



# Pre-Grant Application Form

Department: <b>Ouray County Public Health Agency</b>		Date: <b>03/24/2016</b>
Grant Title: <b>Communities that Care</b>		Year of grant commencement: <b>7/1/16</b>
Grant Source: <input type="checkbox"/> Federal <input checked="" type="checkbox"/> State <input type="checkbox"/> Other _____		
Project Total: <u>\$95,000</u> County Share: <u>0</u>		
Other: _____		
Grant Request: <u>\$17,000 for OCPHA &amp; \$78,000 for Drug Free Coalition of Voyager as subcontractor</u>		
<p><b>Reporting Requirements:</b></p> <p>Reporting requirements are not yet available, but will likely require monthly invoicing, quarterly reports, and possibly an implementation and evaluation plan, similar to other CDPHE administered grants. If awarded the grant, a draft contract will be presented to the County Admin, County Attorney, and BOCC/BOH for review. The contract would include the reporting requirements expected by CDPHE.</p>		
<p><b><u>Grant Description/Purpose:</u></b></p> <p>CDPHE is offering community funding to implement evidence-based youth substance abuse prevention strategies. Pending legislative approval, CDPHE will provide non-competitive funding for local public health agencies (LPHAs) beginning July 2016. CDPHE requested ongoing funding from the marijuana tax cash fund for youth substance abuse prevention, including marijuana, opioids (including heroin or prescription drugs), and alcohol. At the request of the Governor's office, funding will be used to implement local evidence-based youth substance abuse prevention strategies using the <i>Communities that Care</i> model. Talking points for the <i>Communities that Care</i> model are attached.</p> <p>Draft budget includes \$17K for OCPHA: \$8K for our staff to attend coalition meetings and assist the coalition staff person with reporting requirements, \$4K for operating and travel, \$5K for indirect.</p> <p><b>Timeline:</b></p> <ul style="list-style-type: none"> <li>• Draft SOW and budget due no later than 8:00 a.m. on 4/18. CDPHE will quickly review and get back to us with edits.</li> <li>• Final documentation (contact form, SOW and budget) due no later than 8am on 4/20 in order to start work on 7/1/2016.</li> <li>• Per CDPHE: Please remember to hold space on your late May/early June board meetings if this contract will require board signatures.</li> </ul>		

**Grant Match Information:**

Percentage of Grant Match (if applicable): County: 0 % Grant: 100 % Other: \_\_\_\_\_ %

Percentage of Grant designated for Administration (especially for pass-through grants of which the County is the sponsor or administrative agent): 10% of personnel, possibly 10% of contractual, minimum (\$17K to coordinate per draft budget

If other, please indicate: \_\_\_\_\_

**Proposed Source of County Funding for grant match:**



General Fund Revenue  R & B Fund Revenue  EMS Fund Revenue   
Social Services Fund  Public Health Fund Revenue  Other

If other, please indicate: \_\_\_\_\_

**Submission/Review/Approval or Denial:**

Department Head / Elected Official: Elisabeth W. Lawaczeck Date: 3/24/2016

County Administrator: Courne J. Hunt Date: 3/29/2016

Comments: \_\_\_\_\_

Human Resources Director (if applicable) \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

Board of Health, Chair: \_\_\_\_\_ Date: \_\_\_\_\_

Approve  Deny

## DRAFT: LPHA Funding Opportunity to Prevent Youth Substance Abuse

CDPHE is excited to announce the possibility of community funding to implement evidence-based youth substance abuse prevention strategies. Pending legislative approval, CDPHE will provide non-competitive funding for local public health agencies (LPHAs) beginning July 2016. Additional competitive funding will be available beginning January 2017.

### Where do the funds come from?

- CDPHE requested ongoing funding from the marijuana tax cash fund for youth substance abuse prevention, including marijuana, opioids (including heroin or prescription drugs), and alcohol. Initially, approximately \$3.5 million will be available to LPHAs.

### What activities will be included in the grants?

- At the request of the Governor's office, funding will be used to implement local evidence-based youth substance abuse prevention strategies using the *Communities that Care* model.

### What is Communities that Care?

- [Communities that Care \(CTC\)](#) is an evidence-based approach for communities to form or partner with existing coalitions, identify prevention priorities and effective strategies to address those concerns, and to mobilize the community to implement the strategies.
- CTC uses a shared risk and protective factor approach. You can learn more about what this means from CDC's [Connecting the Dots](#).
- CTC is very similar to the public health approach, but this model provides significant support, training and structure.
- CDPHE and an advisory committee will provide community coalitions with regional trend data on the impact of risk and protective factors, as available, and a menu of evidence-based strategies for implementation. The menu will include evidence-based substance abuse prevention strategies supported by SAMHSA and the CDC, among others.



### Who is involved in CTC from my community?

- Common champions for *Communities that Care* coalitions have included the police chief/sheriff, publisher of local newspaper, superintendent of schools, hospital director, executive director of a children's initiative, county commissioner, chief juvenile judge and mayor.
- CDPHE will ask that coalitions also include any community partners funded by the Colorado Department of Education Substance Abuse Professionals in Schools grants, Office of Behavioral Health, Tony Grampsas Youth Services, and Division of Criminal Justice Juvenile Justice programs.

### How do you define community?

- The CTC model is designed to affect change at a local level: organizing coalitions to select and implement programs and change systems or policies that impact youth substance abuse locally. Depending on the population size and the types of decision makers within the community, CTC could be implemented within a neighborhood or across a county. The CTC process requires a full-time coordinator in each community to engage these partners to affect change.
- LPHAs may select the geographic area to implement the CTC process: one or more neighborhoods, cities, or counties. In some circumstances, a regional coalition could implement the CTC model if the members are well positioned to implement change across communities. If LPHAs choose to partner or regionalize for fiscal purposes, a region may select to intervene only in smaller geographic communities within their region.

### Who is eligible for the funding?

- CDPHE will offer noncompetitive contracts to LPHAs that selected Substance Abuse/Mental Health as a burden in their community health assessments or public health improvement plans.
- If the funding is approved, LPHAs can begin work in July 2016.
- LPHAs can collaborate with other LPHAs, if desired (see note about CTC above).
- LPHAs can pass-through the funding to substance abuse prevention partners, if they feel this is more appropriate for implementation in their area.
- LPHAs that are not eligible for noncompetitive funding (i.e. did not select MH/SA in assessment or plan) can apply for competitive funding during the RFA process early Fall 2016.

### How much money will be available to communities?

- Minimum funding levels: LPHAs can request funding for one full-time staff and operational expenses, totaling ~\$90,000 annually.
- Maximum funding levels: LPHAs can request funding for up to 4 or 5 full-time facilitators to work in multiple communities, a support staff, operating & program expenses, totaling ~\$500,000 annually.
- Funding will last 5 years (4.5 years for the competitive grants) to support prevention implementation.
- The Department will provide nearly \$6M initially (~\$3.5M to LPHAs and ~\$2.5M competitive) and more than \$8M ongoing for grants to local public health agencies and to additional community partners across the state.

### What does the timeline look like?

- 3/15/16 - In preparation for approval, LPHAs that qualify for non-competitive funding inform CDPHE of their interest by completing this form: <http://goo.gl/forms/LNPFsQXPh6>. CDPHE will then be in touch to develop scopes of work and budgets. LPHAs will submit the following info:
  - Agency that will operate as the fiscal agent
  - Number of “communities” intended to be served, and the geographic boundaries each
  - Brief description of substance abuse AND/OR mental health priorities highlighted in the assessment or plan
  - Likely total budget request
  - Likely budget breakdown, including the number of FTE that will be requested to operate the grant and implementation dollars needed in the first year
  - Extenuating circumstances in the community (i.e. existing CTC coalition with a facilitator, assessment and plan in place, therefore funding would be needed for implementation)
  - Whether or not funds will be used to “pass-through” to another local organization
- 3/17/16 - **NEW DATE**. Budget hearing with the Joint Budget Committee (JBC) of the Colorado Legislature to determine if CDPHE’s request for funding will move forward. If the JBC votes to approve this funding, then the process will need to move quickly in May and June. You can read more about CDPHE’s budget requests on the [Office of State Planning and Budget’s website](#).
- 4/30/16 - CDPHE staff approve scopes of work and budgets.
- May - If this funding passes as part of the state budget (long bill) for next year, CDPHE and LPHAs will route contracts for signature and approval.
- 7/1/16 - Funding for LPHAs begins.
- Early fall - CDPHE releases a Request for Applications (RFA) for additional communities and partners outside of LPHAs, or those LPHAs that did not qualify/did not receive non-competitive funding, to address youth substance abuse prevention within their communities.
- 30 days later - Applications submitted by communities.
- 11/30/16 - CDPHE approves scopes of work/budgets for additional communities to implement CTC.
- 1/1/17 - Funding for additional communities begins.

### Still have questions?

Contact Ali Maffey, program manager with the Retail Marijuana Education Program, to learn more.

- [ali.maffey@state.co.us](mailto:ali.maffey@state.co.us) or 303-691-4031

## FAQ's:

- **What strategies can be implemented by a community?**
  - **Primary prevention** strategies that address the [social determinants of health](#) or the shared risk and protective factors (like those [listed here](#)) that impact substance abuse, or other evidence-based substance abuse prevention strategies outlined in EB registries are all appropriate for implementation.
  - CDPHE will provide a narrowed-down menu of options in June 2016 after consultation with the Governor's office and others. Communities that are already proposing strategies for implementation may not fully understand the CTC process, which requires **community engagement prior to identifying strategies** to implement.
  - Treatment strategies, like syringe exchange programs or trauma-informed care opportunities are not primary prevention strategies and will not be funded by this grant. However, since you are engaging a community coalition, if they choose to discuss and organize around treatment improvements in addition to the primary prevention strategies they select for implementation, it is a good use of your coalition's time. However, no implementation dollars will be available for those strategies.
  - As discussed on the initial funding webinar, this funding will **require implementation of societal and community-level strategies**. Individual or relationship-level change strategies are already supported through other funding sources, such as Tony Grampsas Youth Services, CDE's Substance Abuse Professionals in Schools grants, etc... As with other public health funding opportunities, the focus of this funding should be on policy, systems, and environmental changes that impact the upstream risk and protective factors related to youth substance abuse prevention.
- **Can a LPHA request indirect in the budget?**
  - Yes - you can request your approved indirect cost rate agreement as part of your total budget.
- **Why do you need budget numbers now?**
  - There is only about \$3.5M initially available for LPHAs. We are requesting general budget amounts now so that we know if we need to negotiate all counties up or down slightly to accommodate all of the *eligible* requests. We will develop a final and more detailed budget together later in March.
- **Is my county eligible?**
  - In order to make the case for non-competitive funding, we require a cutoff for eligibility: prioritizing mental health or substance abuse in your CHA or PHIP.
  - Counties /agencies that selected mental health or substance abuse prevention strategies in their Public Health Improvement Plans are automatically eligible for funding.
    - Agencies that only selected tobacco as a priority are not eligible.
  - Counties /agencies that identified mental health or substance abuse as an area of *burden* in their Community Health Assessments are automatically eligible for funding.
    - Agencies that only selected tobacco as a burden are not eligible.
    - Some of your agencies did not send your assessments to CDPHE for [this site](#) of all CHAs/PHIPs. I may not be able to tell you if your county is eligible if your plan is not publicly available there.
  - Please review your existing CHA and/or PHIP for eligibility.
  - Counties / agencies that have identified mental health or substance abuse as a priority after they completed their CHAs/PHIPs are not eligible for automatic non-competitive funding. However, they are well-positioned to be competitive in the upcoming RFA which will be released likely in August 2016. Funding for those agencies will begin in January 2017.
- **I read on CTC's website that the model uses a school-based survey for baseline and follow-up measures. What about HKCS? Can we require our schools to participate in another school survey?**
  - **No - we will not ask schools to implement another survey.** HKCS does ask a number of questions about risk and protective factors that we can use at the regional level to help

inform the strategies your coalitions select. Additionally, we are working with the Univ of Colorado's Center for the Study and Prevention of Violence to identify other community-level assessments or indicators you can use to help inform the CTC process.

- **What are the expectations in the first year?**
  - Scopes of work will cover two-years of activities and include the following deliverables:
    - a dedicated facilitator trained in the CTC model,
    - signed agreements from recruited coalition members (MOUs or coalition charter) documenting support to follow the CTC model to identify EB prevention strategies,
    - updated community assessment data regarding youth substance use, protective factors in the lives of youth, social determinants of health, protective factors in the community and gaps in community capacity/systems to implement primary prevention strategies for substance abuse,
    - a completed strategic prevention action plan that outlines community-selected strategies (from a list yet to be approved by the advisory committee) that will address the data outlined in the updated assessment above. The plan must be approved by CDPHE,
    - implementation of the plan as outlined by the coalition.
  - Budgets will be for one year of activity, only.
- **Can you share the full online form so I know what questions to answer?**
  - Sure! [Here you go.](#)
- **Can we pass through funding to another agency?**
  - Our fiscal officers do not approve of subcontracting the full dollar amount. Please think about what funding you would keep in-house to pay for LPHA time to participate in the coalition, and any other roles you may play. Would you provide other mini grants to local nonprofits to incentivize their participation in the coalition? Arranging location/food/childcare for participants?
  - The contract recipient (the LPHA) would still be responsible for all reporting to CDPHE, not your subcontractor. Some of the funding should support the LPHA reporting required by the contract.
- **Can the funds be carried over from one year to the next?**
  - No, the funds must be spent down entirely within each fiscal year.