Project Design Guidance for the CBO Track

SOR Tier Award Program (TAP) for 4.B and 4.C

I. TAP Awards Overview

Eligible applicants
Non-profit, non-Medicaid billing, community-based social and human service organization (e.g., social services, religious organizations, food banks).
Organizational requirements
CBOs must meet the following organizational requirements: • IRS 501(c)3 exemption verification • Current Certificate of Liability Insurance Coverage • Unique Entity Identifier (UEI), a 12-character alphanumeric ID assigned to an entity by SAM.gov. • Delaware eSupplier Number • Organization and its staff provide active support of individuals who are interested in or are currently taking MOUD as part of their recovery. This includes making referrals to treatment providers who offer MOUD. In addition, CBOs will be required to demonstrate improved client outcomes with their proposed projects. This may require adoption and inclusion of client surveys, like the Multidimensional Inventory of Recovery Capital (MIRC) or the Brief Assessment of Recovery Capital (BARC-10), that can be aggregated and reported to DSAMH regularly to document changes.
Goal
Engage individuals with OUD/STUD or expand the capacity of other CBOs to engage individuals effectively. Projects that propose engagement of individuals with OUD/STUD should use engagement best practices, address participants' health-related social needs and have a measurable positive impact on treatment outcomes, quality of life and/or other indicators of improved well-being. All projects must be able to measurably demonstrate intended improvements.
Funding parameters
Award amount: *Up to* **$300,000**

The proposed budget must match the level of effort by staff/contractors and the reasonable and appropriate costs associated with the scope of the project. DSAMH reserves the right to make an award at a funding level that is reasonable and appropriate, different than what is requested in the application.

Applications with excessive funding requests not justified in the budget will be rejected and returned to the applicant for revision delaying determination for an award. There will be a limited number of awards in both the 4.B and 4.C categories.

Anticipated/estimated duration of award

January 23, 2025 – September 29, 2025

Please note that incomplete applications or applications not providing sufficient detail or justification for project design will delay application review and determination. Applicants must proportionally adjust budget and work plans to a shortened implementation timeline if delays are experienced, prior to award execution.

DSAMH will be conducting a rigorous review of all applications as part of the SOR 4.0 TAP program. DSAMH will be awarding a limited number of awards for both 4.B and 4.C opportunities and is looking for community-based organizations (CBOs) to propose well-crafted projects or programs that will measurably improve outcomes for their participants. Applicants are encouraged to participate in a series of engagements with DSAMH prior to applying to ensure a clear understanding of the program, its goals, and its requirements. These engagements include:

- Informational Webinar: SOR 4 TAP Tier 4.B-4.C Funding Opportunity
  - September 25, 2024 from 11:30 am – 1:00 pm
  - Register in advance for this meeting: https://us06web.zoom.us/meeting/register/tZIsd-Ghqj8rE9Dqu2E1rTURUMS-Vk_wmut6
- Applicant Presentation Meetings
  - Following the submission of applications, virtual sessions will be scheduled with applicants. These meetings offer applicants the opportunity to present their proposed projects and address any clarifying questions from DSAMH prior to the commencement of the comprehensive application review process.

II. Project guidance for CBOs

The goal for SOR TAP 4.B and 4.C is for awardees to effectively engage individuals with OUD/STUD or expand CBO capacities to have a measurable positive impact on treatment outcomes, quality of life and/or other indicators of improved well-being. Engagement-focused work should include using engagement best practices, addressing participants' health-related social needs, and supporting connection to treatment.

There are five principles that 4.B and 4.C awards must exemplify in the design and implementation of their projects:

  I. **Outcome-based evaluation**

The awardees must evaluate their intervention, or program to determine whether it drives to a clear outcome of improvement in OUD/STUD, improved quality of life and/or enhanced well-being. For some projects, the measurable impact may result from an increased knowledge and skill of staff to engage with individuals with OUD/STUD with greater effectiveness. Monitoring participation/attendance in the project (i.e., how many individuals participated) is not a sufficient evaluation for TAP 4.B and 4.C projects.

DSAMH understands that the duration of the project or program may need a longer timeline to fully measure outcomes. At the end of the 8-month implementation period, there will be an opportunity to apply to continue projects that are being effectively implemented but need a longer timeline to fully measure the outcome. Projects that have not been implemented effectively, or have not demonstrated sufficient impact, will not be selected to continue into the next grant year.

II. **Novel project, treatment, or program**
The awardees must propose and implement a project that adds a **new** component to their current array of services. TAP awards cannot be used to fund existing projects and services.

III. **Active support for the full-range of FDA-approved MOUD**
The awardees must demonstrate a commitment of staff across their organization to engage with clients and actively support and make referrals for individuals interested in MOUD. SOR funds cannot be awarded to organizations that deny MOUD access or continuation.

IV. **Effective partnership with DSAMH**
The awardees should engage with DSAMH effectively and in a timely manner to monitor progress, report data and collaborate with program integrity specialists for monthly meetings, interviews and site visits as directed. Awardees should pro-actively seek guidance and technical assistance made available to them in order to address any barriers that emerge during project planning and interpretation.

V. **A CQI approach to project/program implementation**
The awardees will practice continuous quality improvement (CQI) as part of their project implementation in partnership with DSAMH. This means continuously monitoring project data/outcomes and adjusting implementation to address concerns and continue improvement of the project. Awardees will work with DSAMH to monitor the effectiveness of the project during the award, but also commit to CQI as a standard component of their implementation beyond the award period. TAP funds are designed to pilot new/innovative projects, that are sustained via service billing/etc. after the grant is over.

- For projects using an evidence-based practice, a fidelity monitoring plan should be designed and implemented with CQI throughout the duration of the project that refers back to the EBP model.
- For projects using an innovative/promising practice, awardees should monitor the impact of the project on participants throughout and adapt the program or project as needed throughout implementation to achieve the proposed outcome in cooperation with DSAMH.

III. HEAP or TAP?

Determining whether to apply for a HEAP (Health Equity Advancement Project) mini-grant or a TAP sub-award in the CBO track should depend upon a few factors.

1. Can you meet the requirement to receive federal funding and contract with the State of Delaware? (see the "organizational requirements" in the grid at the beginning of this document) **If not, it is recommended to consider applying for a HEAP mini grant that has less organizational requirements.**
2. Does your organization have the knowledge and understanding of OUD/STUD to engage individuals effectively or to train CBO staff in other organizations about effective engagement? **If not, it is recommended to consider applying for a HEAP mini grant to build internal capacity first.**
3. Does your organization have sufficient capacity to implement a TAP award for the 8-month implementation period? **If not, it is recommended to consider applying for a HEAP project that has more prescribed and contained project scope options.**

Applications for HEAP will be released at the end of September 2024.

IV. TAP 4.B project overview and sample projects

> *To meet the criteria for a 4.B project in the CBO track, the applicant **must** implement a project to either **effectively engage individuals with OUD/STUD** or expand the **capacity of other CBOs to engage individuals with OUD/STUD** effectively. DSAMH will not consider outreach/marketing projects as meeting the requirements.*

Below please find samples of 4.B projects to guide potential applicants in thinking about project design and structure. **Applicants in the CBO track may also elect to propose a project that is not on this list**. The following list of sample projects is to help shape thinking about projects that can enhance the current SUD system of care in Delaware.

Implement an OUD/STUD Training Initiative

Increase the use of best practice engagement skills across community-based organizations to effectively engage individuals with OUD/STUD and their families in service provision.

Develop and deliver trainings to staff of community-based organizations in your community/county on a topic critical to effectively engage individuals with OUD/STUD. The trainer should demonstrate mastery of the topic as well as excellent training and facilitation skills. Potential training topics could include harm reduction, recovery-oriented framework, person-centered, trauma-informed service, combating stigma or mental health first aid. The CBO should retain the capacity to train on

the topic beyond the conclusion of the project and should not be dependent upon the use of a contracted trainer.

An evaluation plan to measure learner outcomes for the individuals trained will be a required component of the project as well as a continuous quality improvement approach to the development of training over time to enhance/improve learner outcomes.

Support Recovery in Case Management Services

> Implement a program or intervention focused on recovery capital tools and frameworks to improve service to individuals with current and past SUD, enhance treatment outcomes, improve quality of life, and/or enhance well-being.

Case management organizations frequently provide a range of human and social services to individuals with SUD. Case management organizations can utilize a recovery capital framework as part of their engagement work to enhance treatment outcomes and quality of life. Case managers with lived experience or peer recovery coaches have been shown to be particularly effective in working with clients with current and past SUD to build recovery capital.

An evaluation plan to measure recovery capital over time with individuals to demonstrate improvement and progress in the key domains of recovery capital will be a required component of the project as well as a continuous quality improvement approach to the use of recovery capital frameworks and assessment tools.

Resources: https://www.sciencedirect.com/science/article/abs/pii/S0376871619304016; https://americorps.gov/sites/default/files/document/Recovery%20Coaching%20Cohort%201%20Evidence%20Snapshot.pdf

Pilot an Enhanced Case Management Program

> **Enhanced Case Management (ECM)** is a comprehensive approach that goes beyond traditional case management by providing intensive, personalized support tailored to the unique needs of individuals struggling with OUD/STUD. The goal is to improve treatment engagement, retention, and overall recovery outcomes by addressing the multifaceted challenges faced by this population.

A community-based organization would develop, implement, and evaluate a pilot an ECM program for people with OUD.

As part of the ECM pilot, organizations would:
- Identify/hire case managers who would be responsible for the engagement work.
- Utilize the DTRN 360 care coordination platform (once launched) to receive and respond to referrals from treatment providers and engage referred clients into ECM.

- Develop and conduct in-depth assessments that document needs, strengths, and potential barriers to care.
- Develop and implement personalized care plans that addresses the individual's specific needs, preferences, and goals.
- Navigate individuals to support services to address identified health-related social needs.
- Ensure seamless access to a variety of services including medical care, social support, and community resources.
- Provide continued support and follow-up care to help ECM clients maintain their recovery throughout the duration of the pilot.

Please note: Implementation of this project would involve a close partnership with DSAMH to pilot the use of DTRN 360 as part of the enhanced case management. The CBO would be expected to accept a minimum number of referrals monthly for the duration of the project. DSAMH would provide training and guidance to community-based organizations for access to use this platform.

V. <u>TAP 4.C project overview and sample projects</u>

*To meet the criteria for a 4.C project in the CBO track, the applicant **must engage individuals with OUD/STUD** or **expand the capacity of other CBOs** to engage individuals with OUD/STUD effectively. Projects should be focused on **tailored engagement and service provision approaches for a sub-population** of individuals with OUD/STUD to better meet their unique needs (e.g., cultural, situational) or to build the capacity of another CBO to deliver a tailored engagement for a sub-population of individuals with OUD/STUD. **Recruiting special populations into existing programs is not a tailored program. This award is designed to support specialized programming for a special population** DSAMH will not consider outreach/marketing projects as meeting the requirements.*

Below please find samples of 4.C projects to guide potential applicants in thinking about project design and structure. **Applicants in the CBO track may also elect to propose a project that is not on this list.** The following list of sample projects is to help shape thinking about projects that can enhance the current SUD system of care in Delaware.

Implement a Culturally Adapted EBP

Implement a culturally adapted EBP to address barriers to treatment experienced by Latinx and Black/African American individuals who experience barriers to OUD/STUD treatment because of cultural incongruence or a lack of culturally responsive care.

Example: Imani Breakthrough Project/Imani Rompiendo Barreras

Imani Breakthrough is a faith-based, person-centered, culturally informed harm reduction recovery program that was developed through a community based participatory process.

As part of the model, Imani groups are delivered in churches and are administered by trained church representatives, including a person with lived experience of a SUD. The groups are designed to provide culturally informed education, mutual support, and intensive wraparound coaching, in a safe and familiar environment along with referral to MOUD.

The Imani projects developed to meet the needs of Black/African American and Latinx individuals with SUD who may benefit from receiving supportive services through a culturally congruent faith-based organization. Research has shown that in both communities, a lack of culturally responsive services has been a barrier to access.

Resources: https://portal.ct.gov/dmhas/newsworthy/news-items/the-imani-breakthrough-project; https://www.tandfonline.com/doi/abs/10.1080/15332985.2021.1930329

Promote Health and Recovery for Transgender Individuals

> Implement an integrated care model that addresses risks for HIV, OUD/STUD, and mental health challenges among transgender individuals due to a combination of social stigma, discrimination, and limited access to affirming healthcare.

Example program: Transgender Resources and Neighborhood Space (TRANS)

The TRANS program creates a safe space for providing transgender-sensitive education about HIV risk reduction, substance use disorder prevention, and general health promotion. Transgender health educators conduct workshops and make referrals to appropriate OUD/STUD treatment programs and other services in the community. Research highlights the crucial importance of hiring transgender women as professional health educators who can increase accessibility to this stigmatized population and serve as role models.

Resources: Tooru Nemoto, Don Operario, JoAnne Keatley, Hongmai Nguyen, Eiko Sugano, "Promoting Health for Transgender Women: Transgender Resources and Neighborhood Space (TRANS) Program in San Francisco", *American Journal of Public Health* 95, no. 3 (March 1, 2005): pp. 382-384. Published Online: October 10, 2011 Promoting Health for Transgender Women: Transgender Resources and Neighborhood Space (TRANS) Program in San Francisco | AJPH | Vol. 95 Issue 3 (aphapublications.org)

Promote Family Resilience and Recovery

> Supporting parents with substance use disorder (SUD) is crucial for both the recovery of the parent and the well-being of the entire family unit. Without intervention, the effects of a parent's SUD can extend to future generations. Children who grow up in homes affected by SUD are at higher risk for developing substance use disorders themselves. By supporting the parent's recovery, families can break this cycle and promote healthier patterns for future generations.

Example program: Celebrating Families!$^{TM/}$ Celebrando Familias!

(CF!) is a program designed for families with children ages 4–18 in which at least one parent has problematic substance use and is at risk of engaging in domestic violence, child abuse, or child neglect. CF! aims to break the cycle of addiction in families, improve participants' healthy living skills, and increase children's well-being and functioning. CF! was originally designed to support families in Family Drug Treatment Courts and to increase rates of family reunification but has since expanded to serve families in the community as well. The program seeks to provide a safe, nurturing place for children and parents to explore their feelings and choices and to learn communication and coping skills. The curriculum engages every member of the family and aims to foster the development of healthy and addiction-free individuals. A separate Spanish language manual, Celebrando Familias!, is available. This adaptation contains the same overall structure and format as the English-language version with modifications to examples and content to increase the cultural relevance of the program.

Resources: Celebrating Families! Program & Curriculum | Prevention Partnership Int.; CEBC » Celebrating Families › Program › Detailed (cebc4cw.org)

VI. <u>Future, specialized, multi-year TAP opportunities</u>

Please be advised that DSAMH plans to release additional specialized opportunities under TAP by Q2 2025. The Multi-Year Targeted Projects (MYTP) will be specialized opportunities to design and implement specific and complex interventions over a period of 2.5 years, with significant design and technical assistance support from the state. Anticipated funding will support two full years of project implementation after design/approval, and are equal in annual value to the TAP 4.B and 4.C tiers. Applicants for these opportunities must have successfully implemented a HEAP or TAP project with DSAMH previously. DSAMH anticipates awarding between 1-4 awards for a targeted cohort of projects depending upon the quantity and quality of applications. Additional details will be released later this fall.