



Bureau for Behavioral Health (BBH)

Announcement of Funding Availability (AFA)

Children's Mobile Crisis Response and Stabilization Teams

BBH Region 1 (Hancock, Brooke, Ohio, Marshall, and Wetzel Counties) and Region 2 (Pendleton, Grant, Hardy, Mineral, Hampshire, Morgan, Jefferson, and Berkeley Counties)



Proposal Guidance and Instructions

AFA Title: Children’s Mobile Crisis Response and Stabilization Team Targeting BBH Region 1 (Hancock, Brooke, Ohio, Marshall, and Wetzel Counties) and Region 2 (Pendleton, Grant, Hardy, Mineral, Hampshire, Morgan, Jefferson, and Berkeley Counties)
AFA Number: 8-2020-CMH

West Virginia Department of Health and Human Resources
Bureau for Behavioral Health
350 Capitol Street, Room 350
Charleston, WV 25301-3702

*For **Technical Assistance**, please include the AFA number in the subject line and forward all inquiries in writing to DHHRBBHAnnouncements@wv.gov*

Key Dates	
Date of Release:	December 13, 2019
Technical Assistance Call:	January 15, 2020, at 1:30 p.m.
Application Deadline:	February 7, 2020
Funding Announcement(s) To Be Made:	February 21, 2020
Funding Amount Available:	\$404,213.00 per region (with an enhancement of up to 45% for demonstrated need)

The following are requirements for the submission of proposals to BBH:

- ☛ Responses must be submitted electronically using the required Proposal Template available at <http://www.dhhr.wv.gov/bhhf/afa/Pages/default.aspx> to DHHRBBHAnnouncements@wv.gov with “Proposal for Funding” and the AFA number in the subject line. Paper copies of proposals will not be accepted. Receipt confirmation will follow by email from the BBH Announcements mailbox.
- ☛ A Statement of Assurance agreeing to the terms of this AFA is required of all proposal submissions. Available at dhhr.wv.gov/bhhf/afa, this statement must be signed by the agency’s CEO, CFO, and Project Officer and attached to the Proposal Template.
- ☛ To request **Technical Assistance**, please email all inquiries to DHHRBBHAnnouncements@wv.gov and include “Technical Assistance Question” and the AFA number in the subject line. Questions must be received at least two days before the technical assistance call.

SECTION 1. FUNDING AVAILABILITY OVERVIEW

The West Virginia Department of Health and Human Resources (DHHR), Bureau for Behavioral Health (BBH) is soliciting applications from licensed behavioral health agencies with direct children's service experience to provide mobile crisis response services for children, youths, and their families. "Children's Mobile Crisis Response and Stabilization" is a crisis response program for children that includes a hotline and mobile crisis response teams that assess and evaluate the presenting crisis, provide interventions to stabilize the crisis, and provide timely supports and skills necessary to return children, youths, and their families to routine functioning and maintain children and youths in their homes, whenever possible. These services are delivered in a non-clinical setting. Mobile crisis response teams consist of a clinical supervisor and crisis specialists who provide direct services to children, youths, and families.

BBH aims to provide Children's Mobile Crisis Response services statewide in 2020 with a toll-free crisis hotline and crisis response teams that are available throughout the state and staffed 24-hours per day, seven days per week. This announcement of funding availability (AFA) seeks applicants to provide Children's Mobile Crisis Response services in BBH Regions 1 (the northern panhandle) and 2 (eastern panhandle) to children and youths up to age 21, regardless of funding eligibility, to prevent unnecessary institutionalization of children and youths with serious mental health crises. (BBH previously released AFA 3-2019 for statewide Children's Mobile Crisis Response services in May 2019, but no providers applied in Region 1 or 2.) Callers will be directly connected to a trained mental health professional with experience or competency-based training in working with children and youths in crisis. Intensive support and stabilization services will be offered and delivered in person within an hour of the call for up to 72 hours in family homes, schools, group care, and other settings natural to the child, youth, and family. Crisis intervention, crisis assessment, and development of a crisis plan will include presumptive eligibility for crisis services, engagement, de-escalation, assessment, planning, and coordination of supports and services.

Applicants should address each of the following topics in their proposals:

- **how coordination with existing resources will optimize funding;**
- **how they will braid state funding with Medicaid and other federal funding;**
- **how they will partner with BBH Children's Mental Health Wraparound and Regional Youth Service Centers in their respective counties and regions;**
- **how they will partner with other BBH programs and services, as well as other community agencies and partners, to ensure region-wide coverage and timely services;**
- **what will they do to help build sustainability of community services and supports;**
- **how they will contribute to the development of a state crisis line and clinical review system for children; and**
- **how data will be collected to measure outcomes for families, youths, and children who receive services.**

Applicants will be expected to be visible resources in their communities by working closely with community partners, including organizations for children and families, law enforcement, court systems, school systems, physicians, and hospital emergency rooms. Funding will be awarded based on accepted proposals that meet all the required criteria contained within this document.

Staffing expectations for Mobile Crisis are as follows:

- Mobile Crisis Response and Stabilization services shall be delivered directly by, or under the supervision of, a behavioral clinician licensed in a behavioral health field (e.g., psychiatry, social work, counseling, psychology, or psychiatric nursing) who has the authority to provide, or supervise the provision of, these services.
- The direct care staff (i.e., crisis specialists) of the Mobile Crisis Response agency shall either possess a bachelor's degree in a behavioral health or related human services field (e.g., social work, counseling, or psychology) and have a minimum of one year of related field work experience; or possess a master's degree in a behavioral health or related human services field.
- All Mobile Crisis staff must successfully complete a criminal background check and child abuse registry check.

While not required to be funded through this grant, the successful applicant will collaborate with the Regional Youth Service Center and Children's Mental Health Wraparound program to provide the following supports to families:

- A parent peer mentor with either lived experience parenting children or youths with social, emotional, behavioral, or substance use challenges; or a bachelor's degree in a behavioral health or related human services field.
- A youth peer mentor with either lived experience of recovery from mental health disorders or an associate degree in behavioral health or related human services field.

This AFA was made possible by state general revenue funds. **Funding available is \$404,213 per region, but the funding may be enhanced up to 45% for Regions 1 and 2 based upon a successful applicant's demonstrated need. Unique circumstances of the panhandles include workforce challenges in competing with neighboring states and other industries for qualified staff and attractive salaries.**¹ Funding will be available beginning January 1, 2020, for a prorated, six-month first year through June 30, 2020. It is anticipated that this program will be renewed annually on July 1 until a new AFA in three to five years.

SECTION 2. PROPOSAL INSTRUCTIONS/REQUIREMENTS

All proposals for funding will be reviewed by BBH staff for administrative compliance, service need, and feasibility. A review team, including reviewers independent of BBH, will review the full proposals. Proposals must contain the following components:

- ✎ A completed Proposal for Funding Application, available at

<http://www.dhhr.wv.gov/bhhf/afa/Pages/default.aspx>

- ✎ A Proposal Narrative of up to 15 pages with the following sections:

- ✓ **Statement of Need and Population of Focus (5 points):** Describe the need for the proposed service(s). Applicants should identify and provide relevant data on the target population to be served, as well as the geographic area to be served, to include the specific region(s) and county(ies) and existing service gaps. Applicants should also explain how the community currently

¹ See Eastern Panhandle and Wheeling Area Economic Outlooks 2019-2023 at <https://business.wvu.edu/research-outreach/bureau-of-business-and-economic-research/economic-outlook-conferences-and-reports>.

addresses the need for crisis response to children with behavioral health needs.

- ✓ **Proposed Evidence-Based Service/Practice (20 points):** Delineate the program/service being proposed, set forth the goals and objectives for the proposed service(s), and list all evidence-based practices (EBPs) that will be used. Applicants should describe how the proposed services/interventions will be trauma informed and promote family engagement. Applicants should also identify creative outreach methods to serve geographically isolated families in their region(s).

- ✓ **Proposed Implementation Approach (30 points):** Describe how the applicant intends to implement the proposed service(s), including the following:
 - A description of the strategies/service activities proposed to achieve the goals and objectives identified above, those responsible for action, and a one-year timeline for these activities, including planning/development, training/consultation, outreach and marketing, implementation, and data management.
 - A description of program sustainability, including how existing resources/services and alternative funding sources will be exhausted before using this grant funding. A grantee must seek reimbursement from any and all third-party administrators or coverage providers including private insurance; Medicaid and the Children’s Health Insurance Program (CHIP); and state funds from DHHR. This will be a crucial element of the proposal.
 - A detailed description of the circumstances underlying the applicant’s need for enhanced funding, if any.
 - A proposed budget that reflects the required staffing and activity requirements in this AFA.
 - An explanation of how the agency will structure and develop crisis response and stabilization services to meet the specific needs of the target population. Applicants are encouraged to explore cooperative agreements or creative solutions to ensure region-wide coverage and timely services.
 - Identification of specific service development needs and barriers in each county the applicant proposes to serve and how the applicant will work collaboratively to ensure that each of the necessary services are made available to help support children, youths, and families. If service development is required in order to be able to sustain the child or youth at home as an alternative to residential behavioral health services, applicants must explain what additional services are needed, how current services may need to be enhanced, and how the applicant will either develop or collaborate with existing stakeholders to develop what is needed.

- ✓ **Staff and Organization Experience (10 to 15 points):** Describe the applicant’s existing capacity to carry out the proposed services to include its experience and qualifications to reach and serve the target population. Agencies with experience as BBH grantees, including as providers of Children’s Mobile Crisis and Stabilization services, will receive up to five extra points upon an advanced administrative review of the grantee’s previous performance with BBH grants.

- ✓ **Data Collection and Performance Measurement (30 points):** Describe the information/data the applicant plans to collect, as well as the process for using data to manage and improve quality of the service, ensuring each goal is met and assessing outcomes within the target population. The ability to collect and report data regarding utilization and outcomes is another crucial element in the proposal.

- ✓ **References/Works Cited (5 points):** All sources referenced or used to develop this proposal must be included on this page. This list does not count toward the 15-page limit.
- ✎ Applicants must use 12-point Arial or Times New Roman font, single line spacing, and one-inch margins. Charts and footnotes may be 10-point font. Page numbers must also be included in the footer. The Project Narrative must not exceed 15 pages. References and attachments do not count toward the page limit.
- ✎ **Attachment 1. Targeted Funding Budget(s) and Budget Narrative(s).**
 - ✓ **Targeted Funding Budget (TFB) form**, which includes sources of other funds where indicated on the TFB form. A separate TFB form is required for any capital or start-up expenses. This form and instructions are located at <http://www.dhhr.wv.gov/bhhf/forms/Pages/FinancialForms.aspx>
 - ✓ **Budget Narrative for each Targeted Funding Budget (TFB) form**, with specific details on how funds are to be expended. The narrative should clearly specify the intent of and justify each line item in the TFB. The narrative should also describe any potential for other funds or in-kind support. The Budget Narrative is a document created by the applicant and not a BBH fiscal form.
- ✎ **Attachment 2. Applicant Organization's Valid WV Business License.** The applicant organization must be a licensed behavioral health agency.
- ✎ **Attachment 3. Memoranda of Understanding (MOUs) and letters of support.** MOUs or letters of support must be submitted with the application to demonstrate established partnerships between community behavioral health providers and other potential community organizations. Please list full partner information, including agency name, address, phone, key contact person and email address.

SECTION 3. EXPECTED OUTCOMES AND PERFORMANCE MEASURES

Expected Outcomes

1. Increase Mobile Crisis Response and services to children, youths, and their families in crisis.
2. Reduce child and youth psychiatric admissions, out-of-home placements, out-of-state placements, school disciplinary actions, days absent from school or work, and juvenile justice or other court involvement.

Performance Measures

1. Maintain and provide documentation of ALL activities related to service areas indicated by:
 - a. Number of Unduplicated Persons Served by Type of Activity.
 - b. Number of Unduplicated Persons Served by Age, Gender, Race and Ethnicity, and Diagnosis(es).
2. Maintain and provide documentation related to the following:
 - a. Number of Cross Planning (partnering/multi-system collaborative) initiatives and service activities implemented with other sectors indicating type and number.
 - b. Number and type of professional development trainings attended and provided.
 - c. Number, type (focus groups, surveys, or key-informant interviews), and aggregate results of consumer feedback activities conducted.

- d. Resources and services developed and made available in the service area.
3. BBH is developing specific reporting requirements that will be instrumental in measuring the individual and systemic outcomes of the Mobile Crisis Response and Stabilization services. Examples of reporting requirements BBH is establishing include the following:
- Timeliness of the connection from the toll-free telephone number to initiation of crisis response.
 - Lengths of time mobile response services are provided.
 - Timeliness of response to the site of the escalating behavior.
 - Number of crisis assessments completed.
 - Number of Individualized Crisis Plans (ICP) developed.
 - Number of children and youths requiring hospitalization.
 - Number of crisis alternative placements accessed, by type of placement.
 - Number of children requiring a placement other than a crisis bed, by type of placement.
 - Number of children maintained or returned, within one week, to their current living arrangement.
 - Number of children maintained in their current living arrangement.
 - Census reports regarding the Medicaid status of the children served.
 - Referrals made and if the families receiving assistance used recommended services and resources.
 - Number of school suspensions, expulsions, and absences for each children or youth.

Please note that BBH grantees must submit all service data reporting by the 25th working day of each month.

SECTION 4. CONSIDERATIONS

LEGAL REQUIREMENTS

Eligible applicants are public or private organizations with a valid West Virginia Business License and/or unit of local government. If the applicant is not already registered as a vendor in the State of West Virginia, registration must either be completed prior to award or the vendor must demonstrate proof of such application.

The Grantee is solely responsible for all work performed under the agreement and shall assume all responsibility for services offered and products to be delivered under the terms of the award. The State shall consider the designated Grantee applicant to be the sole point of contact regarding all contractual matters. The Grantee may, with the prior written consent of the State, enter into written sub-agreements for performance of work; however, the Grantee shall be responsible for payment of all sub-awards.

STARTUP COSTS

Applicants who wish to request reasonable startup funds for their programs must submit a separate “startup” target funded budget (TFB) and budget narrative along with their proposal narrative. For the purposes of this funding, startup costs are defined as non-recurring costs associated with the initiation

of a program. These include costs such as fees, registrations, training, equipment purchases, renovations, or capital expenditures.

For the purposes of proposal review, all startup cost requests submitted by the applicant will be necessary for the development of the proposed program. If, when taken together, the startup costs and program costs exceed funding availability, BBH will contact the applicant organization and arrange a meeting to discuss remedial action.

FUNDING REIMBURSEMENT

Mobile Crisis Response and Stabilization grants will be awarded on a scheduled-payment basis. All expenditures must be incurred within the approved grant project period in order to be reimbursed. Providers must maintain timesheets for grant-funded personnel, and activities performed should be consistent with the stated program objectives.

OTHER FINANCIAL INFORMATION

Allowable Costs:

Please note that Departmental policies are predicated on requirements and authoritative guidance related to federal grants management and administrative rules and regulations, Grantees shall be required to adhere to those same requirements when administering other DHHR grants or assistance programs, the source of which is non-federal funds (e.g., state-appropriated general revenue and appropriated or non-appropriated special revenue funds) unless specifically provided direction to the contrary.

Cost Principles:

Subpart E of Title 2, Part 200 of the Code of Federal Regulations (2 CFR 200) establishes principles for determining the allowable costs incurred by non-federal entities under Federal awards. The Grantee agrees to comply with the cost principles set forth within 2 CFR 200 Subpart E, regardless of whether the Department is funding this grant award with federal pass-through dollars, state-appropriated dollars or a combination of both.

Grantee Uniform Administrative Regulations, (Cost Principles, and Audit Requirements for Federal Awards):

Title 2 CFR 200 establishes uniform administrative requirements, cost principles and audit requirements for federal awards to non-federal entities. Subparts B through D of 2 CFR 200 set forth the uniform administrative requirements for grant agreements and for managing federal grant programs. The Grantee agrees to comply with the uniform administrative requirements set forth within 2 CFR 200 Subparts B through D, regardless of whether the Department is funding this grant award with federal pass-through dollars, state appropriated dollars or a combination of both.