



Bureau for Behavioral Health

Announcement of Funding Availability (AFA)
Screening, Brief Intervention, and Referral to Treatment
(SBIRT)



**AFA Title: Screening, Brief Intervention and Referral to
Treatment (SBIRT)**

Targeting Regions: Statewide

AFA Number: AFA-01-2022

**West Virginia Department of Health and Human Resources
Bureau for Behavioral Health**

**For Technical Assistance, please include AFA 01-2022 (SBIRT) in the
subject line and forward all inquiries in writing to:**

DHHRBBHAnnouncements@wv.gov

Key Dates	
Technical Assistance	Submit written requests to DHHRBBHAnnouncements@wv.gov
Application Deadline	January 14, 2022, by 11:59PM
Maximum Awards To Be Made	8 Awards
Funding Amount Available	\$62,500 per site
Target Area to be Served	Statewide

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

- **NEW PROCESS FOR APPLICATION SUBMISSION:** All proposals must be submitted through the WVOASIS Vendor Self Services (VSS Portal) at <https://www.wvoasis.gov/> For more information and training on application submission, please use visit the following links.
 - [Search VSS for Grant Funding Opportunities \(GFO\)](#)
 - [Completing a Grant Funding Application \(GFA\) in VSS - \(Part 1\)](#)
 - [Completing a Grant Funding Application \(GFA\) in VSS - \(Part 2\)](#)
- A Statement of Assurance agreeing to these terms is required of all proposal submissions available <https://dhhr.wv.gov/BBH/funding/Pages/Applying-for-Funding.aspx>. This statement must be signed by the agency's CEO, CFO, and Project Officer.

- To request Technical Assistance, forward all inquiries via email to DHHRBBHAnnouncements@wv.gov and include the AFA Number and “Proposal Technical Assistance” in the subject line.

FUNDING AVAILABILITY

Funding has been designated for the development of sites for the provision of Screening, Brief Intervention, and Referral to Treatment (SBIRT). The intent of this Announcement of Funding Availability (AFA) is to add eight new SBIRT sites across the state in the following settings: school based mental health, primary care practices, Federally Qualified Health Centers (FQHC), hospitals, criminal justice settings, veteran services centers, and colleges/universities. Made possible through federal funding, this AFA is part of a statewide plan to continue the expansion of behavioral health services to adults, youth, and their families. Please note that Providers currently offering BBH funded SBIRT services are not eligible for this AFA.

Grants will cover expenses related to planning and implementation of services and may include:

- Hiring of two (2) full time positions to screen, provide short term treatment and refer when appropriate.
- Related expenses, e.g., supplies, copies, conference calls, and travel to training/technical assistance meetings.

Funding will be awarded to the highest-scoring proposals that meets the required criteria contained within this AFA. It is anticipated that this program will be renewed annually, with a new AFA issued every three to five years. Technical assistance and training will be provided for the new sites by the Bureau of Behavioral Health.

Section One: INTRODUCTION

The Department of Health and Human Resource (DHHR) envisions healthy communities where integrated resources are accessible for everyone to achieve wellness, personal goals, and a self-directed future. The goal of DHHR is to collaborate with stakeholders to promote, protect, manage, and provide appropriate health and human services for the people of West Virginia, to improve their health, well-being, and quality of life. Programs will be conducted in an effective, efficient, and accountable manner, with respect for the rights and dignity of the employees and the public served. The BBH supports evidence-based programs that promote social and emotional well-being, prevention

approaches, person-centered interventions and self-directed and/or recovery driven support services.

The impact of COVID-19 has resulted in isolation and reduced access to services. As a result, West Virginia has experienced an increase in substance misuse, resulting in increased overdose fatalities and other serious consequences. Therefore, early screening for substance use disorder and provision of the appropriate intervention is vital. Screening will be integrated into the workflow of the proposed site, with emphasis on screening all consumers (“universal screening”) who enter that service location. Brief interventions and short-term treatment (group or individual) must be provided on-site.

Section Two: **SERVICE DESCRIPTION**

Screening, Brief Intervention, and Referral to Treatment

Purpose

BHH recognizes the critical link between social and emotional well-being and substance misuse. The Substance Abuse and Mental Health Services Administration (SAMHSA) defines SBIRT as a comprehensive, integrated, public health approach to the delivery of early intervention for individuals with risky alcohol and drug use, and the timely referral to more intensive substance misuse treatment for those who have substance use disorders. A paradigm shift from traditional models of substance abuse interventions, SBIRT views substance misuse as a public health issue and focuses on risk reduction as well as abstinence and identifying “misuse” early to avoid related consequences later. SBIRT has been endorsed by the American Medical Association, The National Office of Drug Control Policy and the Health Resources Services Administration (HRSA).

The SBIRT model can be integrated into the workflow of existing sites either electronically or via paper screenings. BBH encourages use of each of the screening instruments below:

The West Virginia 4 Question Brief Pre-Screening Test

Michigan Alcohol Screening Test (MAST)

Drug Abuse Screening Test (DAST) (Illicit Drug Use)

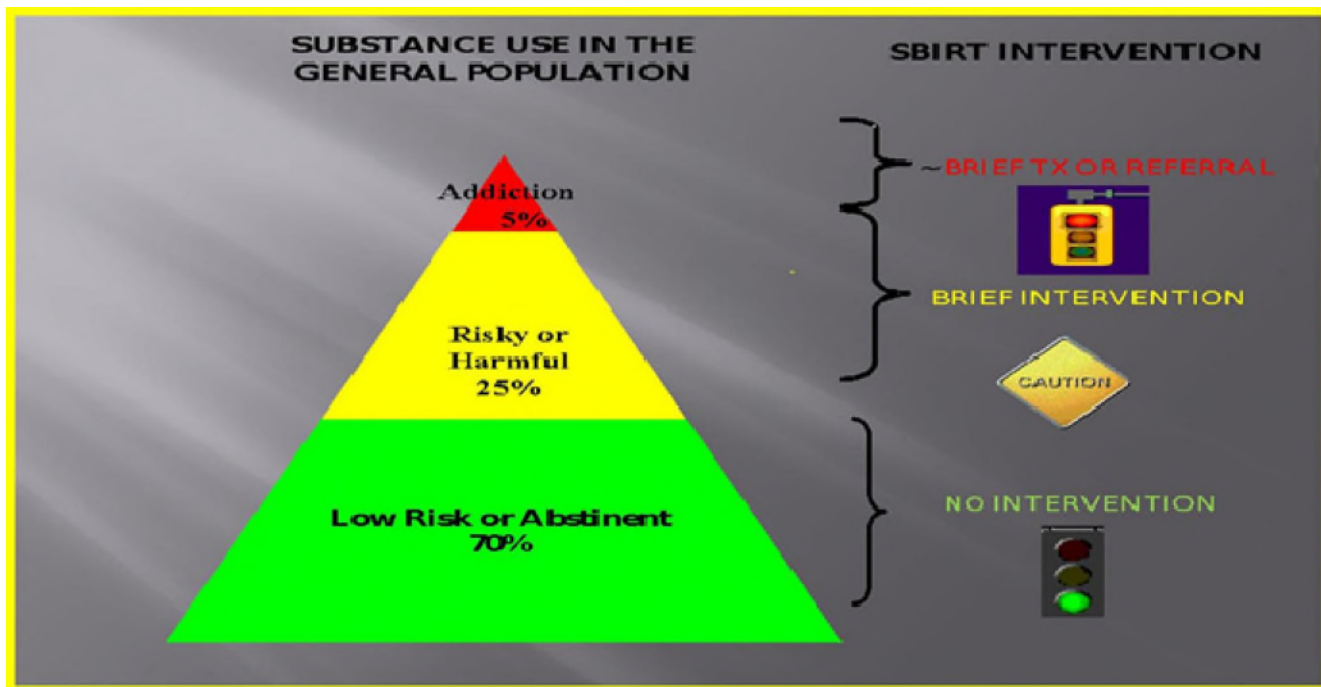
Alcohol, Smoking, and Substance Involvement Screening Test (ASSIST)

Physical Health Questionnaire (PHQ-9) (Depression)

General Anxiety Disorder (GADS-7)
Prenatal Risk Screening Instrument (for pre or post pregnancy)

When recipients screen positive on the West Virginia Brief Pre-screen, further screening will be provided to determine their level of risk. The individual will be referred to either a brief intervention, on-site brief treatment services, or a licensed behavioral health center for further screening and treatment (including Medication Assisted Treatment) based on his or her risk level. Motivational Interviewing will be used to determine the stage of change and facilitate referral to appropriate services. Please note that screening must include screening for co-occurring mental health disorders.

For further information on SBIRT as an evidenced-based practice, please visit <https://www.samhsa.gov/sbirt>.



Section Three: **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:
<https://dhhr.wv.gov/BBH/funding/Pages/Applying-for-Funding.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), county(ies), and existing service gaps. Applicants should also explain how the community currently addresses the prevention and behavioral health needs of children.
- **Proposed Evidence-Based Service/Practice (5 points):** Identify and list the evidence-based service/practice being proposed, identify the goals and objectives for the proposed service(s), and list all evidence-based programs (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 evidence-based outreach methods to serve geographically isolated families in their region(s).
- **Proposed Implementation Approach (45 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, staff responsible for the activity and one (1) year/twelve (12) month timeline for these activities. Please include activities related to planning/development, training/consultation, implementation, and data management.
 - Describe the plan for achieving program sustainability, including how alternative funding sources will be obtained. Grantees must seek reimbursement from any third-party administrators or coverage providers, including but not limited to, private insurance, Medicaid, and the Children's Health Insurance Program (CHIP). Please provide an estimate for the number of unduplicated individuals to be served annually.
- **Staff and Organizational Experience (10 points):** Describe the applicant's existing capacity to carry out the proposed services, to include the applicant's experience and qualifications to reach and serve the target population. An organizational chart may be included but is not required.
- **Data Collection and Performance Measurement (20 points):** Describe the information/data the applicant plans to collect, as well as the proposed process for using data to measure and improve the quality of the service, ensuring each goal is met and assessing outcomes within the target population.
- **Targeted Funding Budget(s) and Budget Narrative(s) (10 points):** Describe with specific details how the awarded funds will be expended. The narrative should clearly specify the intent of and justify each line item

in the Targeted Funding Budget(s). The narrative should also describe any potential for other funds or in-kind support.

- **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 or graphs may be no smaller than 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 startup expenses. This form and instructions are located at: <https://dhr.wv.gov/BBH/funding/Pages/Applying-for-Funding.aspx>
- Budget Narrative for each Targeted Funding Budget (TFB) form, with specific details 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's Valid West Virginia Business License.

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 collaborative community organizations. Please list full partner information, including agency name, address, phone number, key contact person, and email address.

Section Four: EXPECTED OUTCOMES/PERFORMANCE MEASURES

Expected Outcomes:

1. Increase in the number of unduplicated individuals screened
2. Increase in the number of unduplicated individuals screened and provided a brief intervention
3. Increase in the number of unduplicated individuals screened and are provided on-site treatment services (individual or group)
4. Increase in the number of unduplicated individuals referred to more intensive screening and referred to treatment services

Performance Measures:

1. Maintain and provide documentation of ALL activities related to service area(s) indicated by:
 - a. Number of Individuals Served by Type of Activity.
 - b. Number of Unduplicated Individuals Served by Age, Gender, Race and Ethnicity and Diagnosis(es).
2. Maintain and provide documentation related to the following:
 - a. Number of Cross Planning initiatives (e.g., Interagency meetings, Community Collaboratives, Regional Summits, and Local Task Forces), and service activities implemented with other sectors (e.g., resource fairs, community presentations), indicating both the type and number.
 - b. Number and type of professional development trainings/events held and attended.
 - c. Number, type (focus groups, surveys, or key-informant interviews), and aggregate results of consumer feedback activities conducted.

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

Section Five: 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 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 purpose 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 budget action.

FUNDING REIMBURSEMENT

The grant will be awarded on a schedule-of-payment (SOP) 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 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 DHHR 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, Part 200 of the Code of Federal Regulations (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 DHHR is funding this grant award with federal pass-through dollars, state appropriated dollars or a combination of both.