



South Shore Community Partners in Prevention

South Shore Community Partners in Prevention Community Health Network Area (CHNA 23)

Serving the Communities of:

Carver ■ Duxbury ■ Halifax ■ Hanover ■ Hanson ■ Kingston
Marshfield ■ Pembroke ■ Plymouth ■ Plympton ■ Rockland

2018 Behavioral Health Grant Request for Proposals

I. Background

Behavioral health, including mental health and substance use disorders, has emerged as an issue of national and local concern, as the complex nature of managing and treating these conditions presents challenges for the health care system, as well as individuals, families, and communities.¹ Mental health conditions and substance use disorders can be challenging conditions on their own; for many patients, these health issues are intertwined in complicated ways.² For decades, behavioral health has not been coordinated, nor has it been integrated into primary care or other healthcare services, posing further obstacles to positive health outcomes for these conditions.³ In recent years, mental health issues and substance use disorders have reached crisis levels. The purpose of this Request for Proposal (“RFP”) is to provide funding to nonprofit entities working on innovative programming in the behavioral health setting, including initiatives focused on mental health and substance use disorders.

Mental Health

In 2013, to assess the need for mental health services, a local health system on the South Shore of Massachusetts contracted with Health Resources in Action (“HRiA”) to prepare a behavioral health needs assessment. As part of the assessment, HRiA conducted focus groups with local residents to understand the need for services. During these interviews, participants commented on “high rates of anxiety, depression, and loneliness among community members”. Assessment participants also were concerned about high rates of depression and anxiety among children and youth that manifests itself in self- destructive behavior and other emotional issues.”⁴ Moreover, older survey data from the Massachusetts Department of Public Health’s Behavioral Risk Factor Surveillance Survey provide that a higher percentage of adults living in the Southeast Region of Massachusetts, including those living within the Community Health Network Area (CHNA) 23’s Target Service Area (Carver, Duxbury, Halifax, Hanover, Hanson, Kingston, Marshfield,

¹ Health Resources in Action, *Jordan Hospital Behavioral Health Assessment and Care Model Analysis*. January 2014

² *Id.*

³ *Id.*

⁴ *Id.*

Pembroke, Plymouth, Plympton and Rockland) report having 15 or more days of mental health concerns in the past 30 days.⁵

Substance Use Disorders

Like so many states across the country, Massachusetts is facing a growing epidemic of opioid addiction and overdose deaths. In March 2014, a Public Health Emergency was declared in the Commonwealth, triggering the formation of a Task Force which brought together affected individuals and families with stakeholders from public health, law enforcement, medical providers, and community agencies. The Task Force released a report discussing a comprehensive strategy to address the crisis. Some of the recommendations from the Task Force include, but are not limited to, the expansion of treatment beds and integrated services, as well as the formation of a centralized navigation system for patients, families, and first responders to locate treatment services, etc. The South Shore of Massachusetts, including communities within SSCPP's Targeted Service Area, has seen a steady increase in the number of opioid deaths over the last three years.⁶

To combat behavioral health issues and provide critically needed funding to community-based agencies and local healthcare providers, South Shore Community Partners in Prevention is issuing this RFP, so local entities may seek monies for innovative behavioral health programming.

II. Funding Requirements

All applications must document an understanding of the need for behavioral health services in the Targeted Service Area and propose programming to meet this need. Applications must also explain how the proposed programming will meet this need, and how applicants will measure the impact of the implemented programming. All applications must demonstrate compliance with applicable grant criteria, including the completion and submission of the 2018 Behavioral Health Grant Request Application Form and all associated attachments.

III. Summary of Funding

Through this RFP, South Shore Community Partners in Prevention will award two grants, each for \$25,000 for a project period of twelve months. Applicants may request multiple years of funding, but no more than \$25,000 may be requested in a single year. Additionally, applicants may request a maximum of three years of funding. The request for multiple years of funding may be made through the response to this RFP or through a Grantee's six-month progress report. If an applicant is requesting multiple years of funding, please complete a timeline and budget for each year of funding.

⁵ Massachusetts Department of Public Health, MassCHIP, Behavioral Risk Factor Surveillance Survey 1995- 2009

⁶ *Number of Opioid-Related Overdose Deaths All Intents by City/Town, MA Residents January 2012- December 2016*. Registry of Vital Records and Statistics, Massachusetts Department of Public Health May 2017

IV. Eligibility Requirements

Only nonprofit entities⁷ may apply for funding. Additionally, all funding must benefit residents of one or more of the towns in the Targeted Service Area: Carver, Duxbury, Halifax, Hanover, Hanson, Kingston, Marshfield, Pembroke, Plymouth, Plympton and Rockland.

V. Application Instructions

Please follow all application instructions, including:

- Complete the 2018 Behavioral Health Grant Request Application Form to apply for this RFP. This application must be completed and all character limits adhered to in order to be eligible for funding. ****Please note: all character limits include spaces. If the applicant goes over the character limit, the application will not be reviewed.**
- Ensure that all responses on the 2018 Behavioral Health Grant Request Application Form are typed, single-spaced and in 12-point font. The font must be Times New Roman or Arial. The 2018 Behavioral Health Grant Request Application Form must have 1-inch margins on all sides and adhere to all character limits. Failure to adhere to these formatting requirements will lead to disqualification and the application will not be reviewed.
- The 2018 Behavioral Health Grant Request Application Form must be accompanied by all required attachments outlined on the List of Appendices. Failure to submit any of the stated attachments will lead to disqualification of the application and the application will not be reviewed.
- Any technical or substantive questions should be directed to the following email address in writing chna23@gmail.com Please allow 72 hours for responses.
- All proposals must be submitted by **September 14, 2018 by 5pm**. Any proposals received after this time will not be reviewed.
- Please send all completed proposals to the following email address: chna23@gmail.com.

VI. Scoring Matrix by Section

Responses to the Behavioral Health Grant Request for Proposal will be weighted based on the following points:

- Background and Need 10 Points
 - The applicant should provide a clear linkage behind its mission and goals and the requested funding.
 - The applicant should describe in detail the need for behavioral health services in the targeted area utilizing data and providing sources of information.

⁷ Applicants must provide documentation from the Internal Revenue Service that the organization operates as a 501(c)(3) organization.

- Response Section 65 Points
 - The applicant must describe the intervention or innovating programming that grant funding will be used for and outline the evidence-base for the initiative.
 - The applicant must outline specific, measurable quality metrics that are trackable to show success of the project.
 - The applicant must provide a detailed evaluation plan, including who, how and when the identified quality metrics will be tracked and reported on.
 - The applicant must provide information on the staffing plan for the project, as well as a realistic timeframe for implementation.
 - The applicant must describe how the program will continue once grant funding ends. A clear and feasible sustainability plan should be provided.

- Collaboration Section 15 Points
 - The applicant must discuss at least one collaborating partner organization, including the role of the organization, if monies will be provided to the organization and how oversight will be provided to the partner organization.

- Other Relevant Information Section 10 Points
 - The applicant must outline how this project relates to other local, state or Federal initiatives around behavioral health.

VII. Priority Points

In addition to the aforementioned 100-point scale, grant responses will be given priority points for the number of towns that will benefit from the proposed project. CHNA 23's service area includes eleven towns (Carver, Duxbury, Halifax, Hanover, Hanson, Kingston, Marshfield, Pembroke, Plymouth, Plympton and Rockland); for each town that will be impacted by proposed project (a direct impact on residents of said town is required), one point will be provided to the response. An applicant may earn up to 11 priority points. Consequently, the highest score a response may be given is 111.

Proposals with the highest scores (out of 111) will be provided with priority for funding.