

Announcement of Funding Availability

Children's Mobile Crisis Response and Stabilization Teams



Proposal Guidance and Instructions

**AFA Title: Children’s Mobile Crisis Response and Stabilization
Teams
Targeting Regions: Statewide
AFA Number: 3-2019**

**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:	May 16, 2019
Technical Assistance Meeting:	May 24, 2019
Application Deadline:	June 14, 2019, at 5:00 p.m. EDT
Funding Announcement(s) To Be Made:	June 24, 2019
Funding Amount Available:	Not to exceed \$404,213.00 per region

The following are requirements for the submission of proposals to the 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 “Proposal Technical Assistance” and the AFA number in the subject line.

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.

Children's Mobile Crisis Response shall be available statewide 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. Children's Mobile Crisis Response shall provide toll-free crisis hotline services and Crisis Response Teams that are available throughout the state and staffed 24-hours per day, seven days per week. 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 the 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;**
- **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.**

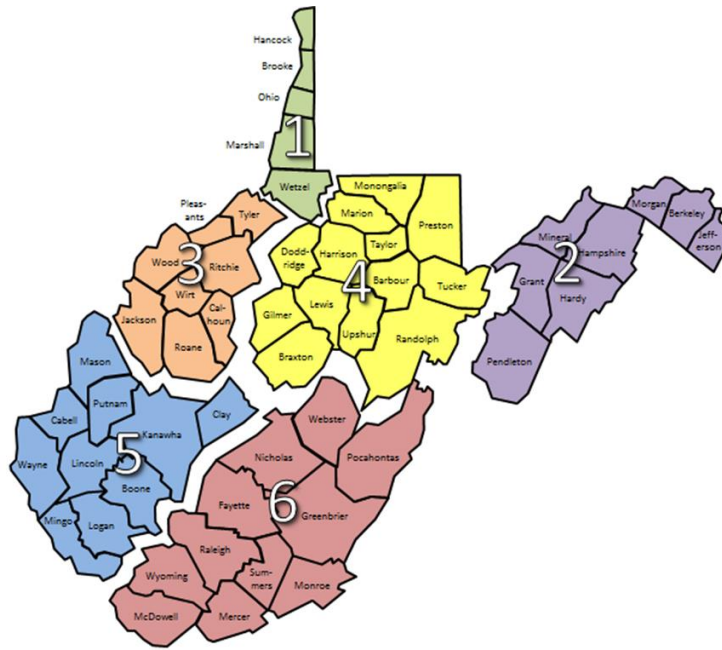
Applicants will be expected to be visible resources in their communities by working closely with community partners, including organizations for children and families, law enforcement, court systems, school systems, physicians, and hospital emergency rooms. Funding will be awarded based on accepted proposals 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.
- The parent peer mentor must either have lived experience parenting children or youths with social, emotional, behavioral, or substance use challenges; or possess a bachelor's degree in a behavioral health or related human services field. He or she will complete specialized training to support parents and caregivers.
- The youth peer mentor must have either lived experience of recovery from mental health disorders or an associate degree in behavioral health or related human services field. He or she will complete formal training or education in peer support recovery.
- All Mobile Crisis staff must successfully complete a criminal background check and child abuse registry check.

This announcement of funding availability was made possible by state general revenue funds. Funding will be available for the one-year state fiscal grant period of July 1, 2019, through June 30, 2020. It is anticipated that this program will be renewed annually with a new announcement of funding availability (AFA) every three to five years. Children's Mobile Crisis Response will have a staggered rollout as follows:

BBH REGIONS	Number of Locations	Services Begin
Region 1 Brooke, Hancock, Marshall, Ohio, Wetzel	1	July 1, 2019
Region 2 Berkeley, Grant, Hardy, Hampshire, Jefferson, Mineral, Morgan, Pendleton	2	July 1, 2019
Region 3 Calhoun , Jackson, Pleasants, Ritchie, Roane, Tyler, Wirt, Wood	2	July 1, 2019
Region 4 Barbour , Braxton, Doddridge, Gilmer, Harrison, Lewis, Marion, Monongalia, Preston, Randolph, Taylor, Tucker, and Upshur	3	October 1, 2019
Region 5 Boone, Cabell, Clay, Kanawha, Lincoln, Logan, Mason, Mingo, Putnam, Wayne	3	October 1, 2019
Region 6 Fayette, Greenbrier, McDowell, Mercer, Monroe, Nicholas, Pocahontas, Raleigh, Summers, Webster, Wyoming	3	October 1, 2019



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 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 evidenced-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.
- An explanation of how the agency will structure and develop crisis response and stabilization services to meet the specific needs of the target population.
- 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 providing Children's Mobile Crisis and Stabilization Services will receive an extra five points.

✓ **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. 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, 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 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, 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 the Department is funding this grant award with federal pass-through dollars, state appropriated dollars or a combination of both.