



Office of Drug Control Policy
and the Bureau for Behavioral Health

**Announcement of Funding Availability:
Transitioning Peer Centers to Recovery
Community Organizations**



Proposal Guidance and Instructions

**AFA Title: Transitioning Peer Centers to Recovery
Community Organizations
Targeting Region(s): Statewide
AFA Number: AFA-10-22**

**West Virginia Department of Health and Human Resources,
Office of Drug Control Policy and Bureau for Behavioral Health**

*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:	March 25, 2022
Application Deadline:	April 29, 2022
Funding Announcement(s) To Be Made:	TBD
Funding Amount Available:	Total: \$360,000 which includes an option for BBH to renew for a second year 6 existing sites at a maximum of \$60,000 each to transition to RCO status

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

- Responses must be submitted using the required Proposal Template available at <https://dhhr.wv.gov/BBH/funding/Pages/Applying-for-Funding.aspx>
- Responses must be submitted electronically via email to dhhrbbhannouncements@wv.gov with the AFA Number and “Proposal for Funding” in the subject line. Paper copies of the proposal will not be accepted. Notification that the proposal was received will follow via email from the Announcements mailbox.
- 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 Chief Executive Officer (CEO), Chief Financial Officer (CFO), and Project Officer and attached to the Proposal Template.

- 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. Questions will be answered in writing.

FUNDING AVAILABILITY

The West Virginia Department of Health and Human Resources, Office of Drug Control Policy (ODCP) and Bureau for Behavioral Health (BBH) announce this funding opportunity to establish recovery community organizations (RCOs). The purpose of this AFA is to create recovery supports to reduce the prevalence of fatal and nonfatal overdoses through the development of RCOs in West Virginia. The mission of the ODCP and BBH is that all citizens in West Virginia have access to services that are comprehensive, readily accessible, and tailored to meet individual, family, and community needs. This mission extends into the recovery community to create and foster local support systems in which individuals with SUD can thrive.

Across the country, RCOs are being developed to make it possible for those struggling with substance use disorder (SUD) to find lasting recovery. RCOs are independent, non-profit, and led and governed by people in recovery, family members, friends, and allies. They mobilize resources within and outside the recovery community and give those in recovery a voice. The three core principles that all RCO groups share are:

1. Recovery Vision
2. Authenticity of Voice
3. Accountability to the Recovery Community

To date, West Virginia is one of the few states that does not currently operate a credentialed RCO. The credentialing agency, the Association of Recovery Community Organization (ARCO) is an offshoot of the larger group, Faces & Voices of Recovery (FaVoR). FaVoR was founded in 2001 to provide focus for a growing advocacy force and is dedicated to organizing and mobilizing the over 20 million Americans in recovery from SUD.

This AFA will provide funding to develop RCOs in each of the seven regions across the state of West Virginia. **More** specifically, it will provide individuals with SUD who are in recovery a supportive environment to share their lived experience with a common purpose. Long-term recovery is real for millions of Americans and thousands more find recovery every year. This benefits not only, individuals and families, but also, the communities in which they live, work, and go to school.

Total Funding Available: The AFA will support, at most, **up to \$360,000** total for RCOs in West Virginia.

Existing non-profits with a site already established can apply for a maximum of \$60,000 each, to make the transition to RCO status.

Please note that this AFA is for one-time funding to support the establishment of RCOs.

Applicants should submit proposals with specified timeframes for project development and implementation that meet the criteria contained in this AFA. If a project is selected for award, the proposed timeframes will serve as the basis for developing the period of performance for the grant agreement.

Section One: **INTRODUCTION**

According to the RCO best practices guidebook published by Faces & Voices of Recovery, a **recovery community organization** is defined as an independent, non-profit organization led and governed by representatives of local communities of recovery. These organizations have three primary missions:

- Organize recovery-focused policy advocacy activities,
- Carry out recovery-focused community education and outreach programs, and/or
- Provide peer recovery support services (PRSS).

There are 8 criteria for RCOs to ensure fidelity. These are the national standards for RCOs:

1. Non-profit status

The organization must register as a non-profit with 501©3 status. (An RCO may operate under a parent organization. These RCOs must have a governing structure that is sufficiently independent from the parent organization)

2. Led and governed by the recovery community

More than 50% of the Board of Directors are people in recovery from their own SUD.

3. Primary focus is recovery from substance use disorders

Some organizations provide ancillary activities such as prevention services, housing, other addictions and/or mental health peer services. However, the primary function of an RCO is focused on SUD.

4. Grassroots

Community engagement is reflective of the community served. The organization provides opportunities for all community members to get involved in volunteering, participating in activities, and planning events and programs.

5. Participatory process

Specific methods employed to achieve active participation by all members of a groups in a decision-making process.

6. Non-clinical services

Services provided are 100% non-clinical. (i.e., no medical treatment or testing)

7. All pathways of recovery are welcome

The organization must support and provide opportunities for all pathways of recovery and does not exclude anyone based on their pathways.

8. Recovery-friendly language

Words matter and working to change the language around SUD reduces stigma. This must be evident when designing websites and marketing materials.

The ODCP and BBH envision healthy communities where integrated resources are accessible for everyone to achieve wellness, personal goals, and a self-directed future. Partnerships and collaboration among public and private systems, as well as with individuals, families, agencies and communities, are important components of the systems of care surrounding each person. As individuals reintegrate into the workforce, a multi-systematic approach is essential to ensuring successful reintegration. The ODCP, BBH, and Jobs and Hope WV aid in eliminating barriers to employment. The creation and support of social enterprises and recovery owned, and/or operated businesses will assist Jobs & Hope Transition Agents with linking people in the recovery community to employment opportunities that allow them to become more productive members of the communities in which they live.

Section Two: SERVICE DESCRIPTION

Grantee Eligibility

Applicants must be non-profit organizations or be under the umbrella of a private or non-profit organization committed to supporting, advocating, and being accountable to individuals in recovery. Applicants must establish a Board of Directors (BOD) with more than 50% of the members identifying as a person with lived experience with SUD. The BODs must include family, community members, key stakeholders, and individuals with lived experience with SUD. If being organized under an umbrella or parent organization, an advisory board must be formed with clear bylaws that define how it will operate. Applications will be scored on quality of the proposal and work plan, not on the quantity of outcomes provided. Please see eligibility requirements below.

Existing non-profits with a site already established can apply for a maximum of \$60,000 each to make the transition to RCO status. The BBH may consider renewal for one additional year.

If applying for this option, applicants must:

- Have a dedicated space to carry out the primary missions of an RCO:
 - Organize recovery-focused policy advocacy activities,
 - Carry out recovery-focused community education and outreach programs, and/or
 - Provide peer recovery support services (PRSS).

Target Population

(Ages 18+) with a substance use disorder (SUD), individuals with SUD representing high-risk, priority populations including people who have been incarcerated, individuals identifying as Lesbian, Gay, Bisexual, Transgender, Queer/Questioning (LGBTQ), military veterans, IV drug users, and pregnant/postpartum women, and individuals who may have co-occurring mental illness and/or polysubstance use.

Service Overview

Funding is provided via this AFA for:

- Hiring and operationalizing Executive Director and necessary staff.
 - Lease or rent of a physical location.
 - Establishing a Board of Directors with more than 50% of the members identifying as a person with lived experience with SUD. The BODs must include family, community members, key stakeholders, etc.
 - If being organized under an umbrella or parent organization, an Advisory Board must be formed with clear bylaws that define how it will operate.
 - Developing a mission statement, vision statement and core values.
 - Diversity, equity and inclusion activities.
 - Engaging with the community in a way that is reflective of service area. Provide opportunities for participation.
 - Development of addiction recovery public awareness and stigma reduction activities.
 - Organizing recovery-focused policy advocacy activities.
 - Carrying out recovery-focused community education and outreach programs.
 - Naloxone distribution (in partnership with the University of Charleston) and other harm reduction practices. (Cannot fund naloxone purchase)
 - Providing peer recovery support services (PRSS) and activities.
 - Conducting trainings and providing resources for WVPRSS.
 - Provide recovery support navigation that includes the following:
 - Multiple pathways
 - Assistance for individuals navigating recovery resources such as detoxification, treatment, recovery housing, support groups, peer support, and family support.
 - The promotion of community wellness and engagement.
 - Recovery advocacy that provides hope and encourages recovery.
 - A peer-led, peer-driven organization that offers recovery to any individual seeking recovery from addiction.
1. Awardees of this grant will work with the Association of Recovery Community Organizations (ARCO) and Faces & Voices of Recovery (FaVoR) to obtain official RCO status including completion of:
 - a. 1 RCO Bootcamp – 13 hours
 - b. 1 Organizational Development training- 13 hours

- c. 1 Sustainability Training- 13 hours
2. RCO's will complete the following with assistance from FaVoR:
 - a. Organizational Assessment
 - b. Technical Assistance Plan
3. To assist RCOs with collecting data on recovery outcomes, the Provider will provide the following in year one.
 - a. 6 Recovery Data Platform™(RDP) Demonstrations
 - b. 6 RDP Licenses
 - c. 1 Implementation of the Recovery Data Platform™(RDP)
4. Attend monthly remote meetings with the BBH and other stakeholders identified by the BBH.
5. RCOs will submit an application for Association of Recovery Community Organizations (ARCO) membership. ARCO members become part of a national network of over 150 RCO's with extensive benefits including networking, training and public policy representation.

Expected Results

Performance outcomes should be included in the work plan section of the application. Successful applicants shall demonstrate measurable progress toward the achievement of the outcomes.

To obtain these results, performance measures must include but are not limited to:

- Operating a recovery community center.
- The development and maintenance of a list of community resources for use by the community and WVPRSS.
- Increasing the number of community resources that can be used by individuals seeking treatment as well as WVPRSS to navigate recovery resources in the community by two during each month of the grant period.
- Developing and maintaining collaborations with local workplaces to provide education outreach.
- Providing space for at least two peer support group/mutual aid groups per week, such as Alcoholics Anonymous (AA), Self-Management and Recovery Training (SMART), etc.
- Hosting or participating in an additional recovery-oriented event/activity using grant funding. The event must be in addition to regularly scheduled events held by the applicant organization.
- Increasing the number of community outreach activities performed by the organization by one event, monthly. This activity could be community stakeholder meetings, prevention coalition meetings, public health/syringe support activities.

- Increasing number of referrals to outside community organizations by 20% over 12 months.
- Collaborating with community partners and stakeholders (Jobs & Hope transition agents, PLOs, community supervision, reentry council, drug courts).

Priority will be given to applications that demonstrate the following:

- Expansion of recovery community center services.
- Expansion of recovery community center services to individuals seeking long-term recovery from substance use disorders.
- Service to a diverse recovery community.
- Successful development of partnerships across the gaps of treatment and recovery services.
- Provision of recovery outreach education to workplace partners.
- Provision of multiple pathways to recovery.
- Provision of multiple recovery activities and events.
- Access to resources for treatment and other supports through well-established partnerships.
- Employment of an adequate number of West Virginia Certification Board for Addiction & Prevention (WVCBAAP)-certified PRSS for the population served.
- Organization recovery-focused policy advocacy activities.
- Recovery-focused community education and outreach programs.

Program Sustainability

Funding for this AFA is one-time funding. Each application must explain in detail how the organization will be sustained after these funds are expended. More specifically, successful proposals will address how the applicant will sustain its RCO beyond the initial funding period if awarded.

Section Three: **PROPOSAL INSTRUCTIONS/REQUIREMENTS**

All proposals for funding will be reviewed by the ODCP/BBH for minimum submission requirements and must comply with the requirements specified in this AFA to be eligible for evaluation: (1) be received on or before the stated due date and time; (2) meet the Proposal Format requirements; (3) follow the required Proposal Outline; and (4) be complete. Proposals that fail to follow instructions or satisfy these minimum submission requirements may not be reviewed further.

A review team independent of ODCP/BBH will review the full proposals. Proposals must contain the following components:

- ✓ A completed Proposal for Funding Application, available at <https://dhr.wv.gov/BBH/funding/Pages/Applying-for-Funding.aspx>
- ✓ A Proposal Narrative consisting of the following sections: Statement of Need, Proposed Implementation Approach, Staff and Organization Experience, Data Collection and Performance Measurement.
- ✓ Together these sections may not exceed **10** total pages. 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 following is an outline of the **Proposal Narrative** content:

1. Statement of Need and Population of Focus: Describes the need for the proposed initiative, to include:
 - A description of the target population and relevant data.
 - A documentation of the need for the proposed project, specifically in the identified catchment area. Clearly identify the area that will be served by the project.
 - A description of the strengths and gaps in recovery support services in the geographic area the applicant proposes to serve.
2. Proposed Evidence-Based Service/Practice: Delineates the services/practice/employment opportunities/community partner/statewide partners being developed and sets forth the goals and objectives during Year One.
 - Describe the purpose of the proposed project.
 - Clearly state project goals, objectives, and strategies. These goals, objectives, and strategies must relate to the intent of the AFA.
 - Describe the evidence supporting the need for services and/or training that will be developed and justify its use with the population of focus.
 - Discuss any screening tools that will be utilized and the basis for their selection.
3. Proposed Implementation Approach: Describes how the applicant intends to implement the proposed project/service(s) during Year One to include:
 - Describe briefly how all project components will be developed, implemented, and how the required components will be coordinated.
 - A description of the applicant's existing relationships with community partners and behavioral health providers.
 - Provide a chart or graph depicting a realistic timeline for a 24-month project period delineating key activities, milestones, and staff responsible for action. Be sure to

demonstrate that the project can be operationalized, and training/employment can begin as soon as possible. (Note: this chart or graph should be included in the narrative section and not as an attachment.)

- Describe how achievement of the goals of this project will produce meaningful and relevant results for the target population as well as the community.
- Describe any additional training to be sought and utilized in the development of the project, identifying key training components and their relevance.
- Identify any other organizations that will participate in the proposed project. Describe their roles and responsibilities and demonstrate their commitment to the project by including letters of support in **Attachment 2**.
- Provide a description of other state and federal resources that will be sought to address the goals and objectives of the proposed implementation approach and how these resources will enhance and not duplicate existing efforts.
- Provide a description of how the applicant will ensure the ongoing input of the target population in planning, implementing, and assessing the proposed service.
- Describe the facility(ies) to be utilized. This description may be for an existing facility already owned and operated by the applicant agency, or a facility for which the applicant agency has a detailed business plan for acquisition, leasing, or other manner of habitation.

4. Staff and Organization Experience: This section should describe the applicant's expertise with serving the population(s) of focus and with recovery support services:

- A description of the applicant's and their partners' current involvement with the population(s) of focus.
- Describe the applicant's existing qualifications to carry out the proposed initiative/service(s).
- Provide a complete list of staff positions for the project, including the Executive Director/Coordinator as well as any other key personnel, showing their level of effort and qualifications.

5. Data Collection and Performance Measurement:

- Describe the applicant's plan for data collection, management, analysis, and reporting. Specify and provide a rationale for any additional measures or instruments the applicant plans to implement in this project.
- Describe the data driven quality improvement process by which population and sub-population disparities in access/use/outcomes will be tracked, assessed, and reduced.
- Describe how data collected will be used to manage the project and assure that the proposed goals and objectives will be tracked and achieved.
- Describe how information related to progress and outcomes will be routinely communicated to ODCP, BBH, Jobs & Hope WV, CORE, program staff, governing and advisory bodies, and stakeholders.

6. Sustainability Plan: Describe how the applicant will maintain the proposed business operations beyond the one-time funding provided through this AFA.

7. References/Works Cited: All sources referenced or used to develop this proposal must be included on this page. This list does **not** count towards the **10-page** limit.

The attachments **do not** count toward the **10-page** limit.

- ✓ **Attachment 1: Facility/Site Diagrams**: Only if applicable for this project.
- ✓ **Attachment 2: Letters of Support/Memorandums of Understanding**: Must be submitted with the application to demonstrate that a coordinated and integrated service system is in place to meet the complex needs of the target population.
- ✓ **Attachment 3: Targeted Funding Budget(s) and Budget Narrative(s)**:
 - A Targeted Funding Budget (TFB) form 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 <https://dhhr.wv.gov/BBH/funding/Pages/Applying-for-Funding.aspx>.
 - Budget Narrative for each 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.

Section Four: **CONSIDERATIONS**

LEGAL REQUIREMENTS

Eligible applicants are public organizations (e.g., units of local government) or private organizations with a valid West Virginia Business License. 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 to be the sole point of contact about all contractual matters. The Grantee may, with the prior written consent of the State, enter written sub agreements for performance of work; however, the Grantee shall be responsible for payment of all sub awards.

Capital expenditures for purchasing or renovating real estate are not permitted with these funds. For funds allowing capital expenditures for property and equipment shall be subject to written prior approval of DHHR and must be included as a separate budgetary line item in the proposal. Upon award, regulations regarding the acquisition, disposition and overall accounting for property and equipment will follow those delineated in federal administrative requirements and cost principles. Additionally, the Grantee may be bound by special terms, conditions or restrictions regarding capital expenditures for property and equipment determined by the Department as to best protect the State's investment.

FUNDING METHODOLOGY

After receipt of the fully executed Grant Agreement, the Grantee will submit invoices pursuant to the Schedule of Payments. Requests by the Grantee for payment shall be limited to the minimum amount needed and be timed to be in accordance with the actual, immediate cash requirements of the Grantee in carrying out the purpose of the approved program. The timing and amount of the cash payment shall be as close as is administratively feasible to the actual disbursements by the Grantee for direct program costs and the proportionate share of any allowable indirect costs. Reports reconciling payments received and actual expenditures incurred will be submitted in accordance with reporting requirements.

ALLOWABLE COSTS

Capital expenditures for purchasing or renovating real estate are not permitted with these funds. 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.