Announcement of Funding Availability

Collegiate Recovery Programs
Proposal Guidance and Instructions

AFA Title: Collegiate Recovery Programs
Targeting Regions: Statewide
AFA Number: 4-2018-SA

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

For Technical Assistance please include the AFA # in the subject line and forward all inquiries in writing to:
DHHRBHHFAnnouncement@wv.gov

| Key Dates: |
|-----------------|-----------------|
| Date of Release: | 5/9/18 |
| Letter of Intent Deadline: | N/A |
| TECHNICAL ASSISTANCE FAQs: | To be posted on BBHHF Website |
| Application Deadline: | 6/8/18 5:00pm |
| (Funding Announcement(s) To Be Made: | Details to follow |
| Funding Amount Available: | $20,000 per site for up to 5 sites |

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

- Responses must be submitted using the required Proposal Template available at http://www.dhhr.wv.gov/bhhf/afa/Pages/default.aspx

- Responses must be submitted electronically via email to DHHRBHHFAnnouncement@wv.gov with “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 Announcement mailbox.

- A Statement of Assurance agreeing to these terms 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 additional Technical Assistance forward all inquiries via email to DHHRBHHFAnnouncement@wv.gov and include “Proposal Technical Assistance” in the subject line.
FUNDING AVAILABILITY

This one-time funding is made available by the WV Department of Health and Human Services (WV DHHR) Office of Drug Control Policy. The Bureau for Behavioral Health and Health Facilities (BBHHF) seeks to expand the capacity of recovery resources for adults in educational environments to promote wellbeing which will maximize their chances of being successful and thus, adding to the workforce in West Virginia.

BBHHF is soliciting applications from institutions of higher education to initiate a collegiate recovery initiative on campus with the goals of providing recovery support for individuals in the learning environment. The application must detail a plan to provide recovery support services on campus and a plan of sustainability after this one-time funding. The application must specify how the program will promote and support all pathways to recovery, including Medication Assisted Treatment. A maximum of $20,000.00 is available per site, which may include personnel, supplies, training, and other specific costs. This funding is for new or existing sites. Funding for these initiatives will be awarded based on accepted proposals that meet all the required criteria contained within this document.

Total Funding Per Site: $20,000.00

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<th>STATEWIDE</th>
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The West Virginia Department of Health and Human Resources’ Bureau for Behavioral Health and Health Facilities (BBHHF) envisions healthy communities where integrated resources are accessible for everyone to achieve wellness, personal goals and a self-directed future. The mission of the Bureau BBHHF is to ensure that West Virginians with mental health and/or substance use disorders, intellectual/developmental disabilities, chronic health conditions or long term care needs experience quality services that are comprehensive, readily accessible and tailored to meet individual, family and community needs.

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. The role of the Bureau is to provide leadership in the administration, integration and coordination of the public behavioral health system. The work is informed by results of a multi-year strategic planning process that includes critical partners in planning, funding and delivering services and supports.

The following Strategic Priorities guide services and service continuum development:

<table>
<thead>
<tr>
<th>Behavioral Health System Goals</th>
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<tbody>
<tr>
<td><strong>Priority 1</strong> Assessment and Planning</td>
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<td><strong>Priority 2</strong> Capacity</td>
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<td><strong>Priority 3</strong> Implementation</td>
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<td><strong>Priority 4</strong> Sustainability</td>
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Collegiate Recovery Program

**Target Population:** College-attending adult men and women (Ages 18+) self-identified or formally assessed as having a substance misuse problem either currently or in the past and who are motivated to engage in on-campus recovery activities for support, in the form of:

1. On campus recovery and outreach events
2. Recovery support groups
3. Substance free gathering spaces
4. Peer Mentoring
5. Referral to community-based services and supports as needed.

**Definition of Recovery:**

Recovery is a process of change whereby individuals work to improve their own health and wellness and to live a meaningful life in a community of their choice while striving to achieve their full potential. Recovery support services provide opportunities to achieve such change through social inclusion or engaging in supportive recovery communities. Peer support, Peer Recovery Coaching, Recovery Support Center Services, Supports for Self-Directed Care, mutual aid meetings, such as AA/NA, and safe living environments are effective components of the process.

**Service Overview**

A collegiate recovery program (CRP) is a College or University-provided, supportive environment within the campus culture that reinforces the decision to engage in a lifestyle of recovery from substance use. It is designed to provide an educational opportunity alongside
recovery support to ensure that students in their aspirations to become healthy, productive member of society. The collegiate recovery school movement began with the development of school-based recovery support services at Brown University in 1977 and Rutgers University in 1983. These programs evolved into more fully developed recovery communities at Texas Tech University in 1986 and Augsburg College in 1997.

These programs sought to meet recovering students’ support needs, as part of a broader effort to address substance use on campus by offering onsite sober housing, self-help meetings, and counseling provided by a small staff. CRPs’ strive to create a campus-based “recovery friendly’ space and a supportive social community to enhance educational opportunities while supporting students’ recovery and emotional growth. All aimed to improve outcomes for students who had developed dependencies on alcohol and other substances. Students participating in these trailblazing early programs had superior outcomes to those were not participants, which was later confirmed by an emerging body of research.

From 1997 to 2004, additional collegiate recovery programs were organized at Dana College (2001), Grand Valley State University (2002), Case Western Reserve University (2004), University of Texas at Austin (2004), and Loyola College in Maryland (2004). During this period research confirmed that these CRCs provided successful support to college students in recovery. Additional research has documented reduced numbers of drinkers in students’ social circles, increased accomplishment of developmental and transitional milestones, and increased social supports. All-important social supports, identified as academic supports, peer-to-peer recovery supports, and 12-Step recovery supports, are speculated to be the main mechanism of these programs effectiveness.

More recently, federal agencies have called for the expansion of community-based recovery support models to extend the continuum of care, including in schools and colleges (Office of National Drug Control Policy, 2010; U.S. Dept. of Education, 2010) Several factors lead to increased interest in CRPs about a decade ago. This includes academic institutions and federal agencies’ growing recognition of youth substance use and, in particular, campus-based use, as a
major public health concern, and federal agencies’ shift to a recovery-oriented “chronic care.’ (Laudet et al., p.1)

**The Collegiate Recovery Model:**

Every institution of higher education is rich in the experiences it has to offer. Typically, only a fraction of an institution’s resources is fully accessed by student – whether in recovery or not. However, it appears that students in recovery take advantage of resources that other students often overlook. By working to provide access to helpful resources, encouraging new relationships, cultivation peer support services, imparting life-skills and celebrating the pursuit of education goals, every collegiate recovery effort can dramatically impact change in the college community.

Each collegiate recovery initiative must start with an asset-based approach that is focused on asset mapping. This effort focus on building relationships and connection among advocates for change and often start with a handful of champions (i.e. students, faculty, administration). An effective collegiate recovery program works with people in any stage of recovery -- persons with active behavioral health issues as well as persons in long-term recovery which includes medication assisted recovery. The recovery program may choose to serve individuals at any stage of initiation, engagement or maintenance of the recovery process. The program should not associate primarily with any specific pathway/philosophy to recovery (i.e., faith-based, mutual aid (NA/AA), self-help, Medication Assisted Treatment, etc.)

**Collaborations and Memoranda of Understanding**

Applicants for this funding must have two (2) Letters of Support from college administration, including those who oversee collegiate health programs. This will help demonstrate buy-in from the top levels of administration and therefore maximize the probability of long term sustainability. Additionally, each applicant must identify who will be on a planning committee for the program and what their roles will be.
Program Sustainability

Funding for this Announcement of Funding Availability is anticipated to be one time funding, to be expended by June 30, 2019. Each application must explain in detail how the program will be sustained after these funds are expended.

Resources:

Section Three: PROPOSAL INSTRUCTIONS/REQUIREMENTS

All proposals for funding will be reviewed by the BBHHF staff for administrative compliance. A review team, independent of BBHHF will review the full proposals. Proposals must contain the following components:


✓ 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 ten (10) total pages. Applicants must use 12 point Arial or Times New Roman font, single line spacing, and one (1) inch margins. Page numbers must also be included in the footer.

✓ The following is an outline of the Proposal Narrative content:

  ✓ **Statement of Need and Population of Focus:** Describes the need for the proposed program. Applicants should identify and provide relevant data on the target population, as well as the geographic area to be served, to include specific Region/county(es) and existing service gaps.

  ✓ **Proposed Evidence-Based Service/Practice:** Delineates the program/service being proposed and sets forth the goals and objectives for the proposed service(s) during Year One.

  ✓ **Proposed Implementation Approach:** This section should describe how the Applicant intends to implement the proposed service(s) during Year One to include:

  - A description of the strategies/service activities proposed to achieve the goals and objectives identified above, those responsible for action, and a one (1) year/ twelve (12) month timeline for these activities. Include planning/development, training/consultation, outreach and marketing, implementation, and data management.

  - A description of program implementation and sustainability beyond one year of grant funding, including how alternative funding sources will be secured.

  - A description of the Applicant will ensure the input of the target population in planning, implementing, and assessing the proposed service. Describe the feedback loop between the target population, the applicant organization, partners/key
stakeholders, and the BBHHF in all implementation stages of the project.

✓ **Staff and Organization Experience:** This section should describe the Applicant’s expertise with the population(s) of focus and with recovery supports, to include:

- A description of the applicant’s current involvement with the population(s) of focus.
- Describes the Applicant’s existing capacity to carry out the proposed service(s), to include its experience and qualifications to reach and serve the target population.

✓ **Data Collection and Performance Measurement:** Describes the outcomes to be measured, and information/data the Applicant plans to collect, as well as their process for: using data to manage and improve quality of the service, ensuring each goal is met and assessing outcomes within the target population

✓ **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 ten (10) page limit.

The attachments do not count toward the ten (10) page limit.

✓ **Attachment 1: Targeted Funding Budget(s) and Budget Narrative(s).**

✓ 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 [http://www.dhhr.wv.gov/bhhf/forms/Pages/FinancialForms.aspx](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 BBHHF Fiscal form.

✓ **Attachment 2: Applicant Organization’s Valid WV Business License (if applicable)**

✓ **Attachment 3: Letters of Support** 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.
Section Four: EXPECTED OUTCOMES / PERFORMANCE MEASURES

Individuals receiving this service should demonstrate the following generally accepted outcomes.

**Expected Outcomes:**

1. Increase resources to sustain recovery on campus.
2. Increase outreach/participation in campus activities to engage students seeking or attempting to maintain recovery.
3. Successfully engage individuals in recovery support events, meetings, campaigns and mentoring of others.
4. Increase buy-in from all levels of administration for a campus recovery program.

**Performance Measures may include, but not be limited to:**

1. Number of on campus events to engage those in recovery or seeking recovery.
2. Monthly documentation of Planning Committee meetings.
   3. Monthly count of individuals engaged in on campus events, campaigns, or activities.
   4. Number and type of professional development trainings attended and provided.
   5. Number, type (focus groups, surveys, or key-informant interviews), and aggregate results of consumer feedback activities conducted.
   6. Submit all service data reporting by the 25th working day of each month as related to the Expected Outcomes/Performance Measures.
Section Five: CONSIDERATIONS

LEGAL REQUIREMENTS
Eligible applicants are public or private organizations with a valid West Virginia Business License and/or units 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 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.

FUNDING REIMBURSEMENT
All grant funds are awarded and invoiced on a reimbursement basis. Grant invoices are to be prepared monthly and submitted with and supported by the Financial Report and Progress Report to receive grant funds. The grant total invoice should agree with amounts listed on the Financial Report and reflect actual expenses incurred during the preceding service period. 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 stated program objectives.

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.