diversion (LEAD): program effects on recidivism outcomes. *Evaluation and program planning*, 64, 49-56.

<sup>28</sup> [LEAD Sites - Lead Support Bureau \(leadbureau.org\)](https://leadbureau.org)

<sup>29</sup> Arora, Ashna and Bencsik, Panka, Policing Substance Use: Chicago's Treatment Program for Narcotics Arrests (October 11, 2023). Available at SSRN: <https://ssrn.com/abstract=4599291> or <http://dx.doi.org/10.2139/ssrn.4599291>



which is consistent with the location and demographics of those most disproportionately impacted by opioid-related overdoses in Chicago.<sup>30</sup> These early findings are encouraging, as they indicate NADP links individuals who are not otherwise seeking treatment to services without the threat of punitive actions for non-compliance.

### **Alignment with CDPH Guiding Principles**

All CDPH investments are guided by the following principles. CDPH delegates and their sub- contractors are expected to integrate these principles into organizational policy and practice.

- **Trauma prevention and trauma-informed services** – ensuring services address trauma and healing. How does your organization ensure that the use of language, pronouns etc. do not offend or cause harm? How are programs and services structured to create physical and psychological safety?
- **Cultural responsiveness** – ensuring services are culturally and linguistically appropriate. Does your organization acknowledge biases, stereotypes, and ensure respect for different backgrounds and cultures? How does the organization integrate individuals with shared experiences into the organization?
- **Health equity in all communities** – allocating resources and services to people and areas with the greatest need. How is data on the most impacted places and populations used to guide allocation of resources and services to people and areas with the greatest need?

### **III. Internet Access to this RFP**

Respondents may download the RFP and any future addenda from the City’s Department of Procurement Services (DPS) website at the following URL:

<https://www.chicago.gov/city/en/depts/dps/isupplier/current-bids.html>. Respondents are required to have Internet access and an email address. The City will not provide hardcopies of this RFP or clarifications and/or addenda. Respondents are required to submit responses via the City’s online purchasing system, eProcurement.

The City accepts no responsibility for the timely delivery of materials or for alerting Respondents on posting to the DPS website information related to this RFP.

Under no circumstances shall failure to obtain clarifications and/or addenda relieve a Respondent from being bound by any additional terms and conditions in the clarifications and/or addenda, or from considering additional information contained therein in preparing a submittal. Furthermore, failure to obtain any clarification and/or addendum shall not be valid grounds for a protest against award(s) made under this RFP.

### **IV. Available Funding**

A total of \$750,000 will be available through this RFP for the initial contract period beginning September 1, 2025 through August 31, 2026, with up to two extensions, each not to exceed one year, at the discretion of the City based on the availability of funds, the need to extend services, and the respondent’s performance. It is anticipated that 1-3 contracts will be awarded through

---

<sup>30</sup> *Ibid.*



this RFP for up to \$750,000 depending on the geographic reach of proposed services. CDPH may reallocate funding across selected respondents during contract extension negotiations based on funding, each respondent's performance and programmatic priorities. Funding sources include the CDC Overdose Data to Action: Limiting Overdose through Collaborative Actions in Localities (OD2A: LOCAL) cooperative agreement.

## **V. Project Description**

### **a. Program Activities**

CDPH intends to fund up to three (3) agencies for one-year awards to sustain the Narcotics Arrest Diversion Program (NADP) city-wide expansion by continuing to support Chicago District Police Stations with arrest deflection and walk-in linkage and referral services.

Successful applicants will provide outreach staff to serve as navigators based in police stations to connect individuals to long-term care. NADP currently operates in all 25 Chicago police districts, with hours of operation from 3:30pm to 12:00am for the substance use counselor being available onsite, although diversions also occur outside these hours. On-site counselors are expected to evaluate the diverted candidate for substance use disorder and link them to treatment within the parent organization or, infrequently, to another treatment provider.

Successful candidates will provide transportation services, case management, substance use treatment services that are offered in-house and linkage in other healthcare settings (e.g., clinic, primary care provider, emergency department, community health center). Applicants must explain in detail how their treatment modalities are designed to be low-barrier and trauma-informed, particularly for individuals at highest risk of experiencing an overdose and/or that face the most barriers to substance use treatment access. Applicants must consider transportation and scheduling barriers in their proposal and will be expected to detail how their program model actively lowers barriers to access along these lines. Successful applicants must attend to deferred individuals within 4 hours of arrest.<sup>31</sup>

Applicants are expected to be able to provide services to anyone, regardless of the language that they speak. For applicants proposing to serve predominantly non-English-speaking communities, proposals must address language and cultural competencies of staff and protocols for serving people who do not speak English.

Successful applicants are expected to support current hours of operation and accommodate program expansion, policy change, community engagement and staff education as deemed necessary by CDPH and CPD.

### **Outreach and Engagement in Priority Community Areas**

The treatment provider will continue or establish outreach and engagement in priority community areas concentrated on the West and South Sides of Chicago. These community areas have been selected from hotspot analyses indicating high rates of opioid-related overdose mortality.

---

<sup>31</sup> Public Act 101-0652. <https://ilga.gov/legislation/publicacts/101/101-0652.htm>

The treatment provider will also serve communities by attending police-sponsored non-violence and community leadership events and facilitating overdose education and naloxone distribution (OEND) trainings.

## **Evaluation**

Respondents to this funding opportunity are expected to describe their program evaluation methodology to ensure the effectiveness of the proposed program including metrics of successful implementation. In addition, the awarded agency will be required to review all performance and quality assurance measures with CDPH and report data and project progress on a monthly basis utilizing CDPH's data reporting tool.

Evaluation metrics and data management procedures should, at a minimum, describe the following:

- How applicant will measure and report on the proposed performance measures and deliverables
- How client level and program performance data will be collected, maintained, analyzed, and incorporated into ongoing quality improvement activities.
- Details on applicant policies and procedures on data privacy and security
- Applicant capacity (staff, data systems, policies and procedures) for performing data collection, program monitoring, evaluation, and quality improvement.
- How applicant will use performance measurement data for continuous quality improvement.

## **Data Collection and Reporting**

The treatment provider will collect information on candidates and submit to reports with the Chicago Police Department, the Chicago Department of Public Health and designated technical assistance and evaluations partners. Data fields may include demographic information, medical conditions, substance use history, substance use treatment history, substance use treatment follow up, mental health conditions, employment history, and deflection to treatment referral.

Successful applicants will also be expected to submit de-identified monthly reports to CDPH detailing the number of individuals diverted, services provided, and the number of patients connected to care and number of patients connected specifically to medications for opioid use disorder (MOUD) under this award. CDPH will provide a uniform data template for this reporting requirement. Funded agencies will meet with CDPH and submit vouchers for payment of services on a monthly basis. Funded agencies will also be expected to work in partnership with CDPH to coordinate with relevant city entities, agencies, and departments to support seamless continuity of care for persons who require systems coordination.

CDPH and CPD will collaborate with a technical assistance and evaluation provider, as required by the CDC cooperative agreement, to ensure NADP remains a data-driven program. Data will also be used by the community outreach and treatment provider to determine which police districts need training on NADP, which will be delivered by their outreach navigators.

**b. Scope of Services**

1. Treatment provider clinicians will be located in high-volume district stations. Services at minimum must span 8 hours daily, although more hours may be required to meet the level of need.
2. Referrals will be made by the police according to the most recent Chicago Police Department, Narcotics Arrest Diversion Program Order. Patients may also walk-in to seek treatment and substance use supports.
3. Candidates eligible for deflection will meet face-to-face with a substance use treatment counselor.
4. Diversion to substance use treatment decisions will be based on:
  - i. Substance use diagnosis and ASAM level of care and multidimensional assessment,
  - ii. The candidate's treatment and recovery pathway preferences, and
  - iii. The accessible treatment options with prioritization of evidence-based treatment modalities including medications for opioid use disorder (MOUD)
5. The substance use treatment clinician will arrange for the diverted individual to be transported to a substance use provider or treatment facility
6. Every candidate referred to substance use treatment will be provided with:
  - i. Opioid overdose education and resources for accessing naloxone (as well as test kits for fentanyl, xylazine and other substances as needed), and
  - ii. The treatment provider program phone number and address so they can call or return to the walk-in component of the program anytime.

Diverted individuals will in addition receive:

- iii. A warm hand-off (i.e., a transfer of care process that the candidate is involved in) to the substance use treatment provider or treatment facility
7. Following the initial deflection to substance use treatment, a case manager or recovery coach will make follow up phone calls to each candidate to assess their need for additional substance use treatment and recovery support and provide practical assistance to secure follow-up services when needed. Enhanced engagement (i.e. field work/door knocks) may be required to support continued engagement.
8. The treatment provider will continue involvement with the Chicago Police Department, the Chicago Department of Public Health and designated technical assistance and evaluations partners to monitor program impact and need for revisions to best meet the opioid overdose needs.

**Program and Fiscal Monitoring Standards**

Any grantee found to be non-compliant with the standards at any time, will be held responsible and required by the City of Chicago to restore any damages and/or cost associated with grantee non-compliance

## **VI. Staffing Plan**

CDPH requires that this funding be used for Substance Use Counselors to provide evidence-based interventions and treatment and assist individuals in achieving their recovery and rehabilitative goals. CDPH recommends that people with lived experience, whether working as Certified Peer Recovery Specialists (CPRS) or not, participate in the program. Peers offer guidance, harm reduction education, and referrals to treatment or support services.

This funding may also be used to fund medical providers and other clinical staff, case management positions, outreach staff, administrative and grants management positions, data collection and quality assurance staff, and program leadership.

All staff must be trained on trauma-informed practices, the principles of harm reduction, and best practices when engaging people with SUD. CDPH recognizes that vicarious trauma and burnout are common and requires applicants to propose staff wellness plans that address workplace culture, salary and benefits, and specific staff support programs related to supporting the health and wellbeing of all individuals funded under this work.

Applicants must describe how many staff (part time, full time, or hourly) will receive compensation from this grant. Describe the role of all positions supported by this grant. Provide job descriptions and resumes of staff and explain time allocation for each person (full-time, part-time as well as hourly), as well as job descriptions for any vacant positions or new positions that will be created because of this funding opportunity. CDPH expects that all staff funded under this award are compensated at or above the minimum salary requirements described in this RFP, defined by a minimum of \$20/hour for a single adult with no children. Refer to the Living Wage calculator to determine appropriate wages for each staff member funded under this program, in Cook County, IL: <https://livingwage.mit.edu/counties/17031>.

## **VII. Budget and Justification**

The wages of the staff who are employed by the respondent and any agencies that will serve as subcontractors to the respondent must meet the City's minimum wage requirements found here [https://www.chicago.gov/city/en/depts/bacp/supp\\_info/minimumwageinformation.html](https://www.chicago.gov/city/en/depts/bacp/supp_info/minimumwageinformation.html). CDPH strongly encourages Respondents to pay all employees a fair living wage. More information about calculating living wages can be found using the [Living Wage Calculator](#).

Staff supported by this grant are NOT City of Chicago employees; they are employed by the agency/agencies. The respondent must list the salary and/or hourly rate of staff assigned to this grant. Staff are not permitted to serve as volunteers; they must be paid for their time worked, skill level, lived experience (if applicable), and their expertise in the field. The job description detailing the duties and responsibilities required will serve as guidance for the work flow and salary/hourly wage. Complete a program budget outlining all detailed expenses in its entirety for this proposal (e.g. salaries, program materials, travel reimbursement). Program budget cannot exceed the available funding amount indicated in Section IV. Available Funding above.

## VIII. Fiscal Capacity

Payment for services will be made on a reimbursement basis. Respondents must demonstrate capacity to fund program expenditures from the start date until they are reimbursed by the City. If multiple agencies will be subcontractors of a lead agency, then the application must be submitted by the lead agency as the respondent. The lead agency must obtain all expenses from the agency/agencies and assume all reporting responsibilities for all the expenses for the award. If a lead agent applies, the budget for the total fiscal year must include all expenses for the award from the lead agency and all agencies to receive funds through this RFP.

An organization may use a fiscal agent to administer the grant. If a fiscal agent is used, provide the total budget for the agency that will serve as the fiscal agent. The fiscal agent must designate a staff person who will prepare and review all vouchers for accuracy before making monthly submissions. Please identify who will be responsible for financial reporting.

## IX. Eligibility Requirements

Respondents eligible for this funding opportunity must meet the following criteria:

- Be a not-for-profit agency with a 501(c) 3 status.
- Have an office located in the City of Chicago from which agency offers services.
- Have a minimum of three (3) years of experience providing evidence-based substance use disorder treatment services.
- Be a licensed Opioid Treatment Program (OTP) or Level I-IV treatment provider by the Illinois Department of Human Services Division of Substance Use Prevention and Recovery (IDHS/SUPR) OR an office-based buprenorphine/naltrexone provider
- Be in good standing with the City of Chicago.

Respondents that do not meet these eligibility requirements will **NOT** have their applications evaluated; incomplete applications will **NOT** be evaluated for this funding opportunity.

Ideal applicants will meet the following criteria:

- A demonstrated history of providing services to participants regardless of an individual's ability to pay, health insurance status, or immigration status.
- A demonstrated history of providing services that are responsive to the unique needs of communities of high need. This includes delivering services that are culturally, contextually, and linguistically responsive to the unique needs of people who use drugs and people at high risk of experiencing an overdose.
- A commitment to deliver services that recognize the impact that trauma has on individuals, communities, and across generations.
- A commitment to delivering services that are evidence-based or evidence-informed. This can be demonstrated both through proposing the use of interventions that have been demonstrated to be effective in generating the outcomes that the agency proposes in their application.

- A commitment to centering the lives and experiences of people with lived experience of substance use, substance use disorder, and/or overdose in program design, leadership, and implementation
- A demonstrated history of working with people who use drugs in Chicago through low-barrier, non-judgmental, non-coercive programs and intervention

## **X. RFP and Submission Information**

### **a. e-Procurement system**

***To complete an application for this RFP, RESPONDENTS will need to set up an account in the new eProcurement/iSupplier system.***

Registration in iSupplier is the first step to ensuring your agency's ability to conduct business with the City of Chicago and CDPH. ***Please allow three days for your registration to be processed. Respondents requiring access to eProcurement are encouraged to register immediately upon receiving the notice of this solicitation; customer support will be available to provide additional assistance as needed. Please see below for additional contact information.***

The Department of Procurement Services (DPS) manages the iSupplier registration process. All delegate agencies are required to register in the iSupplier portal at [www.cityofchicago.org/eProcurement](http://www.cityofchicago.org/eProcurement). All vendors must have a Federal Employer Identification Number (FEIN) and an IRS W9 for registration and confirmation of vendor business information.

1. **New Vendors** – Must register at [www.cityofchicago.org/eProcurement](http://www.cityofchicago.org/eProcurement).
2. **Existing Vendors** – You must request an iSupplier invitation via email if your organization does not have an account in the iSupplier system. Include your **Complete Company Name, City of Chicago Vendor/Supplier Number (found on the front page of your contract), and W-9** in your email to [customersupport@cityofchicago.org](mailto:customersupport@cityofchicago.org). You will then receive a response from DPS, which will allow the user to complete the registration process. Please check your junk email folder if you have made a request and have not received a response within 3 days of the request.

For further eProcurement help use the following contacts:

- **Questions on Registration:** [CustomerSupport@cityofchicago.org](mailto:CustomerSupport@cityofchicago.org)
- **Questions on eProcurement for Delegate Agencies including:** [CustomerSupport@cityofchicago.org](mailto:CustomerSupport@cityofchicago.org) or contact the Customer Support Center at 312-744-HELP
- **Online Training Materials:** <https://www.cityofchicago.org/city/en/depts/dps/isupplier/online-training-materials.html>

Respondents must submit an application for the request for proposal via eProcurement.

***For this application, all answers to application questions are limited to 4,000 characters, including spaces and punctuation.***

**a. For respondents who wish to submit more than one application to an RFP**

Organizations submitting more than one proposal (maximum of three) may do so by submitting each proposal by a separate, unique registered account user with online bidding responsibilities, using their individual login information.

If you are having difficulty registering additional people, please refer to this handout

[https://www.cityofchicago.org/content/dam/city/depts/dps/isupplier/training/Vendor\\_Create\\_New\\_Address\\_and\\_Contact.pdf](https://www.cityofchicago.org/content/dam/city/depts/dps/isupplier/training/Vendor_Create_New_Address_and_Contact.pdf)

Here is a link to all additional technical assistance videos and handouts.

<https://www.cityofchicago.org/city/en/depts/dps/isupplier/online-training-materials.html>

Additionally, Respondents may contact [CustomerSupport@cityofchicago.org](mailto:CustomerSupport@cityofchicago.org) or contact the [Customer Support Center at 312-744-HELP](#) to receive more specific instructions and troubleshooting.

## **XI. Evaluation of Proposals**

**b. Selection/Review Criteria:**

An Evaluation Committee made up of representatives from the Chicago Department of Public Health, other City, County or State Departments, and/or other community members may review and evaluate the proposals in accordance with the evaluation criteria. The Evaluation Committee will review the Respondent's Proposal to determine overall responsiveness and completeness of the Proposal with respect to the components outlined as follows recommend either:

**i. Phase I: Technical and Eligibility Review**

CDPH will assess a Respondent's compliance with and adherence to the stated submission requirements in the RFP. Respondents that do not meet these eligibility requirements will **NOT** have their applications evaluated; incomplete applications will **NOT** be evaluated for this funding opportunity.

Respondents found to be compliant and adherent to the RFP and without issues that would cause them to be ineligible from entering into an agreement will move to Phase II.

**ii. Phase II: Proposal Evaluation**

Phase II will include a detailed analysis of qualifications, experience, strength of proposed plans for service delivery and other factors based on the Evaluation Criteria and points allocated to sections of the RFP, as well as the eProcurement RFP Requirements/Questions found in Section 7-13.

The Evaluation Committee will recommend either:



1. A short list of potential awardees from whom it needs clarification of RFP response; or
2. A list indicating recommended awardees. All recommendations are presented for approval to the Commissioner of Public Health.

The City reserves the right to accept or reject any or all proposals; take exception to parts of proposals, request written or oral clarification of proposals and supporting materials or cancel this Request for Proposals process if it is in the City's best interest to do so. A respondent may be asked to clarify their proposal by making a presentation, performing a demonstration, or hosting a site visit. CDPH reserves the right to negotiate separately with competing respondents for all or any part of the services described in this RFP.

a. Evaluation Criteria

Category	Available Points
<b>Staffing Plan</b>	16
<b>Budget and Justification</b>	8
<b>Fiscal Capacity</b>	5
<b>Evaluation and Quality Improvement</b>	14
<b>CPD District Coverage Plan</b>	10
<b>Alignment with CDPH Principles</b>	6
<b>Experience and Capacity</b>	20
<b>Project Description</b>	21
<b>Total Points</b>	<b>100</b>

## XII. Reporting and Other Requirements for Successful Respondents

All successful respondents will be required to submit monthly program reports, voucher on a monthly basis, and participate in all CDPH-sponsored site visits, evaluation, and quality assurance activities. Vouchers must be accompanied by appropriate documentation and contain adequate details for all expenses for which reimbursement is requested.

### **XIII. Additional Guidance**

#### **a. Bidders' Conference**

A virtual Bidders' Conference has been scheduled for April 9, 2025 at 12pm CST. The purpose of the Bidders' Conference is to provide an overview of this RFP, describe the proposal review process, and answer prospective respondents' questions. Organizations planning to apply for funding are strongly encouraged to participate in a Bidders' Conference.

### **XIV. Insurance Requirements**

The Chicago Department of Finance (Finance) has established minimum insurance requirements for applicants awarded federal or state funds. The types of insurance required include worker's compensation; general liability; a fidelity bond (if applicable); automobile liability; and professional liability. Finance reserves the right to require additional types of insurance.

Respondent, if selected, shall register with the City's online insurance certificate portal using the designated email registration link provided at <http://www.cityofchicago.org/COI> and as specified in Exhibit 122123. Respondent shall provide a current and valid email address for both the contractor and the contractor's insurance agent or provider, as described in further detail in Exhibit 122123. The Selected Respondent is responsible for ensuring the submission of a certificate of insurance (COI) through the City's online insurance certificate portal prior to award of a contract.

A Respondent selected for contract negotiation and award who fails to fulfill the requirement to register and submit a COI through the City's online insurance certificate portal may be deemed nonresponsive and the City may choose to instead engage a different Respondent for contract negotiation. If a Respondent is unable to register and submit the COI through the City's online insurance certificate portal and instead submits a printed insurance certificate prior to contract award, the City may accept a paper COI provided that written justification is provided explaining the Respondent's good faith efforts to comply with the terms of this section and the reasons why the submission could not be completed. Instructions for registering and submitting COIs are available at the following URL: <http://www.cityofchicago.org/COI>

### **XV. Compliance with Laws, Statutes, Ordinances and Executive Orders**

Grant awards will not be final until the City and the respondent have fully negotiated and executed a grant agreement. All payments under grant agreements are subject to annual appropriation and availability of funds. The City assumes no liability for costs incurred in responding to this RFP or for costs incurred by the respondent in anticipation of a grant agreement. As a condition of a grant award, respondents must comply with the following and with each provision of the grant agreement:

1. **Conflict of Interest Clause:** No member of the governing body of the City of Chicago or other unit of government and no other officer, employee, or agent of the City of Chicago or other government unit who exercises any functions or responsibilities in connection with the carrying out of the project shall have any personal interest, direct or indirect, in the grant agreement.

The respondent covenants that he/she presently has no interest, and shall not acquire any interest, direct, or indirect, in the project to which the grant agreement pertains which would conflict in any manner or degree with the performance of his/her work hereunder. The respondent further covenants that in the performance of the grant agreement no person having any such interest shall be employed.

If any Respondent has provided any services for the City in researching, consulting, advising, drafting, or reviewing of this RFP or any services related to this RFP, such Respondent may be disqualified from further consideration.

2. **Governmental Ethics Ordinance, Chapter 2-156:** All respondents agree to comply with the Governmental Ethics Ordinance, Chapter 2-156 which includes the following provisions: a) a representation by the respondent that he/she has not procured the grant agreement in violation of this order; and b) a provision that any grant agreement which the respondent has negotiated, entered into, or performed in violation of any of the provisions of this Ordinance shall be voidable by the City.
3. **Selected respondents:** shall establish procedures and policies to promote a Drug-free Workplace. The selected respondent shall notify employees of its policy for maintaining a drug-free workplace, and the penalties that may be imposed for drug abuse violations occurring in the workplace. The selected respondent shall notify the City if any of its employees are convicted of a criminal offense in the workplace no later than ten days after such conviction.
4. **Business Relationships with Elected Officials:** Pursuant to MCC Sect. 2-156-030(b), it is illegal for any elected official, or any person acting at the direction of such official, to contact either orally or in writing any other City official or employee with respect to any matter involving any person with whom the elected official has any business relationship that creates a financial interest on the part of the official, or the domestic partner or spouse of the official, or from whom or which he has derived any income or compensation during the preceding twelve months or from whom or which he reasonably expects to derive any income or compensation in the following twelve months. In addition, no elected official may participate in any discussion in any City Council committee hearing or in any City Council meeting or vote on any matter involving the person with whom the elected official has any business relationship that creates a financial interest on the part of the official, or the domestic partner or spouse of the official, or from whom or which he has derived any income or compensation during the preceding twelve months or from whom or which he reasonably expects to derive any income or compensation in the following twelve months. Violation of MCC Sect. 2-156-030 by any elected official with respect to this contract will be grounds for termination of this contract. The term financial interest is defined as set forth in MCC Chapter 2-156.
5. **Compliance with Federal, State of Illinois and City of Chicago** regulations, ordinances, policies, procedures, rules, executive orders and requirements, including Disclosure of

Ownership Interests Ordinance (Chapter 2-154 of the MCC); the State of Illinois - Certification Affidavit Statute (Illinois Criminal Code); State Tax Delinquencies (65ILCS 5/11-42.1-1); Governmental Ethics Ordinance (Chapter 2-156 of the MCC); Office of the Inspector General Ordinance (Chapter 2-56 of the MCC); Child Support Arrearage Ordinance (Section 2-92-380 of the MCC); and Landscape Ordinance (Chapters 32 and 194A of the Municipal Code).

6. **If selected for grant award:** respondents are required to (a) execute the Economic Disclosure Statement and Affidavit, and (b) indemnify the City as described in the grant agreement between the city and successful respondents.
7. **Prohibition on Certain Contributions, Mayoral Executive Order 2011-4.** No Contractor or any person or entity who directly or indirectly has an ownership or beneficial interest in Contractor of more than 7.5% ("**Owners**"), spouses and domestic partners of such Owners, Contractors, Subcontractors, any person or entity who directly or indirectly has an ownership or beneficial interest in any Subcontractor of more than 7.5% ("**Sub-owners**") and spouses and domestic partners of such Sub-owners (Contractor and all the other preceding classes of persons and entities are together, the "**Identified Parties**"), shall make a contribution of any amount to the Mayor of the City of Chicago (the "**Mayor**") or to his political fundraising committee during (i) the bid or other solicitation process for this Contract or Other Contract, including while this Contract or Other Contract is executory, (ii) the term of this Contract or any Other Contract between City and Contractor, and/or (iii) any period in which an extension of this Contract or Other Contract with the City is being sought or negotiated.

Contractor represents and warrants that since the date of public advertisement of the specification, request for qualifications, request for proposals or request for information (or any combination of those requests) or, if not competitively procured, from the date the City approached the Contractor or the date the Contractor approached the City, as applicable, regarding the formulation of this Contract, no Identified Parties have made a contribution of any amount to the Mayor or to his political fundraising committee.

Contractor shall not: (a) coerce, compel or intimidate its employees to make a contribution of any amount to the Mayor or to the Mayor's political fundraising committee; (b) reimburse its employees for a contribution of any amount made to the Mayor or to the Mayor's political fundraising committee; or (c) bundle or solicit others to bundle contributions to the Mayor or to his political fundraising committee.

The Identified Parties must not engage in any conduct whatsoever designed to intentionally violate this provision or Mayoral Executive Order No. 2011-4 or to entice, direct or solicit others to intentionally violate this provision or Mayoral Executive Order No. 2011-4.

Violation of, non-compliance with, misrepresentation with respect to, or breach of any covenant or warranty under this provision or violation of Mayoral Executive Order No. 2011-4 constitutes a breach and default under this Contract, and under any Other Contract for which no opportunity to cure will be granted. Such breach and default entitles the City to all remedies (including without limitation termination for default) under this Contract, under Other Contract, at law and in equity. This provision amends any Other Contract and supersedes any inconsistent provision contained therein.

If Contractor violates this provision or Mayoral Executive Order No. 2011-4 prior to award of the Contract resulting from this specification, the Commissioner may reject Contractor's bid.

For purposes of this provision:

"Other Contract" means any agreement entered into between the Contractor and the City that is (i) formed under the authority of MCC Ch. 2-92; (ii) for the purchase, sale or lease of real or personal property; or (iii) for materials, supplies, equipment or services which are approved and/or authorized by the City Council.

"Contribution" means a "political contribution" as defined in MCC Ch. 2-156, as amended.

"Political fundraising committee" means a "political fundraising committee" as defined in MCC Ch. 2-156, as amended.

8. (a) The City is subject to the June 16, 2014 "City of Chicago Hiring Plan" (the "2014 City Hiring Plan") entered in *Shakman v. Democratic Organization of Cook County*, Case No 69 C 2145 (United States District Court for the Northern District of Illinois). Among other things, the 2014 City Hiring Plan prohibits the City from hiring persons as governmental employees in non-exempt positions on the basis of political reasons or factors.

(b) Contractor is aware that City policy prohibits City employees from directing any individual to apply for a position with Contractor, either as an employee or as a subcontractor, and from directing Contractor to hire an individual as an employee or as a Subcontractor. Accordingly, Contractor must follow its own hiring and contracting procedures, without being influenced by City employees. Any and all personnel provided by Contractor under this Contract are employees or Subcontractors of Contractor, not employees of the City of Chicago. This Contract is not intended to and does not constitute, create, give rise to, or otherwise recognize an employer-employee relationship of any kind between the City and any personnel provided by Contractor.

(c) Contractor will not condition, base, or knowingly prejudice or affect any term or aspect of the employment of any personnel provided under this Contract, or offer employment to any individual to provide services under this Contract, based upon or because of any political reason or factor, including, without limitation, any individual's political affiliation, membership in a political organization or party, political support or activity, political financial contributions, promises of such political support, activity or financial contributions, or such individual's political sponsorship or recommendation. For purposes of this Contract, a political organization or party is an identifiable group or entity that has as its primary purpose the support of or opposition to candidates for elected public office. Individual political activities are the activities of individual persons in support of or in opposition to political organizations or parties or candidates for elected public office.

(d) In the event of any communication to Contractor by a City employee or City official in violation of paragraph (b) above, or advocating a violation of paragraph (c) above, Contractor will, as soon as is reasonably practicable, report such communication to the Hiring Oversight Section of the City's Office of the Inspector General, and also to the head of the relevant City Department utilizing services provided under this Contract.

Contractor will also cooperate with any inquiries by the City's Office of the Inspector General Hiring Oversight.

**9. False Statements**

**(a) 1-21-010 False Statements**

Any person who knowingly makes a false statement of material fact to the city in violation of any statute, ordinance or regulation, or who knowingly makes a false statement of material fact to the City in connection with any application, report, affidavit, oath, or attestation, including a statement of material fact made in connection with a bid, proposal, contract or economic disclosure statement or affidavit, is liable to the city for a civil penalty of not less than \$500.00 and not more than \$1,000.00, plus up to three times the amount of damages which the city sustains because of the person's violation of this section. A person who violates this section shall also be liable for the city's litigation and collection costs and attorney's fees.

The penalties imposed by this section shall be in addition to any other penalty provided for in the municipal code. (Added Coun. J. 12-15-04, p. 39915, § 1; Amend Coun. J. 3-18-09, p. 56013, § 1)

**(b) 1-21-020 Aiding and Abetting.**

Any person who aids, abets, incites, compels, or coerces the doing of any act prohibited by this chapter shall be liable to the city for the same penalties for the violation. (Added Coun. J. 12-15-04, p. 39915, § 1)

**(c) 1-21-030 Enforcement.**

In addition to any other means authorized by law, the corporation counsel may enforce this chapter by instituting an action with the department of administrative hearings. (Added Coun. J. 12-15-04, p. 39915, § 1)

**10. Labor Peace Agreement Ordinance (MCC 2-112-205)**

All respondents must agree to comply with the requirements of Section 2-112-205, *Essential service contracts*, of the Municipal Code of Chicago, as provided below in part:

**(a) Definitions.** For purposes of this section, the following definitions shall apply:

"Commissioner" means the Commissioner of Public Health, or the Commissioner's designee.

"Contract" means an agreement entered into between the City, through the Department of Public Health, and a Contractor to perform Essential Services.

"Contractor" means a person, as defined by Section 1-4-090(e), contracting directly with the City through the Department of Public Health to perform Essential Services, where the Contractor has 20 or more employees. "Contractor" does not include hospitals licensed pursuant to the Illinois Hospital Licensing Act, 210 ILCS 85,

or any hospital affiliate as defined by the Illinois Hospital Licensing Act, 210 ILCS 85/10.8(b), or any hospital licensed pursuant to the University of Illinois Hospital Act, 110 ILCS 330.

"Employee" means those employees directly performing Essential Services under a Contract. The term "Employee" excludes employees who work for the Contractor, but do not provide Essential Services under the Contract, management or supervisory or other employees who do not enjoy a right to engage in strikes, work stoppages, or other concerted activities.

"Essential Services" means health and social services.

"Labor Peace Agreement" means an agreement between a Contractor and a labor organization that

(i) prohibits the labor organization and its members from engaging in work stoppages, boycotts, or any other activity that may interfere or hinder the performance of a Contract for the duration of the Contract; and

(ii) contains a means of resolving disputes between the Contractor and the labor organization.

*(b) Terms of Contracts.*

(1) The Commissioner, in the interest of preventing a disruption of Essential Services and protecting the City's financial and proprietary interest in the provision of such Essential Services, shall ensure that all Contracts that are entered into after the effective date of this section shall require:

(A) written notice be provided by the Contractor to the Commissioner administering the Contract, or the Commissioner's designee, within 72 hours of when the Contractor:

- (i) becomes aware of any threatened, imminent, or actual strike, work stoppage, or other concerted activity that may interfere or hinder the work performed by Employees;
- (ii) is informed that Employees seek to be represented by a labor organization, join a labor organization, or otherwise elect to self-organize for the purpose of engaging in concerted activity;
- (iii) receives a notice or announcement from a labor organization that it represents or seeks to represent the Employees; or
- (iv) enters into a Labor Peace Agreement, Collective Bargaining Agreement, or the expiration or breach of any such agreement.

(B) that the Contractor shall not prohibit, retaliate, or otherwise coerce Employees with respect to rights guaranteed by the First Amendment of the United States Constitution or any other rights afforded by federal or state laws.

(2) Within 90 days of subsection (b)(1)(A)(ii) or subsection (b)(1)(A)(iii) occurring, that the Contractor enter into a Labor Peace Agreement with the labor organization.



(c) The provisions of subsection (b) shall be material terms of any Contract entered into by the City, the breach of which by a Contractor shall be grounds to terminate or decline to renew the Contract.

(d) A Contractor is in compliance with this Section 2-112-205 if (1) the Contractor remains in compliance with subsection (b), or (2) the Contractor and the Employees have a collective bargaining agreement with a labor organization, or (3) no labor organization represents or seeks to represent the Employees.