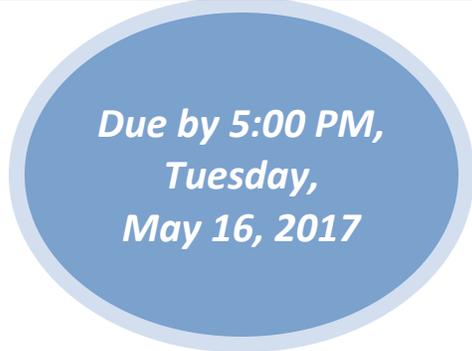


TO: Interested Organizations
FROM: Thurston County Treatment Sales Tax (TST)
DATE: April 12, 2017
RE: Request for Proposals for 2017 TST Community Grants



I. GENERAL INTRODUCTION

In 2008, the Thurston County Board of Commissioners (Board) passed an ordinance that established a one-tenth of one-percent sales tax to increase funding for mental health and chemical dependency treatment services and therapeutic courts. By enacting this “Treatment Sales Tax” (TST) the County has enhanced its funding for services that have helped contain the growth of the jail’s population, and maintain, create, or enhance services for individuals with mental illness, chemical dependency, or co-occurring disorders.

In December 2016, the Board approved the release of **\$246,000** in TST Community Grant funds for 2017, of which an amount of at least \$75,000 is intended to fund programs that have not been awarded a TST Community Grant previously. In addition, preference will be given to programs serving youth and young adults (up to age 25). This one-time grant opportunity is intended to maintain, enhance, or create innovative local services and programs that connect to Thurston Thrives strategies and goals.

All applications will be reviewed to determine whether they are complete and have been submitted on time. A panel will review proposals and make funding recommendations to the Board for final approval. All applicants will be notified of funding decisions following review and approval of the Board. The TST Program reserves the right to modify, reject, or negotiate any proposals submitted with the proposing organization prior to recommending funding.

Grants will be awarded for the **August 1, 2017 to July 31, 2018** time period. No organization may submit more than **two** proposals. Grants are **one-time** funding with no promise of additional funds. Priorities for future years could be different.

II. FOCUS OF RFP

- The **Thurston County TST** Program seeks proposals for services and programs that: meet the needs of Thurston County residents and adhere to the proposal requirements and criteria described in this document. The County will consider any projects that qualify for TST funding.
- Grant proposals should be for no less than \$25,000 and for no more than \$100,000.
- Funds shall be used solely for the purpose of providing for the operation or delivery of chemical dependency or mental health treatment programs and services and for the operation or delivery of therapeutic court programs and services. “Programs and services” includes, but is not limited to, treatment services, case management, transportation, and housing that are a component of a coordinated chemical dependency or mental health treatment program or service (RCW 82.14.460).

- Grants will be awarded to organizations submitting proposals that demonstrate an ability to produce results in one or more of the *Thurston Thrives strategy map goal areas* (see details at <http://thurstonthrives.org/action-teams/>) and the following TST Policy Goals:
 1. Improve the quality of life for Thurston County residents with mental illness and/or chemical dependency *by reducing problem behavior, so children are raised in a healthy, safe environment.*
 2. Improve the quality of life for Thurston County residents with mental illness and/or chemical dependency *by supporting students to overcome barriers and meet academic standards.*
 3. *Increase access to appropriate behavioral health treatment* by increasing levels of interagency collaboration, cross system coordination and planning between corrections, courts, mental health, and chemical dependency and housing services.
 4. *Reduce entry into, or deeper involvement with, the criminal justice system* by increasing community, law enforcement, corrections and courts education and training for diversion and intervention for Thurston County residents with mental illness and/or chemical dependency.

III. PROPOSALS MUST MEET THE FOLLOWING REQUIREMENTS:

- Meet the requirements of RCW 82.14.460. (See Section II.)
- Provide services that are evidence-based or promising practices. (See definitions in Section VI.)
- If providing treatment services, ensure appropriate clinical oversight with treatment fidelity documentation.
- Able to participate in quarterly evaluation and accountability activities, including the provision of supporting documentation when requested, that demonstrate progress toward contracted results. (See definition in Section VI.)
- Able to enter into a contract with Thurston County government. (See Exhibit D.)

IV. PROPOSALS WILL BE RANKED BASED ON THE FOLLOWING CRITERIA:

1. Linkage with one or more TST Policy Goals and Thurston Thrives strategy map goal areas. (See Section II.)
2. By using evidence-based or promising practices, ability to produce measurable outcomes (to be included on the logic model in Exhibit B) that significantly contribute to those goal areas by July 31, 2018.
3. Ability to collect, record, query, and report on all data related to service delivery and performance measurement, while ensuring data reporting timeliness, completeness, validity, and reliability.
4. Ability to leverage resources through collaboration with other community providers and/or expand types of services available in the community.
5. Ability to sustain basic levels of service after the conclusion of the grant period.

Note: At least \$75,000 is intended to fund programs that have not been awarded a TST Community Grant previously. In addition, preference will be given to programs serving youth and young adults (up to age 25).

V. USE OF TST FUNDING

Provided the proposal meets the requirements of RCW 82.14.460, Treatment Sales Tax funds **may** be used for the following:

- Educational materials including: curriculum, software, video and print materials.
- Costs associated with the development, printing and distribution of materials.
- Costs associated with hosting training, workshops or special events connected directly to the service and population being served.
- Costs associated with the purchase of professional expertise and technical assistance.
- Screening, case management and treatment for substance abuse and/or mental health issues.
- Material or items that remove barriers to participating in the service or that meet the unique needs of participants.
- Personnel, training, and travel or other directly connected costs that are not excluded below.

Treatment Sales Tax funds **may not** be used toward any of the following:

- Prevention activities.
- Lobbying.
- Equipment.
- The purchase of staff time, supplies, materials, or anything else that is not directly associated with the service or program described in the proposal.

VI. DEFINITIONS

The following definitions relate to key terms in this RFP.

Behavioral health

The prevention, treatment of, and recovery from chemical dependency, mental health and/or problem and pathological gambling disorders. (See WAC [388-877-0200](#).) **NOTE: TST does not fund prevention.**

Clinical Supervision

Regular and periodic activities performed by an appropriate level of professional for clinical staff. Clinical supervision includes review of assessment, diagnostic formulation, treatment planning, progress toward completion of care, identification of barriers to care, continuation of services, authorization of care, and the direct observation of the delivery of clinical care. (See WAC [388-877-0200](#).)

Clinical Supervisor

A licensed mental health or chemical dependency professional who: (1) has documented competency in clinical supervision; (2) is responsible for monitoring the continued competency of each licensed mental health or chemical dependency treatment provider (respectively) in assessment, treatment, continuing care, transfer, and discharge, where monitoring includes a semi-annual review of a sample of the clinical records kept by the CDP; (3) has not committed, permitted, aided or abetted the commission of an illegal act or unprofessional conduct as defined under RCW 18.130.180; and (4) has access to consultation with one of the following professionals who has at least one year's experience in the direct treatment of individuals who

have a mental or emotional disorder: a psychiatrist, a physician, or an advanced registered nurse practitioner (ARNP) who has prescriptive authority. (See WAC [388-865-150](#), [388-877A](#), and [388-877B](#).)

Early Intervention

A service or program that occurs early, when initial signs of a problem behavior or issue of concern are detected.

Evaluation and Accountability

Programs or services implemented under the Treatment Sales Tax ordinance are monitored by Treatment Sales Tax Program staff.

- TST grantees will have an evaluation plan with performance measures developed for each funded proposal. This plan is developed in partnership with TST program staff. The emphasis will be on capturing data at regular intervals that can be used to determine whether TST funding met expectations. Evaluation efforts focus on standardized data collection and reporting processes to produce the following types of information:
 - Quantity of services (outputs, inputs)
 - Level of change occurring among participants (outcomes)
 - Return-on-investment (system savings)
 - Adherence to the model (fidelity)

Evidence-Based

Programs, services, strategies, activities, or approaches which have been shown through scientific research and evaluation to be effective at preventing and/or delaying an untoward outcome.

Promising Practice

Programs, services, strategies, activities, or approaches that have some scientific research or data showing positive outcomes in delaying an untoward outcome, but do not have enough evidence to support generalizable conclusions.

Short-Term Outcome

Precursors to behavior that have been shown to connect to the ultimate behavior that is desired. For this RFP, each proposal must identify at least one of the following types of outcomes and demonstrate change by July 31, 2018:

- Positive change in the attitude, knowledge, skills, or perceptions of those served.
- Positive change in the behavior or indicators of intent to behave differently among those served.

Treatment Fidelity

The strategies that monitor and enhance the accuracy and consistency of an intervention to ensure it is implemented as designed and that each component is delivered in a comparable manner to all study participants over time.

VII. ELIGIBLE APPLICANTS

Entities eligible for TST funding are: 1) private non-profit organizations meeting the statutory requirements under the IRS 501(C)(3) designation; 2) public non-profit organizations; and 3) Indian Tribes located within Thurston County.

All applicants must have established, appropriate financial internal controls and accounting procedures to ensure proper disbursement and accounting of funds provided. Applicants failing to meet these requirements will be ineligible for funding. (See Exhibit D.)

Applicants must have, or be willing to secure, general and professional liability insurance with coverage for the activities of this grant with minimum occurrence and aggregate limits, as stated in Exhibit D. Applicants must provide evidence of coverage acceptable to the Thurston County Risk Management Division prior to receiving grant funds.

VIII. INSTRUCTIONS

Questions regarding this RFP should be addressed to Carrie Hennen, Treatment Sales Tax Program Manager at: (360) 867-2092 or hennenc@co.thurston.wa.us.

A. PROPOSAL FORMAT

1. Typed, using the TST application format, answering all questions concisely and completely.
2. Single-spaced, minimum 12-point font, right and left margins no less than 0.75 inches
3. Contents cannot exceed page limits. (See below.)
4. No materials or attachments other than those requested.
5. No more than 2 proposals per eligible organization will be considered.
6. Proposals are due to be emailed by the deadline: **Tuesday, May 16, 2017, 5:00 PM to hennenc@co.thurston.wa.us**.

If any of the items listed below are missing or incomplete, the application will be ineligible for consideration. Late applications cannot be considered.

B. Submit fully completed proposal that includes all of the following:

- Cover Letter (no more than one page).
- Application (no more than six pages) – EXHIBIT A.
- Logic Model (no more than one page) – EXHIBIT B.
- Budget Sheet (no more than two pages) – EXHIBIT C.
- Certification Form (two pages) – EXHIBIT D.
- Current Board of Directors Roster (or equivalent).
- Memorandum of Understanding/Agreement – if more than one organization is submitting a proposal together. Thurston County will only contract with one entity.

APPLICATION
Thurston County Treatment Sales Tax (TST)
2017 Request for Proposals

Provide a response to all of the following.

Basic Information

Note: Basic Information must all be on one page.

1. Name of service or program:
2. Amount of money requested from TST:
3. Anticipated service period (from when, to when):
4. Treatment Sales Tax/Thurston Thrives Goal Area(s):
5. Name of applicant organization:
6. Organization address:
7. Organization representative contact information (including telephone and email):
8. History of the organization's TST Community Grant awards, including the number of times awarded grant funds, grant amounts, grant periods, and for what programs:

Proposal Description

Note: Questions 1-14 must be answered in five pages total or less.

Linkage with one or more TST Policy Goals and Thurston Thrives strategy map goal areas. (See Section II.)

1. To which TST Policy Goals and Thurston Thrives strategy map goal area(s) does your service link, and, based on your logic model in Exhibit B, how will providing your service significantly contribute to those goals?
2. What is the population you intend to serve, and what is that population's unmet need or gap in services you propose to address with the TST Community Grant funding?
3. How will you clinically determine whether an individual has a mental health or chemical dependency disorder and whether the person is receiving treatment prior to providing services that are components of a coordinated treatment plan for that person?

By using evidence-based or promising practices, ability to produce measurable outcomes (to be included on the logic model in Exhibit B) that significantly contribute to those goal areas by July 31, 2018.

4. What evidence-based or promising practice(s) will you use to serve your target population? Please describe the practice(s) briefly and provide one or more links to online documents or web pages that detail the following information:
 - a. Practice's target population demographics: age, sex/gender identity, race/ethnicity, geographic location (e.g., urban, suburban, rural), and disorder type (i.e., mental health, chemical dependency, or both);
 - b. Practice's demonstrated, measurable outcomes; and
 - c. Research support for the practice.
5. If you will provide treatment services, how will you ensure appropriate clinical supervision with treatment fidelity documentation?
6. How many people in Thurston County are in need of the service(s) you propose to fund with the TST grant, and what method are you using to estimate that number?
7. Of those in Thurston County who need the service(s), how many will you serve between August 1, 2017 and July 31, 2018?
8. What are the risks that your organization will not be able to serve that number of individuals during the contract period? Please list and describe the main risks, note whether each risk's potential impact is low, medium or high, and note whether each risk's likelihood is low, medium or high.

Ability to collect, record, query, and report on all data related to service delivery and performance measurement, while ensuring data reporting timeliness, completeness, validity, and reliability.

9. What are your data sources and collection methods for your proposed performance measures in Exhibit B, and how will you ensure that the data you report to the TST program will be timely, complete, valid, and reliable?

Ability to leverage resources through collaboration with other community providers and/or expand types of services available in the community.

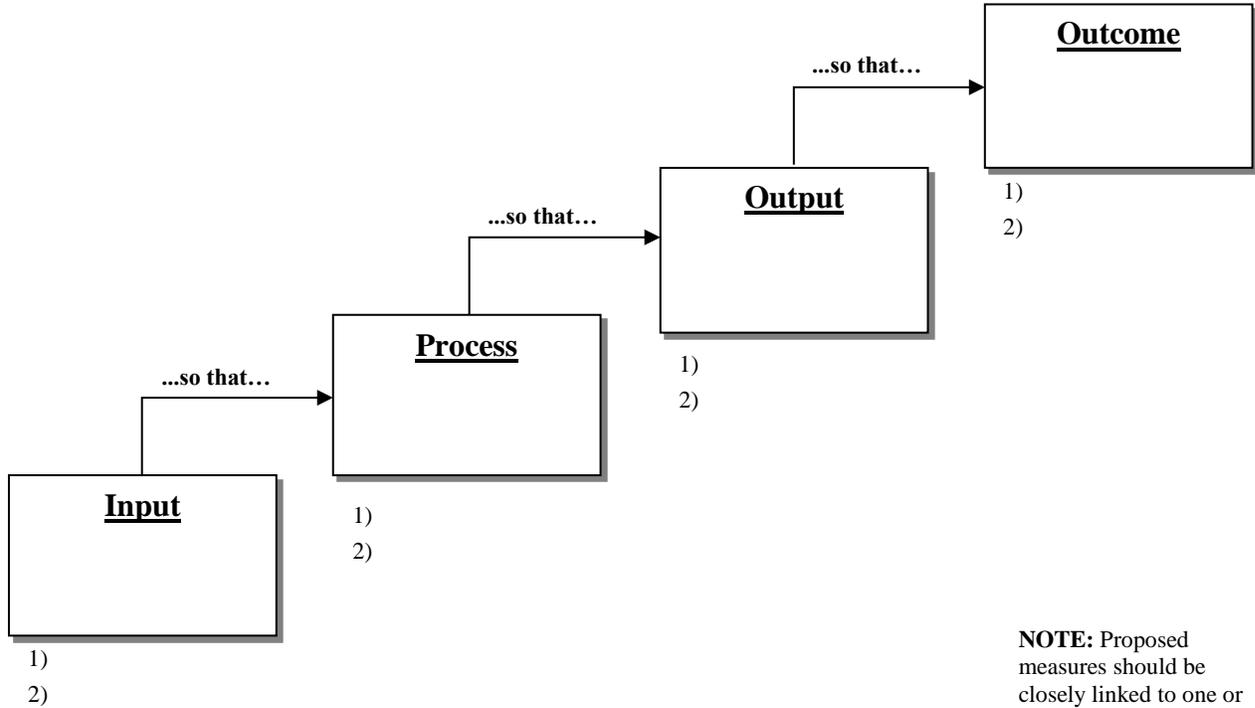
10. With which other community providers are you currently collaborating, and what resources are you leveraging through those relationships?
11. In relationship to other programs of which you are aware in the community, is your program innovative (employing new methods or approaches not currently available in Thurston County)? If yes, please describe.

Ability to sustain basic levels of service after the conclusion of the grant period.

12. What is the general purpose of your organization? Briefly describe what other services your organization currently offers in the community.
13. If your organization does not receive the TST grant, then what level of service will you be able to provide to the target population?
14. What is your organization's plan to secure other funding for this service after the TST grant concludes?

Logic Model
Thurston County Treatment Sales Tax (TST) Program
2017 Request for Proposals

Name of Program or Service



NOTE: Proposed measures should be closely linked to one or more of the four goal areas from TST Policy Goals / Thurston Thrives. (See Section II.)

Example Logic Model and Performance Measures

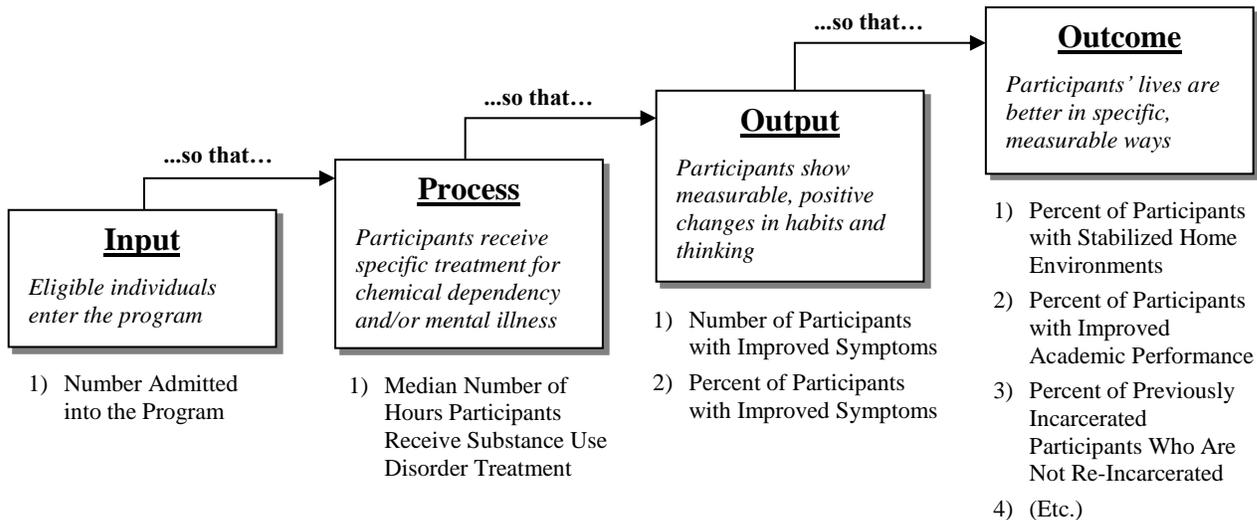


EXHIBIT C

Budget Sheet
Thurston County Treatment Sales Tax (TST) Program
2017 Request for Proposals

No more than a 2-page budget, 1-page preferred, if possible. Cover only the August 1, 2017 – July 31, 2018 time period (or the time period for which you have requested funding).

PERSONNEL COSTS	REQUESTED FROM TREATMENT SALES TAX	OTHER FUNDING SOURCE	TOTAL BUDGET
Salaries	\$	\$	\$
Benefits	\$	\$	\$
OPERATING COSTS			
Supplies/Materials	\$	\$	\$
Postage/Mailing	\$	\$	\$
Copying/Printing	\$	\$	\$
Travel	\$	\$	\$
(If Other – Please Describe)	\$	\$	\$
OTHER COSTS			
Training/Workshops	\$	\$	\$
Space/Rental	\$	\$	\$
(If Other – Please Describe)	\$	\$	\$
(If Other – Please Describe)	\$	\$	\$
TOTAL COST	\$	\$	\$

Note: Refer to Section V for use of funding and exclusions. Indirect or administrative costs are allowed. In-kind contributions/match are not required, however the TST Program is interested in total cost to provide the service or program being proposed.

Certification Form
Thurston County Treatment Sales Tax (TST) Program
2017 Request for Proposals

NAME OF AGENCY/ORGANIZATION: _____

ADDRESS: _____

CONTACT PERSON: _____ PHONE NUMBER: _____

I HEREBY CERTIFY ON BEHALF OF _____

(APPLICANT AGENCY)

THAT:

1. The organization has attached the documents as specified in the TST Request for Proposals.
2. The applicant understands that the Treatment Sales Tax Program Manager will advise the Thurston County Board of Commissioners, and that they will conduct public discussions concerning the recommendations and make the final decision.
3. If the proposal for funding is approved, then it becomes a part of a service contract with Thurston County and will be paid on a reimbursement basis. The contracts will include non-discrimination language pertaining to employment, service delivery and agency operations.
4. The applicant, if he/she is a licensed professional, shall maintain Professional Legal Liability or Professional Errors and Omissions coverage appropriate to the applicant's profession and shall be written subject to limits of not less than \$2,000,000 per loss.

The applicant has or will obtain General Liability insurance of not less than \$2,000,000 per occurrence for all covered losses and the general aggregate limit shall apply separately to this contract and be no less than \$3,000,000. Thurston County, including their officials and employees, will be named as additional insured on the policy. A certificate of insurance shall be provided as evidence of coverage to the Thurston County within one (1) week after execution of the TST contract.

The applicant shall also provide evidence that Workers Compensation coverage is in place for their employees where such coverage is required by RCW Title 51.

5. The applicant has accounting and record keeping systems which a) show the purposes for which the funds have been spent; b) will be open for inspection by the county or its agents; c) will be maintained for at least three years following the end of the contract.
6. The individual signing the original certification sheet and application for funding is the Chairperson of the Board of Directors, or the Board of Directors' designee, and can legally sign contracts for the organization, binding the organization to the contract.
7. A HIPAA Business Associate Agreement or contract addendum is required if this agreement with the applicant/(contractor) will perform certain functions or activities that involve the use or disclosure of protected health information on behalf of, or provides services to, a covered

entity. A covered health care provider, health plan, or health care clearinghouse can be a business associate of another covered entity.

Name: _____ Title: _____

Signature: _____ Date: _____