

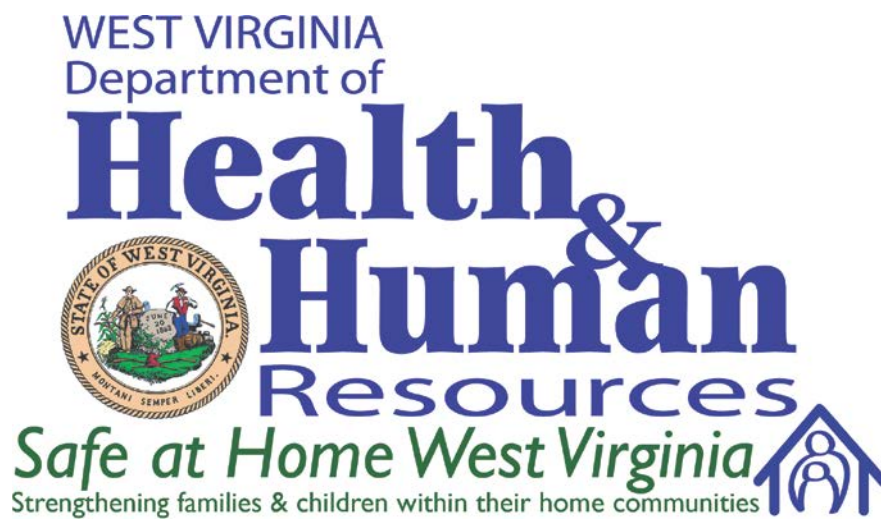
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West Virginia Department of  
Health and Human Resources  
Bureau for Children and  
Families

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# Funding Announcement

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**WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES  
BUREAU FOR CHILDREN AND FAMILIES  
REQUEST FOR APPLICATIONS**

**I. PURPOSE**

The Child Welfare Title IV-E Waiver Demonstration authority provides states with an opportunity to use federal funds more flexibly in order to test innovative approaches to child welfare service delivery and financing. Using this option, states can design and demonstrate a wide range of approaches to reforming child welfare and improving outcomes for children in the areas of safety, permanency, and well-being. Funding is available through the Title IV-E Waiver Demonstration Projects (Title IV-E, Sec. 415. [42 U.S.C. 615] of the Social Security Act).

The Bureau for Children and Families intends to use the Title IV-E Waiver to maximize the benefits of home and community-based services offered in conjunction with Medicaid paid behavioral and mental health services. Safe at Home West Virginia will provide for an array of home and community-based services including regular support services and evidence-based interventions that will result in a potential reduction in congregate care. The savings generated from reducing costly placements will be reinvested to further expand in-home and community-based services for children. Title IV-E Waiver funds will support the establishment of an evidence-based wraparound model with supporting services.

Therefore, the West Virginia Department of Health and Human Resources (Department), Bureau for Children and Families (BCF) is soliciting applications from licensed behavioral health agencies with direct children's service experience to act as local coordinating agencies for the development and delivery of a high fidelity wraparound model with supporting services for West Virginia's Safe at Home Wraparound Program. Start-up grants will be available in the amount of \$70,000 for each Wraparound Facilitator the applicant plans to hire. The \$70,000 includes salary, fringe benefits, supplies, equipment, space, training, travel, and administrative costs for each Wraparound Facilitator. Only those applicants who demonstrate superior knowledge, proficiency and fiscal efficiency in the administration of a high fidelity wraparound

approach will be eligible for the start-up funding. In addition to grant funding, agencies will receive a daily rate of \$136 for each child participating in Safe at Home West Virginia. This daily rate does not include reimbursement for services for the child that are billable to Medicaid. It is anticipated that the daily rate will sustain Safe at Home West Virginia after the end of the grant period.

The goal of Safe at Home West Virginia is to safely reduce reliance on in-state and out-of-state congregate care for youth ages 12-17. The purpose of the Safe at Home West Virginia grants is to provide funds to support the initial development of wraparound programs. Successful programs will ultimately reduce the use of congregate care as well as shorten the length of stay in congregate care.

Safe at Home West Virginia will ensure that families have an opportunity to receive intensive community-based services while children are maintained safely in their own communities.

**Phase 2 Geographic Focus**

Safe at Home West Virginia will be implemented in phases. Phase 2 will begin July 1, 2016, in Brooke, Hancock, Monongalia, Marion, Ohio, Barbour, Grant, Hardy Hampshire, Harrison, Lewis, Mineral, Pendleton, Preston, Randolph, Taylor, Tucker, Upshur, Greenbrier, Mercer, Monroe, Nicholas, Pocahontas, and Summers counties. Applicants are limited to agencies licensed as behavioral health centers. **Agencies may apply to serve one or more counties and more than one agency may be selected to serve the same county or counties.** Below is a table of projected number of cases based on data regarding the target population in placement in these counties. This number could increase as we move to serving our at-risk population.

Brooke - 9	Hancock - 16	Monongalia - 20
Marion - 31	Ohio - 19	Barbour - 11
Grant - 5	Hardy - 10	Hampshire - 16
Harrison - 30	Lewis - 12	Mineral - 14
Pendleton - 3	Preston - 11	Randolph - 39
Taylor - 12	Tucker - 1	Upshur - 19
Greenbrier - 20	Mercer - 77	Monroe - 7
Nicholas - 29	Pocahontas - 8	Summers - 16

**II. BACKGROUND**

The Mission of the West Virginia Department of Health and Human Resources is to collaborate with stakeholders to promote, protect, manage and provide appropriate health and human services for our residents to improve their health, well-being and quality of life.

West Virginia is recognized for a collaborative, highly responsive, quality child welfare system built on the safety, well-being, and permanency of every child. This vision is guided by the child and family services principles specified in Federal regulations [45 CFR 1355.25(a) through 1355.25(h)]:

- Children and families will be safe.
- Children will have a strong, permanent connection with family and community. While reunification, adoption, and legal guardianship are ultimate goals, the Department will ensure that all children have caring adults in their lives.
- Children and families will be successful in their lives and have enhanced well-being.
- Children and families will be mentally and physically healthy.
- Children and families will be supported, first and foremost, in their homes and home communities, and by receiving the services to meet their needs.
- The child-serving systems will be transformed to meet the needs of children and families.

Historically, Title IV-E funding could only be used to support the placement portion of congregate care. Other services were financed with Medicaid and/or state dollars. Such restrictions on federal funding have hampered the Department's ability to reduce residential placements and provide in-home and community-based supports to the most vulnerable children and families. The funding flexibility available through the Title IV-E Waiver will provide West Virginia the opportunity to develop effective community-based alternatives to congregate care.

### **Wraparound: A System of Care Approach**

The System of Care model is an organizational philosophy and framework that involves collaboration across agencies, families, and youth for the purpose of improving services, increasing access to services, and expanding the array of coordinated community-based, culturally and linguistically competent services and supports for children and youth with serious emotional disturbances and their families. West Virginia adopted the System of Care values more than 20 years ago, and since that time, much work has been done to instill these values in case work practice. Child welfare policies and practice curricula have been revised to reflect these values.

Safe at Home West Virginia's success will depend on the support and participation of the child serving systems in this state. Successful implementation of high fidelity wraparound models will require support and understanding from all the stakeholders: families, youth, judges, court personnel, child welfare workers, mental health agencies, schools, community-based service agencies, residential care providers, and funders. The child serving community must welcome this change in practice and embrace a new way of serving youth and their families. Understanding the populations served and how to best meet their needs is the key to

developing an effective and responsive Safe at Home West Virginia Wraparound Program. Safe at Home West Virginia will provide for trauma-focused treatments delivered in an environment that safely preserves family relationships and empowers families to meet their own needs.

### **III. PROGRAM REQUIREMENTS**

#### **A. Target Population**

The youth who will be served by Safe at Home West Virginia will be limited to the following criteria:

1. Youth, aged 12-17 (up to the youth's 17<sup>th</sup> birthday) with a diagnosis of a severe emotional or behavioral disturbance that impedes his or her daily functioning (DSM-V Axis I) currently in out-of-state residential placement who cannot return home without extra support, linkage and services provided by wraparound;
2. Youth, aged 12-17 (up to the youth's 17<sup>th</sup> birthday) with a diagnosis of a severe emotional or behavioral disturbance that impedes his or her daily functioning (DSM-V Axis I) currently in in-state residential placement who cannot be reunified without extra support, linkage and services provided by wraparound;
3. Youth, aged 12-17 (up to the youth's 17<sup>th</sup> birthday) with a diagnosis of a severe emotional or behavioral disturbance that impedes his or her daily functioning (DSM-V Axis I) at risk of out-of-state residential placement and utilization of wraparound can safely prevent the placement;
4. Youth, aged 12-17 (up to the youth's 17<sup>th</sup> birthday) with a diagnosis of a severe emotional or behavioral disturbance that impedes his or her daily functioning (DSM-V Axis I) at risk of in-state level one, two or three or Psychiatric residential placement and utilization of wraparound can safely prevent placement.

#### **B. Description of Services**

Safe at Home West Virginia Intervention Model:

The Bureau will implement Phase II of Safe at Home West Virginia in the identified counties beginning July 1, 2016. Successful applicants will hire and train staff ready to accept referrals by July 1, 2016.

The primary goals of wraparound intervention are to support family strengths, promote community investment and ownership, and provide the needed resources to families to improve family well-being and reduce the risk of child abuse and neglect. The work of wraparound is completed using the following components:

1. Wraparound facilitation;
2. A maximum caseload of no more than 10 families per Wraparound Facilitator;
3. Family decision making through Child and Family Team meetings;
4. A minimum of one face-to-face meeting per family per week, one child and family team meeting per month, and one weekly conference call;
5. Initial and ongoing crisis planning as needed per individual;
6. Shifting families from professional to natural supports;
7. Tailored individualized service plans for each family;
8. An assessment completed for every family member;
9. Assessment and evaluation through various junctures of the process; and
10. Monthly progress summaries on each family to referring caseworker.

Wraparound will coordinate, create, and individualize services and supports to fit the unique needs of the child and family while building upon their strengths. Safe at Home West Virginia's core components will be delivered through phases, as outlined in the National Wraparound Initiative's *The Wraparound Process User's Guide: A Handbook for Families: Engagement, Planning, Implementation and Transition*, found at:

[http://nwi.pdx.edu/pdf/Wraparound\\_Family\\_Guide09-2010.pdf](http://nwi.pdx.edu/pdf/Wraparound_Family_Guide09-2010.pdf).

The Safe at Home West Virginia Wraparound Program will be based on ten (10) key wraparound principals:

1. Family voice and choice;
2. Team-based;
3. Natural supports;
4. Collaboration;
5. Community-based;
6. Culturally competent;
7. Individualized;
8. Strengths-based;
9. Persistence; and
10. Outcome-based.

Safe at Home West Virginia will better identify a child's, youth's and family's strengths and needs; reduce the reliance on congregate care in and out of state; shorten the length of stay in residential care; improve the functioning of children, youth and families, including educational goals for youth; shorten timelines for family reunification; and decrease the number of youth re-entering out-of-home care. The benefits of a wraparound include:

1. One child and family team across all service environments;
2. The family's wraparound plan unifies residential and community treatment, creating a seamless transition as youth and families move through the system;
3. Wraparound helps families build long-term connections and supports in their communities;
4. Provides concurrent community work while youth is in residential care for a smooth transition home;
5. Reduces the occurrence and negative impact of traumatic events in a child's life;
6. Provides access to mobile crisis support, 24 hours per day, seven days per week;
7. Provides crisis stabilization without the need for youth to enter/re-enter residential care; and
8. Reduces the length of stay in congregate care.

**Safe at Home Wraparound Facilitation includes the following phases:**

1.) **Engagement and Team Preparation:** The Wraparound Facilitator meets with the family and informs them of what to expect during the wraparound process. The Child and Adolescent Needs and Strengths (CANS) assessment is administered within the first 14 days as the first part of the assessment and planning processes. An update to the CANS is completed if one has been completed in the past 90 days. During this phase, the family team members will be identified to begin the development of the wraparound plan;

2.) **Initial Plan Development:** The family team convenes and will begin identifying the family's needs and strengths. The team will agree on a mission statement and will determine the outcomes for the wraparound process and finalize the family's wraparound plan. An important part of this phase is to develop a crisis plan, clearly outlining each team member's role during a crisis, as well as ways for the family to avoid crises and post-crisis follow-up;

3.) **Plan Implementation:** Every month during the Family Team Meeting the family team will review the wraparound plan to monitor progress and make changes if necessary. This monthly review will include the celebration of accomplishments and any adjustments that are needed to achieve the outcomes. These details will be provided to the DHHR case worker, the MDT and court, if applicable;

4.) **Transition:** Formal intensive care coordination services that were part of the family's treatment plan ends. The discharge plan is concrete service-based, with plans for the future utilization of natural supports and community involvement. A mentor will be assigned to the child or children to assist with the transition. A mentor is an adult who can spend one-on-one



time with a child and be a positive role model to help promote positive self-esteem and improve social, communication and problem solving skills during the transition period.

**Safe at Home West Virginia will require enhancement of existing services and development of core services, which will include, but are not limited to:**

- a. Assessment and evaluation;
- b. Individualized wraparound service planning;
- c. Intensive case management;
- d. Outpatient therapy-individual, family and group;
- e. Medication management;
- f. Day treatment;
- g. Behavior management skills training;
- h. Intensive home-based mental health services;
- i. School-based behavioral health services;
- j. Substance abuse intensive outpatient services;
- k. Crisis services;
- l. Mobile crisis response;
- m. Youth coaching
- n. Peer support;
- o. Respite services;
- p. Therapeutic Mentoring; and
- q. Therapeutic foster care.

**The success of Safe at Home is dependent on community collaboration with linkages to:**

- West Virginia Department of Education;
- DHHR's Office of Maternal, Child and Family Health programs;
- Child welfare community organizations and other children's services provider agencies;
- Local mental and behavioral health providers;
- Medical providers;
- Local Department of Health and Human Resources Offices;
- Family Resource Networks, Regional Summits and Community Collaboratives;
- Programs/services for children/adults with disabilities;
- Employment programs;
- Circuit and Family Courts;
- In-Home Family Education Programs;
- Children's Behavioral Health Providers;
- Adolescent and adult substance abuse programs;
- Community civic organizations; and
- Local faith-based communities.

## Applicant Requirements:

- Applicants must describe the agency's participation in and understanding of system of care values and philosophies;
- Applicants must demonstrate the agency's ability to provide services and/or ensure the delivery of services to the target population;
- Applicants must show the agency's strong collaboration with existing service providers, community stakeholders and the child welfare agency;
- Applicants must provide evidence of the effectiveness of the proposed methodology to deliver wraparound as outlined below;
- Agency must demonstrate the capacity to build and nurture their own "provider network" relationships for services that cannot be provided internally;
- Applicants must limit caseload sizes to no more than 8-10 families per Wraparound Facilitator;
- Applicants will accept all referrals to Safe at Home West Virginia for wraparound facilitation by the Bureau for Children and Families;
- Applicants will not close any Safe at Home West Virginia cases without consultation and permission of the Bureau for Children and Families;
- Applicants must demonstrate clear understanding of 10 Key Principles of Wraparound (National Wraparound Initiative: <http://nwi.pdx.edu/>);
- Applicants must discuss the use of culturally appropriate services;
- Applicants must describe the use of evidence-based and/or evidence-informed, promising practices;
- Applicants must discuss what strategies will be used to promote family engagement;
- Applicants must demonstrate the use of trauma-focused curricula in the provision of wraparound interventions;
- Applicants must describe creative outreach methods that will be used to develop a provider network to serve geographically isolated families;
- Applicants must describe the development needs for the proposed area(s) to be served.
- Applicants must address how the organization will structure and develop wraparound programs to meet the specific needs of the target populations;
- Applicants must explain how the wraparound program will assist in the prevention of unneeded congregate care placements and decrease the length of stay when congregate care is necessary. It should be a clear, concise, well-supported statement identifying the specific service development needs and barriers in each community and

how the applicants will work collaboratively to build the necessary wraparound structures, supports and services;

- Applicants must address how the county currently addresses or fails to address reliance on congregate care;
- Applicants must provide information on services and community supports that are currently available in the county/counties the applicant desires to serve. If such services and supports are currently available, applicants must describe the collaboration with other service providers and community stakeholders;
- If service development is required in order to be able to provide Safe at Home West Virginia, applicants must explain what additional services are needed, how current services may need to be enhanced and how the applicant will collaborate with existing stakeholders to develop what is needed, including barriers, (i.e., isolated locations, funding factors, lack of workforce, etc.);
- Applicants must identify partner organizations that will participate in the project; and
- Applicants must describe their roles and responsibilities and demonstrate their commitment to the project with a Letter of Agreement (LOA) and/or Memorandum of Understanding (MOU). These documents must be submitted with the application as **Attachment A**.

### **Finance and Budget**

The grant period will be May 1, 2016, through April 30, 2017. The budget will include a proposed startup budget and narrative by line item for Wraparound Facilitator costs only as defined on page 1 of the Funding Announcement. The line item budget should indicate that Wraparound Facilitators will be hired, trained and ready to accept referrals July 1, 2016.

In addition, describe potential for other funds or in kind support for Safe at Home West Virginia as **Attachment B**. Identify the amount and the source of other funds.

### **C. Outcomes and Reports**

Applicants must include information on the projected outcomes for children and describe the plan for tracking outcomes for the children served.

Adherence to performance measures for families utilizing Safe at Home West Virginia Wraparound will be essential for the successful applicants.

The performance measures from the statements of work of the Local Coordinating Agencies will be used to measure the success of Safe at Home West Virginia. These measures may change but are likely to include:

- Number of youth who are referred for Safe at Home West Virginia wraparound;
- Number of youth who are accepted into Safe at Home West Virginia wraparound;
- Number of youth who closed for services with names;
- Number of youth who are able to remain or return home and in their school without getting into trouble;
- Number of youth who returned from out of state residential placement to West Virginia;
- Number of youth who are able to be at home without entry or re-entry into foster care;
- Number of parents and youth who have increased skills and strengths and their needs are reduced, as evidenced by CANS scores;
- Number of parents with a higher level of skill to deal with youth behaviors and needs and enhanced well-being and satisfaction in their role as a parent, as evidenced by improved CANS scores;
- Caseload ratio of Wraparound Facilitators;
- Percentage of turnover of Wraparound Facilitators;
- Number of youth that had more than 1 Wraparound Facilitator;
- Percentage of families with initial contact within 72 hours;
- Percentage of families with a face-to-face family joining meeting within 5 days;
- Percentage of CANS completed within 14 days of case referral;
- Number of children who did not require out-of-home crisis intervention;
- Number of children who remained in their home; and
- Number of families who established new or existing community/natural supports this month (list types of natural and/or community supports).

In addition, successful applicants will be required to submit financial reports which include revenue received by the agency for wraparound services including amount, purpose, and source and all expenditures by the agency by service and amount.

**D. Time Frames/Mandatory Start Date**

Grants awarded will be for the period of May 1, 2016, through April 30, 2017.

**E. Service Delivery Area**

The phase two counties are Brooke, Hancock, Monongalia, Marion, Ohio, Barbour, Grant, Hardy Hampshire, Harrison, Lewis, Mineral, Pendleton, Preston, Randolph, Taylor, Tucker, Upshur, Greenbrier, Mercer, Monroe, Nicholas, Pocahontas, and Summers.

## **F. Organizational Requirements**

Successful applicants must become members of and participate in the Community Collaboratives for every area they serve as well as the Regional Children's Summits, which include other community agencies, parents, religious institutions, and cooperate with the independent evaluator. Applicants must:

- State the mission of the organization and how it relates to programming;
- Describe the history of the organization within the community and provide evidence that it has the capacity to serve the target population;
- Describe how services provided by partner agencies will be monitored and evaluated (if applicable);
- Include an organizational chart showing how the program fits into the organization's structure;
- Discuss the capability and experience of the applicant organization; and
- Demonstrate that the applicant organization has linkages to the target population and ties to grassroots/community-based organizations that are rooted in the culture of the target population.

## **G. Staffing Requirements**

- Provide a complete list of staff positions for key personnel, reflecting the role of each position, their level of effort/involvement and qualifications.
- Discuss how the key personnel have demonstrated experience, are qualified to serve the target population and are familiar with community based services.
- Discuss the recruitment and training of the care coordinators and supervisors whose sole responsibilities will be related to Safe at Home Wraparound.
- Ensure staff will be certified or contracted to administer Child and Adolescent Needs and Strengths (CANS) tool.
- Ensure that supervisory staff have a Master's in social work, counseling or psychology with applicable license, plus two years post-college experience providing direct services to children and families.
- Describe experience working with youth at risk of out-of-state placement or returning from out-of-state placement.
- Ensure that Wraparound Facilitators will have no less than:
  - Education-Bachelor's degree in social work, sociology, psychology or other human service related field, plus 2 years of post-graduate work experience serving this population;

- Experience/Skills-Must have experience and commitment to working directly with older youth and their families. Must have a good knowledge base of mental illness diagnoses and behavioral disorders in children. Must be able to collaborate closely with a team of family members and professionals to develop and implement individualized plans of care. Must have a flexible schedule in order to meet with youth and family wraparound team members. Bilingual skills preferred (Spanish). Personal family experience with mental illness is helpful;
- Applicants must provide detailed staffing patterns for the delivery of the core components of wraparound;
- Applicants must participate in a collaborative, coordinated cross-system training process to embed the wraparound philosophies for Wraparound Facilitators, supervisors, wraparound team members, including families and staff of the Bureau for Children and Families, subcontracted agency employees, to include, at a minimum, the following content:
  - a. System of Care “Ladder of Learning” for Core Competencies;
  - b. Child and Family Team Building;
  - c. Family Centered Practice;
  - d. Family & Youth Engagement;
  - e. Effects of Trauma on Children and Youth;
  - f. The 10 Wraparound Key Principles;
  - g. Safe at Home West Virginia Model;
  - h. BCF Policy Cross Training; and
  - i. Wraparound Certification for all Wraparound Facilitators.
- Applicants must designate staff whose purpose will be monitoring the adherence of performance measures for families utilizing Safe at Home Wraparound.

## IV. DEPARTMENT RESPONSIBILITIES

The responsibilities of the Department include, but are not limited to:

- Referrals to Local Coordinating Agencies will be made exclusively by the Department through the Safe at Home West Virginia Wraparound Referral Form;
- Ongoing technical assistance will be provided by the Bureau's Safe at Home Team and other entities deemed necessary for the delivery of services; and
- Payment for Wraparound Facilitators will be made through an initial startup grant. A daily case rate will be paid for each family served, and will exclude services billable to Medicaid and other sources.

It is anticipated after the end of the startup grant that the daily rate and other billable sources will sustain the program.

## V. APPLICATION PROCESS

### ***A. Intent to Apply***

The application is available online at [http://www.dhhr.West\\_Virginia.gov/bcf/](http://www.dhhr.West_Virginia.gov/bcf/). Anyone interested in submitting an application must submit a "Letter of Intent" form electronically **by March 15, 2016**, and must submit **an original and 5 copies of the application** to the BCF Division of Grants and Contracts, 350 Capitol Street, Room 730, Charleston, WEST VIRGINIA 25301 **by 4:00 p.m. on March 21, 2016. Applications received after 4:00 p.m. on March 21, 2016, will be removed from consideration.**

Telephone calls regarding the Funding Announcement will not be accepted. All questions must be submitted electronically by **March 4, 2016**. Answers to questions will be posted online **March 10, 2016**.

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.

### ***B. Administrative Data***

The Application cover page shall include: name of applicant; service delivery area to be covered; applicant's business address; applicant's telephone number; name of authorized contact person; signature of person authorized to act in agency's behalf; and date.

Applicant shall provide a summary of the agency's organization, its size and resources. The

summary is limited to two (2) pages and shall include:

- Identifying information
- Date organization established
- Type of ownership
- Copy of current license to do business in the State of West Virginia
- List of current services being provided
- Organizational chart

**C. Applicant Capability/ Personnel Experience**

Discuss the capability and experience of the applicant organization.

**D. Program Narrative/Work Plan**

Detailed description of the applicant's understanding of wraparound services and target population and the plan to deliver the services.

**E. Budget**

Detailed line item budget with Wraparound Facilitator costs.

**VI. EVALUATION**

Eligible applicants must comply with all requirements provided within this Funding Announcement. Applications that fail to comply with the requirements provided within this document, incomplete applications or applications submitted after the application deadline will not be reviewed. A Statement of Assurance agreeing to these terms is required of all applications. This statement must be signed by the applicant organization's CEO, CFO, and Project Officer. All applications will be forwarded to a grant review team which will score the application in accordance with the criteria stated. Applicants who best meet the specifications of the Funding Announcement will be eligible for an award. The maximum number of points available is one hundred (100).

The Department reserves the right to accept or reject any or all of the applications, in whole or in part, without prejudice if believed to be in the best interests of the Department. The Department also reserves the right to contact applicants to clarify applications.

Applications will be evaluated on the following criteria.

**A. Applicant Experience/Personnel Qualifications: 30 points**



- State the mission of the organization and how it relates to programming;
- Describe the history of the organization within the community and provide evidence that it has the capacity to serve and reach the target population;
- Identify who will oversee the administration and supervision of the services and what their qualifications are;
- Include an organizational chart showing how the program fits into the organization's structure;
- Discuss the capability and experience of the applicant organization. Demonstrate that the applicant organization has linkages to the target population and ties to grassroots/community-based organizations;
- Provide a complete list of staff positions for the service, including the Project Officer and other key personnel, reflecting the role of each position, their level of effort/involvement and qualifications;
- Discuss how the key personnel have demonstrated experience, are qualified to serve the target population and are familiar with the applicable culture;
- Demonstrate that staff meets the minimum education/experience required to provide wraparound services;
- Discuss agency experience working with youth at risk of out of state placement or returning from out-of-state placement; and
- Discuss how staffing patterns will be developed to ensure the delivery of core components of wraparound.

**B. Work Plan/Narrative: 50 Points**

- Applicants must describe the agency's participation in and understanding of system of care values and philosophies;
- Applicants must demonstrate the agency's ability to provide services and/or ensure the delivery of services to the target population;
- Applicants must show the agency's strong collaboration with existing service providers, community stakeholders and the child welfare agency;
- Applicants must provide evidence of the effectiveness of the proposed methodology to deliver wraparound as outlined below.
- Agency must demonstrate the capacity to build and nurture their own provider network relationships for services that cannot be provided internally;
- Applicants must describe how contracted services will be monitored and evaluated (if applicable);

- Applicants must limit caseload sizes to between 8-10 families for wraparound facilitators;
- Applicants must demonstrate clear understanding of 10 Key Principles of Wraparound (National Wraparound Initiative <http://nwi.pdx.edu/>);
- Applicants must describe creative outreach methods to serve geographically isolated families;
- Applicants must demonstrate the use of culturally appropriate services;
- Applicants must demonstrate the use of evidence-based and/or evidence-informed, promising practices;
- Applicants must demonstrate the use of strategies to promote family engagement;
- Applicants must demonstrate the use of trauma-focused curricula in the provision of wraparound interventions;
- Applicants must describe the development needs for the proposed area(s) to be served. Applicants must address how the organization will structure and develop wraparound programs to meet the specific needs of the target populations;
- Applicants must explain how the wraparound program will assist in the prevention of unneeded congregate care placements and decrease the length of stay when congregate care is necessary. It should be a clear, concise, well-supported statement identifying the specific service development needs and barriers in each community and how the applicants will work collaboratively to build the necessary wraparound structures, supports and services;
- Applicants must address how the county currently addresses or fails to address reliance on congregate care;
- Applicants must provide information on services and community supports that are currently available in the county/counties the applicant desires to serve. If such services and supports are currently available, applicants must describe the collaboration with other service providers and community stakeholders;
- If service development is required in order to be able to provide Safe at Home West Virginia, applicants must explain what additional services are needed, how current services may need to be enhanced and how the applicant will collaborate with existing stakeholders to develop what is needed, including barriers, (i.e., isolated locations, funding factors, lack of workforce, etc.);
- Applicants must identify any other organizations that will participate in the proposed project, describe their roles and responsibilities and demonstrate their commitment to the project with a Letter of Agreement/Memorandum of Understanding (MOU).

Applicant must include Letters of Agreement/MOUs from community organizations and/or partners supporting the project with the application.

- Applicants must describe the step-by-step process for implementing Safe at Home West Virginia in phases during the grant period as described on pages 5-8 of this announcement.

**C. Budget: 20 Points**

- Calculations are correct;
- Reflects costs that are allowable and reasonable;
- Costs are directly tied to the services; and
- Includes sufficient funding to support staffing.

Applicant's failure to provide complete and accurate information may be considered grounds for disqualification. The Department reserves the right, if necessary, to ask applicants for additional information to clarify their applications and negotiate changes to the application.