State of Alaska
Department of Health and Social Services
Division of Behavioral Health

Request for Proposals
Comprehensive Behavioral Health Prevention and Early Intervention Services
For FY2024 Through FY2026

Grants and Contracts

NOTICE: Proposals will ONLY be accepted through GEMS. Applicants are responsible for reviewing the GEMS homepage at https://gems.dhss.alaska.gov/ for details regarding agency registration and availability of technical assistance. Log into GEMS through myAlaska, https://my.alaska.gov/Welcome.aspx, to begin the application process. Once you are logged into GEMS, guidance and instruction are available in the Documents tab and from the film strip icon. Applicants are responsible for monitoring GEMS or the State Online Public Notices site for any changes or amendments that may be issued regarding this solicitation.

Relay Alaska provides assisted communication services at 711 or 1-800-770-8973 from a TTY phone, and at 1-800-770-8255 from a voice phone.

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PROPOSAL DUE DATE: April 11, 2023, 3:59 PM
DEADLINE FOR WRITTEN INQUIRIES: April 3, 2023, 3:59 PM
PROJECT PERIOD BEGINS: July 1, 2023

Table of Contents

Section 1 Grant Program Information

1.01 Introduction and Program Description

1.02 Program Goals and Anticipated Outcomes

1.03 Program Services/Activities

1.04 Program Evaluation Requirements and Reporting

1.05 Target Population and Service Area

1.06 Program Funding

Section 2 Applicant Qualifications

2.01 Agency Experience

2.02 Project Staffing

2.03 Administrative, Management, and Facility Requirements

2.04 Support/Coordination of Services

Section 3 General Instructions for Proposal Submission

3.01 Eligibility

3.02 Acceptance of Terms

3.03 Inquiries

3.04 Proposal Costs and Content

3.05 Duration

3.06 Proposal Review

3.07 Final Decision Authority

3.08 Notification of Grant Award and Appeals

3.09 Cancellation of the RFP/Termination of Award

Section 4 Submission Requirements/Evaluation Criteria

4.01 Minimum Responsiveness Criterion per 78.100(2)(A)

4.02 Other Technical Requirements per 7 AAC 78.060, 78.090(b) and 78.100

4.03 History of Compliance with Grant Requirements per 7 AAC 78.100(2)(B)

4.04 Questions and Criteria Related to Program Policy, Goals, Outcomes, and Activities

4.05 Applicant Qualifications - Criteria Relating to Personnel, Management, and Facilities

4.06 Demonstration of Support/Coordination of Service

Application Groups

Application Group Name	Description
Group B- Program Implementation	For applicants who have significant experience implementing a Strategic Prevention Framework (SPF) recommended strategic plan, a designated intended population, and intend to expand or enhance current efforts.
Group C- Statewide Alcohol Prevention Alliance	For applicants seeking to manage and support the statewide Alcohol Misuse Alliance.
Group A- Build Capacity	For applicants that are proposing to serve a community that does not currently have a comprehensive wellness coalition in place and have never completed the Strategic Prevention Framework (SPF) or comparable process to assess the community needs to address another initiative such as tobacco, opioids, or violence prevention.

Amendments

Amendment 1 Written Responses to Inquiries and Due Date Extension **Posted: 3/21/2023**

Explanation

This amendment serves to provide answers to written inquiries and extend the solicitation due date. Please see the attached titled "Amendment 1 Written Responses to Inquiries and Due Date Extension."

Additional Information

Amendment #1 serves to provide written responses to inquiries and to extend the due date.

Amendment 2 Written Responses to Inquiries **Posted: 3/31/2023**

Explanation

This amendment serves to provide answers to written inquiries. Please see the attachment titled, "Amendment 2 Written Responses to Inquiries."

Additional Information

Amendment #2, issued on 03/31/23 serves to provide answers to written inquiries.

Amendment 3 Written Responses to Inquiries **Posted: 4/4/2023**

Explanation

The amendment serves to provide answers to written inquiries. Please see the attachment titled "Amendment 3 Written Responses to Inquiries."

Additional Information

Amendment #3, issued 4/4/23 serves to provide answers to written inquiries.

Section 1 Grant Program Information

1.01 Introduction and Program Description

The Department of Health (DOH or Department), Division of Behavioral Health (DBH), is requesting proposals from eligible applicants to provide Comprehensive Behavioral Health Prevention and Early Intervention (CBHPEI) services for the State of Alaska in FY2024 through FY2026. Program Services are authorized under 7 AAC 78 Grant Programs. Additional governing statutes are 7AAC 78 - Grant Programs. AS 47.37.030 Uniform Alcoholism and Intoxication Treatment Act and AS 47.30.470-500 Alcoholism and Drug Abuse. State of Alaska statutes and regulations are accessible at the Department of Law Document Library or through the contact person identified on the cover page of this Request for Proposals (RFP).

DBH supports a range of behavioral health services spanning from acute level psychiatric care and substance use disorder treatment to early intervention and prevention services. In this Request for Proposals (RFP) the DBH Prevention and Early Intervention section is seeking applicants to lead community coalitions across Alaska to implement upstream approaches to promote wellness across the lifespan. Applicants shall coordinate collaborative partnerships with local regional and statewide stakeholders sharing the common interest in reducing the negative impacts of substance misuse, suicide, and mental health challenges. Applicants should demonstrate the intent and ability to coordinate partnerships across all levels of the service continuum and levels of care including with individuals, agencies, initiatives, and stakeholders working with similar efforts such as public health, education, and public safety with common interests to promote systematic and environmental change to reduce the burden associated with behavioral health challenges as highlighted in Healthy Alaska 2030.

To achieve this, applicants to this RFP must demonstrate that prevention efforts will be coalition lead with stakeholders representing the diversity of the community or service area, and that strategies and programs are chosen through a data driven process. Applicants will be required to engage in the evidence-based Strategic Prevention Framework (SPF) process throughout the grant period (see **Attachment 1- FY24-Prevention_Resource_Guide, pg. 20**). Applicants will assess and monitor behavioral health conditions by reviewing and when necessary, gathering population data and information for the proposed service area in order to provide an overview of the community or service area and characteristics (both positive and negative) that could be influencing behavioral health conditions. Special attention must be paid to the environment, or context, in which problems develop. These contexts should include but are not limited to:

1. Availability of alcohol and/or drugs and access to relevant behavioral health treatment services,
2. Access to health care and provider Screening Brief Intervention and Referral to Treatment (SBIRT), and efficiency of existing community social service systems,
3. Social and economic conditions including access to affordable housing and employment,
4. Community and regional prevention capacity or initiatives including other related health or wellness efforts such as tobacco and opioid task groups or access to after-school programs or subsistence activities,
5. Community or organization policies, and/or
6. Cultural norms and conditions surrounding substance misuse, mental health and suicide such as historical trauma and colonialism.

All applicants shall be engaged in a comprehensive approach to wellness within the community(s) served. Wellness coalitions should reach out to, and partner with all relevant prevention and wellness task groups, coalitions, and initiatives that align with the core intent of this RFP. Applicants are also expected to collaborate with relevant statewide initiatives that align with the overall goals and objectives of improving the health and wellness of Alaskans.

As part of this collaborative approach, all applicants are expected to participate as support partners in statewide coalitions and collaboratives as opportunities occur. In addition to the existing Alaska Wellness Coalition (AWC), the Share Risk and Protective Factors Workgroup (SRPFW) and the Alaska Alcohol Misuse Alliance (Alliance), applicants will also be expected to participate and support the work of the Alaska Suicide Prevention Coalition.

Suicide is a complex public health issue that impacts all Alaskans, regardless of age, culture, race, region, or socio-economic background. According to 2021 CDC data, suicide rates have been rising in Alaska where we have rates at more than twice the national average. Factors that contribute to this vary significantly due to our diverse geography, culture, and social and economic factors. Infrastructure to lead suicide prevention efforts at the regional and community level will support strategies that are developed based on these regional and community level needs. This includes promoting health and wellness opportunities at the statewide level, reducing risk factors, promoting protective factors, and addressing health and economic inequities.

All applicants will be expected to support a Regional Suicide Prevention Coalition (RSPC). Applicants may also elect to be the lead regional coalition. These applicants will coordinate with new or existing suicide community task groups, coalitions, or committees within the region. Through this RFP, DBH will seek up to seven (7) Regional Suicide Prevention Coordinators to support region specific suicide prevention. Lead applicants will have the opportunity to apply for funding to support this regional suicide prevention infrastructure and will act as regional chairs on a statewide coalition, the Alaska Suicide Prevention Coalition (ASPC). Only one agency in each region will be selected as lead agency for the ASPC. The seven regions are identified as Northern, Interior (includes Fairbanks), Southeast (includes Juneau), Mat-Su, Anchorage, Southwest, and Western (see 1.02 and 1.06 below). Both Anchorage and the Statewide Youth coalitions are not eligible for this additional funding.

Please review the three application groups (A, B and C) listed below carefully. Responding to the incorrect group may result in not being funded. It is the applicant's responsibility to submit a proposal to the correct group as described below.

Group A- Build Capacity: For applicants that are proposing to serve a community that does not currently have a comprehensive wellness coalition in place and have never completed the Strategic Prevention Framework (SPF) or comparable process to assess the community needs to address another initiative such as tobacco, opioids, or violence prevention. Indicate in the proposal which of the following describes your application:

- A community new to the SPF process with no current or previous prevention capacity. The community may have had active prevention and wellness initiatives in the past, but the participants and knowledge of these efforts is no longer available to the community; or
- A small community new to the SPF process seeking to apply with support from a regional or statewide agency with SPF experience. The supporting agency may have prevention and wellness capacity that will be shared to support a community that does not have this current knowledge capacity.

Group B- Program Implementation: For applicants that can demonstrate they have completed the five steps of the SPF process, have significant experience implementing a SPF recommended strategic plan, a designated intended population, and intend to expand or enhance current efforts during FY2024. Applicants shall either represent a geographic community, sub-region, or region or may elect to represent the statewide community of Alaskan youth (youth are defined as under 18 years of age, only one applicant will be selected for this statewide coalition grant). All Group B applicants will be required to indicate if they are applying to either lead or just support the development of a Regional Suicide Prevention Coalition (see 1.06).

Group C- Statewide Alcohol Prevention Alliance: For applicants seeking to manage and support the statewide Alcohol Misuse Alliance. This funding shall support an agency or entities seeking to maintain the member directed

wellness initiative established during the FY2020-2023 fiscal years. The intent of this initiative was to initiate a statewide coalition much like the Alaska Tobacco Control Alliance which formed to address the morbidity and mortality associated with use and exposure to nicotine related toxins. The primary goal of this initiative shall continue to be to reduce the morbidity and mortality associated with alcohol misuse in Alaska. The primary strategy to accomplish this goal should be to update and operationalize a statewide Strategic Planning Framework plan to reduce underage drinking and adult heavy and binge drinking. Directive guidance should build from the guiding frameworks established during the past four funding cycles of the Alliance from FY2020 through FY2023. The primary influences for all CBHPEI funding work includes the Strategic Planning Framework (SPF). Other influences for the Alliance have included the Collective Impact Framework, the Cynefin Framework, Upstream Prevention Framework, Systems Change Framework, and Emergent Strategies Framework. Applicants should follow the Alliance publication "Emergent Strategies: Laying a Strong Foundation for Change" (see **Attachment 3-Emergent-Strategies-FINAL**). Following the SPF process, the application of a collective change model and transformative justice should drive a collaborative and inclusive approach to change that invites all relevant partners impacted by the negative effects of alcohol misuse and intentionally involves stakeholder groups with the highest disparity in alcohol related morbidity and mortality.

Alaska has one of the highest per capita alcohol related mortality rates (21.2 per 100,000 compared to 9.1 nationally), and high per capita cost associated with excessive alcohol consumption (over $1.8 billion annually) with particular disparities in rural Alaska and the Alaska Native population. During FY20-FY23 significant progress has been made to establish a working Alliance of partners and individual members. Included has been the establishment of an organizational structure, an evaluation plan, a membership orientation process, and an established communication plan. Each component is member lead and directed through six established workgroups and at least seven identified regional chairs. During the initial four years of the grant, the Alliance has also obtained significant support through contractual partners as well including Sultana Group, University of Alaska Anchorage, Circle Forward, and Walsh-Sheppard. For FY24, the successful grantee will continue to work with Alliance member partners and continue to engage with the current active stakeholders and workgroups to maintain the member directed organizational structure of the Alliance and continue to seek new members to maintain and enhance the statewide Alcohol Misuse Prevention Alliance to address underage drinking and adult binge and heavy drinking; continue to support the revision of the 2011 State of Alaska needs assessment "Moving Prevention Upstream" strategic plan (see **Attachment 2- Moving Prevention Upstream**); and maintain and enhance a strategic plan to apply the SPF process to review, update, and carry forward this prevention and wellness efforts. This FY2024 strategic plan should review and continue to incorporate the recommendations from "Moving Prevention Upstream", include the support and enhancement of existing partner initiated upstream alcohol misuse best-practice and promising practice strategies and should include at least the following core components:

- Community-based interventions, working with community and regional wellness coalitions;
- Statewide interventions;
- Mass-reach health communication such as media campaigns;
- Surveillance and evaluation; and/or
- Infrastructure, administration, and management.

1.02 Program Goals and Anticipated Outcomes

Group A, B, & C

The proposed project must demonstrate a thorough understanding and support of the grant program goals and outcomes as described below. Projects must meet or exceed anticipated minimum outcomes described in this RFP.

The overall goals of the DBH Prevention and Early Intervention program are to support a statewide effort to

promote protective factors that increase physical and behavioral health wellness and reduce risk factors that contribute to substance use, suicide, and poor mental health. To achieve these goals, DBH will empower coalition-lead efforts across Alaska that promote improved population-level behavioral health as measured by Healthy Alaskans 2030 objectives 13,14,17,18,22,23,24 and 25 and the Statewide Suicide Prevention Plan.

Applicants will be expected to be familiar with the other relevant Behavioral Health objectives such as those found in the Statewide Suicide Prevention Plan and others as they relate to shared risk and protective factor theory and may include these as well as long-term outcomes that impact individual and community wellness (see **Attachment 1-FY24-Prevention_Resource_Guide, pg. 6**).

All applicants are required to incorporate the following six priority components:

1. Successful application of the full SPF: The success of behavioral health prevention strategies depends largely on a coalition's fidelity to the five steps of the SPF, which are Assessment, Capacity Building, Planning, Implementation, and Evaluation (see **Attachment 1- FY24-Prevention_Resource_Guide, pg. 20**). Coalition led grantees will engage the five SPF steps to address behavioral health outcomes in substance misuse prevention, suicide prevention, and comprehensive wellness. All applicants will continually engage all five SPF steps throughout the grant period and will monitor progress using a Fidelity Checklist (see **Attachment 9- Strategic Planning Framework Fidelity Checklist Guides**).

2. Comprehensive Wellness Coalition Lead: It is the intent of this RFP to support behavioral health prevention efforts led by comprehensive wellness coalitions that utilize a shared risk and protective factor approach to prevention efforts (see **Attachment 5**- **Shared Factors for Adolescents More Matters**). Due to the complexity of behavioral health issues, a shared risk and protective factor approach allows partnerships with existing prevention and wellness efforts to have greater reach across multiple areas of concern. Partnerships creates opportunities to leverage resources, improves sustainability through creative collaboration, and reduces the potential for multiple redundant and independently operating coalitions. Applicants will be able to document these active partnerships with potential stakeholders at each step of the SPF process and include relevant work across initiatives that contributes to shared wellness objectives. Grantees shall also commit to participation in regional efforts and maintain active involvement with the statewide efforts such as the Alaska Wellness Coalition (AWC), Alcohol Misuse Prevention Alliance (Alliance), and the Shared Risk and Protective Factor Workgroup (SRPFW).

3. Cultural Responsiveness: In order for behavioral health prevention efforts to be successful, cultural responsiveness must be central to all efforts. Effective cultural responsiveness addresses the culture and needs of the community where prevention efforts are taking place, which can include but are not limited to, the diversity of coalition members, education and activities centered on the community's traditional and cultural values, and communication that includes the community's traditional languages and the people of the community. Cultural responsiveness should be highlighted within each step of the SPF, and each grantee will be expected to identify and implement culturally responsive strategies which must be clearly identified in the strategic plan.

4. Inclusion of Healthy Alaskans 2030, Shared Risk, and Protective Factor objectives: The desired outcome of this grant program is to improve the overall health of Alaskans as measured by Healthy Alaskans 2030 indicators. All applicants should link the work of the coalition to the relevant objectives from Healthy Alaskans 2030 as long-term outcomes. DBH recognizes that behavioral health problems are best addressed through a shared risk and protective factor approach, with the knowledge that many problems can be caused by the same factor and one intervention may address multiple problems. DBH also recognizes the underlying influences of Adverse Child Experiences (ACEs; ACEs Website) to behavioral health problems. Applicants engaging alternative strategies such as historical trauma, adverse effects of colonialism, and bullying and other forms of violence, should include the relevant behavioral health indicators in their strategic plan and proposals.

5. Sustainability: A focus on sustainability will support grantees in maintaining prevention efforts post grant period. All applicants must incorporate sustainability into each step of the SPF and each grantee will be required to develop and maintain a sustainability plan throughout the funding cycle including but not limited to partnerships with similar local, regional, and statewide wellness initiatives, inclusion of systemic changes such as environmental and policy initiatives and establishing wellness as a foundational component in the community service system. To enhance resources and reduce redundant capacity, all applicants are expected to coordinate with related task groups, coalitions, and workgroups engaging similar prevention and wellness related. (see **Attachment 12- CBHPEI Sustainability and Outcome Guide 2023**).

6. Participate in Statewide and Regional Suicide Prevention: These efforts support regional capacity and expertise to the Statewide Alaska Suicide Prevention Coalition, and Suicide Prevention Council. The intent of the coalition is to promote early intervention, prevention and postvention supports to reduce suicide attempts and deaths through collaborative efforts that reduce suicide risk and build resiliency to stress and trauma through investments in upstream prevention and wellness promotion. These regional coalitions both apply resources and knowledge provided by the Statewide coalition and Council but also serve to inform these bodies on regional and local wellness efforts that contribute to suicide prevention. (see 1.06 below).

1.03 Program Services/Activities

Applicant proposals must describe the ways in which the project aligns with the program goals, to promote protective factors that increase comprehensive wellness and reduce risk factors that contribute to substance misuse, suicide, and/or poor mental health. The submitted project proposal must also identify agency and partner resources available to the project, describe related activities, and include a project timeline identifying the initiation and completion of key milestones.

Successful applicants will be expected to:

1. Participate in the statewide Alaska Wellness Coalition, Alliance, and SRPFW Regional and State Suicide Prevention Coalitions, quarterly Suicide Prevention Council Meetings, and Suicide Prevention Community of Practice.
2. Participate in all DBH sponsored training including but not limited to monthly TA calls, quarterly webinars, and an annual grantee training conference.

All applicants must indicate the willingness to complete the following core activities in the proposal:

1. Conduct baseline and at least biennial (once every two years) community readiness assessments;
2. Conduct baseline and at least biennial "Coalition Capacity" surveys;
3. Conduct a comprehensive behavioral health assessment for the community or service area with annual updates;
4. Provide annual updates to the strategic plan, logic model, and timeline;
5. Provide quarterly updates to MIS Dashboard and evaluation plan;
6. Provide annual updates to the Outcomes and Sustainability Plan;
7. Provide evidence of active comprehensive wellness coalition, including a coalition member list and quarterly coalition activity reports; and
8. Provide inclusion and progress toward at least one long-term policy initiative included in the wellness priorities of the community.

Group A (Build Capacity)

During the response period to this RFP, applicants must engage in a three-phase process as summarized below to prepare for submitting their proposal to this RFP:

1. Preparatory Phase: During the preparatory phase, applicants will reach out to community members and other existing coalitions who are invested in improving the behavioral health conditions of the community. During this time, applicants should initiate a pre-assessment process by building their coalition and gathering data related to the needs, resources and readiness of their community, to explore the overall behavioral health needs in their community.
2. Engagement Phase: Coalitions must meet at least once during the engagement phase. Meetings should be used to examine the collected data, discuss what was learned through the data collection process to assess the overall behavioral health needs in their community, and to assess the current community readiness to support a new or continued prevention coalition-based initiative. The coalition will use the data to choose priority areas and strategies to conduct a full community readiness and community needs assessment to be completed in FY24.
3. Writing Phase: During this phase, applicants will complete and compile findings from the preliminary community assessment. This is the applicant's opportunity to demonstrate the activity of the coalition and report on the steps that have been accomplished or are expected to be accomplished in the future, if grant funding is awarded. Applicants should propose a strategic plan for completing the first three steps of the SPF process (see **Attachment 1- FY24-Prevention_Resource_Guide pg. 20**).

Group A applicants should not propose implementing a program strategy or community-based service with this grant prior to award, and completion of SPF steps 1-3 and a formal approval from a DBH prevention program manager.

Group B (Program Implementation)

Group B applicants must have well established experience and success in leading behavioral health prevention and wellness initiative. All applicants in this group must include the following in their proposal:

1. A clear summary of the most recent comprehensive community needs assessment including key recommendations, outcomes from those recommendations, and an analysis of next steps including any efforts or proposed efforts to update the assessment from the past two to three years (completed no later than July 2024).
2. A sustainability summary (see **Attachment 12- CBHPEI Sustainability and Outcome Guide 2023**).
3. A description of how the SPF steps 1-5 were applied toward identifying at least one best practice strategy, or, a clear explanation and justification for an alternative to using a best practice strategy and why it was the best choice for the proposed implementation, service area, and intended population.
4. A detailed description of how the SPF steps will be used during the future progress of the proposed initiative.
5. A detailed narrative summary describing how the goals and long-term objectives identified during the SPF process were addressed, and how these are linked to the Healthy Alaskans 2030 indicators.
6. A completed and detailed MIS Dashboard (see **Attachments 6 and 7- CBHPEI MIS Template & Dashboard Development Instructions**).
7. A detailed narrative summarizing the successes and challenges in meeting the intended outcomes as previously intended through the SPF process including a completed SPF Fidelity Checklist (see **Attachment 9- Strategic Planning Framework Fidelity Checklist Guides**).
8. A detailed plan outlining the proposed process to implement any significant revisions from your previous strategic plan.
9. An outline of enhancements that will be made to continue success in the chosen outcome area(s).
10. A detailed timeline that includes intended events, coalition meetings and community training events.

11. A detailed logic model that identifies both grant and other grants and partner shared resources available towards community wellness initiatives. The logic model should also highlight the shared activities that support multiple objectives in the community (shared protective factors) and clearly state the anticipated goals, outputs, and outcomes compliant with program intent described above (see **Attachment 8- CBHPEI Program Evaluation Instructions and Template Guide**).
12. A completed coalition member roster highlighting core or active coalition members and the number of completed "Coalition Capacity" surveys completed by active members (see **Attachment 4- Coalition Capacity Survey**).
13. A description of your role as either a lead agency in establishing a regional suicide prevention coalition or as a supporting agency that will participate in the coalition (see 2.02).

All applicants seeking additional funding to lead a Regional Suicide Coalition should include current or proposed coordination with other regional partners who will support your work as the lead regional representative. These applicants should describe how these details will be accomplished including if and how a position will be filled including, a position description, proposed FTE for this position, and a plan outlining the community resources and expected time commitment for establishing the position and the regional coalition. The Regional Suicide Prevention Coordinator can be filled though an existing position, a sub-contract to an organization who may be engaged and/or qualified to lead the Regional Suicide Prevention Coalition, or an alternative proposal that meets the program requirements (see 2.02 and National Action Alliance for Suicide Prevention-Transforming Communities).

Group C (Statewide Alcohol Prevention Alliance)

For this RFP, Group C applicants will describe how the following three phase strategic planning process will be completed by June 2024.

1. Strategic Planning Five-Year Plan: During this planning phase, applicants will reach out to active Alliance stakeholders including members, contractors, regional chairs and partner agency participants who are currently or were previously involved in the Alliance efforts to reduce alcohol misuse prevention including underage drinking, adult binge drinking, and adult heavy drinking (see **Attachment 11- Alliance member list; 3- Emergent-Strategies-FINAL**). During this process, the applicant will review existing strategic plans working toward achieving the goal of reducing morbidity and mortality associated with alcohol misuse in Alaska using the five-step SPF process.

2. Engage Core alliance Workgroups and Partner Initiatives: The applicant should hold coordinated planning meetings with Alliance workgroups to review existing strategies and initiatives that are currently in place along with the existing National best practices and promising practices and the statewide data on alcohol use (Health Impacts of Alcohol Misuse in Alaska; Consumption and Consequence). Review should include organizational structure options for statewide advocacy and action groups, best practice policy and program resource recommendations, and media and communication resources and directives including those related to reducing Underage Drinking. Note that each of the active workgroups with-in the Alliance may prioritize one or more of the areas listed. Other areas of inquiry with Alliance members and workgroups should also be included as they are identified by members of the Alliance. The applicant will use the data and information from these planning meetings to choose priority areas for the 5-10 year strategic plan that the Alliance will engage during the grant period.

3. Preparation of a five-year strategic plan, logic model, and evaluation plan: During this phase, the applicant will review and summarize the activities, meetings, data processing and recommendations that Alliance members and stakeholders provided during the Strategic planning and engaging phases. This is the applicant's opportunity to report the activities that have been accomplished or are expected to be accomplished in the future. The outcome of this phase should be a final 5-10 year plan of action to engage the Alliance and facilitate the process during the

future grant cycle. This strategic plan must detail the five steps of the SPF process (see **Attachment 1- FY24-Prevention_Resource_Guide, pg. 20**).

Applicants should include a detailed plan to continue assembling stakeholders of the statewide alcohol prevention alliance, construct a comprehensive strategic plan and logic model, and determine a timeline to implement proposed strategies and initiatives (Step 4 of the SPF). In support of project planning narratives, the applicant will complete a logic model. The logic model will identify resources available to the proposed project; summarize project activities; and clearly state anticipated goals, outputs, and outcomes compliant with program intent.

1.04 Program Evaluation Requirements and Reporting

Results Based Budgeting Framework

Results based budgeting provides a framework in which allocated resources support, and are justified by, a set of outputs and expected results. Within this framework, actual performance and achieved outcomes are measured by objective performance measures.

Projects are required to align with program objectives expressing Department priorities and core services. Projects will use performance measures to evaluate progress toward meaningful outcomes, and to initiate data collection and reporting consistent with Department priorities.

The Department Priorities, Core Services, Objectives, and Performance Measures of Effectiveness and Efficiency for this program are:

Department Priorities

- 1 Health & Wellness Across the Life Span

Department Core Services

- 1.1 Protect and Promote the Health of Alaskans

Department Objectives

- 1.1.1 Improve the Health Status of Alaskans
- 1.1.3 Decrease substance abuse and dependency

Performance Measures for Groups A, B, and C are:

- Enhance community capacity to connect individuals to needed behavioral health interventions or services in a timely manner.
    - **Performance Measure:** *Percent of intended agencies actively engaged in a comprehensive wellness coalition, have Memorandum of Agreements (MOA's) to partner, share resources, or contribute significantly to the coalition's strategic plan.*
- Increase community readiness to prevent behavioral health conditions including substance misuse, suicide and/or poor mental health. Grant supported community coalitions will measure their readiness using a standardized Tri-Ethnic Center assessment tool that scores readiness on a scale of 0-9 (Community Readiness Handbook) with the score of 0 being lowest readiness (no awareness of the issue) and the score of 9 being the highest readiness (high level of community ownership). This measure will assist coalitions in using local data to guide their prevention efforts and will result in higher success when implementing

prevention strategies.
    - **Performance Measure**: Community readiness score of the identified behavioral health condition.
- Increase community ability to understand and address behavioral health conditions that have been identified through a data-driven decision making (SPF) process.
    - **Performance Measure:** Number of coalition lead SPF steps implemented to fidelity.

The applicant's proposed evaluation plan will incorporate the performance measures of effectiveness and efficiency identified above and must be consistent with Healthy Alaskans 2030. Applicants can propose additional performance measures for evaluating the project's progress in achieving results supportive of the program goals and outcomes.

Grant Reporting

Required reporting will include:

1. Cumulative Fiscal Reports recording overall grant and match expenditures by budget line; and
2. Program Reports in the format prescribed by the program.
3. Additional documentation may be required quarterly.

1.05 Target Population and Service Area

Applicants must clearly describe the population intended by the project, including the area or communities that will be served. Geographic areas are defined solely by the 2022 Population Estimates by Borough and Census Area listed at the Department of Labor Workforce Development website. Proposals will be evaluated for compatibility with the program's intended population identified in this solicitation.

At minimum, all applications should include:

1. A description of the geographic area to be served, as defined earlier,
2. A description of the population size and demographic characteristics of the population(s) to be served,
3. A description of the political authorities in the region (municipalities, tribal authorities, etc.) as well as which area(s) are unincorporated,
4. A description of the historical, political, economic and socio-cultural influences of the community as they relate to behavioral health and wellness promotion,
5. A description of the burden of behavioral health challenges within the population, community, region or proposed service area. This should include substance misuse, suicide, poor mental health and the identification of and prevalence rates of shared risk and protective factors. Include information on behavioral health related disease and disability,
6. A description of the community infrastructure including health-care centers, large employers, community or health organizations and health or wellness coalitions, and
7. A summary of all current prevention or wellness coalition(s), task groups, etc., and other current members.

Regional data resources may include sources such as BRFSS, Youth Risk Behavior Survey (YRBS), and Community Profiles prepared by Division of Community and Regional Affairs.

Intended Populations per Group:

Group A: Individuals (of all ages), families, and/or communities adversely affected by substance misuse, suicide, and/or poor mental health. Upon award, grantees of this group will complete step 1 of the SPF process (Assessment). Through this process the intended population will be more narrowly defined.

Group B: Applicants must describe the intended population focused on previously, during completion of the SPF process or similar community-based and data driven process or designate as statewide community of youth (under 18 years of age).

Group C: Those at risk of the harmful effects of alcohol misuse leading to underage drinking, adult binge drinking, and adult heavy drinking.

Service Areas and Communities: Proposals are being solicited from service areas statewide.

1.06 Program Funding

Funds available for this program are anticipated to total Estimated annual funding is $3,890,581.99 for this program. Funding sources include $630,760.54 for Alchl/Drug; $1,748,941.25 from Fed Rcpts, and $1,510,880.20 GF/MH. Estimated 3-year funding for this program is $11,671,745.97.

FY24 Group A Funding:

- Applicants with no prior strategic planning capacity can request up to $50,000.
- Priority will be given to an eligible Group B in a community, defined solely by the 2022 Population Estimates by Borough and Census Area, where there is a Group A applicant.

FY24 Group B Funding:

- Applicants with full SPF capacity having populations under 20,000, defined solely by the 2022 Population Estimates by Borough and Census Area, may request up to $150,000.
- Applicants with full SPF capacity having populations between 20,000 and 49,999, defined solely by the 2022 Population Estimates by Borough and Census Area, may request up to $250,000.
- Applicants with full SPF capacity having populations of 50,000 or more, defined solely by the 2022 Population Estimates by Borough and Census Area, may request up to $350,000.
- Applicants serving the Municipality of Anchorage may request up to $600,000. Only one applicant can be funded as the lead fiscal agent for this population group. The applicant will be required to serve as the fiscal agent for the Regional Suicide Prevention Coalition for the Anchorage region.
- Applicants serving the statewide community of youth may apply for up to $350,000. Only one applicant can be funded as the lead fiscal agent for this population. This agency will also be required to participate in regional suicide prevention coalitions and represent youth (under 18 years of age) voice in the Alaska Suicide Prevention Coalition.
- Group B applicants must indicate if they will be a lead or support agency in establishing a new Regional Suicide Prevention Coalition. One agency in each region can be selected for this funding as Lead agency, and fiscal agent for the RSPC. All applicants must participate as either a lead or supporting member to the Regional Suicide Prevention Coalition in their region and may request funding to support related strategies only if they apply to be the Lead. The seven regions are identified as Northern, Interior (included Fairbanks), Southeast (includes Juneau), Mat-Su, Anchorage, Southwest, and Western. Lead agencies are eligible for up to $50,000 above the population cap. Up to one Lead agency can be selected per region, however Anchorage is not eligible for the additional funding. Additionally, the Statewide community of Youth is also not eligible for the additional funding. Communities that do not elect to lead the suicide prevention work in their service region will use the standard CBHPEI grant funding listed in the population group caps above to continue to support existing and/or new strategies identified by the Regional Suicide Prevention Coalition.

FY24 Group C Funding:

- Applicants to sustain the statewide Alcohol Misuse Alliance can request funding up to $500,000. Only one applicant will be awarded in Group C. The successful grantee will act as fiscal agent for the statewide Alliance. Interested parties are encouraged to combine resources and submit one cohesive proposal.

For all Applicant groups: Due to the complexity of behavioral health issues, it is unrealistic that any one agency can be effective making population-level change on its own. The entity receiving the grant award is considered the "fiscal agent" for the work of the coalition and is administratively and financially responsible for the performance of the coalition. The fiscal agent is expected to share grant funds with coalition partners. This shared funding expectation is a two-way process. Partner agencies are also expected to bring resources (money, people, materials, etc.) to the coalition efforts. Shared funding among coalition members will be established through subcontracts and/or Memorandums of Agreement (MOA). Copies of established agreements must be submitted with this application. Join coalitions that include active task groups, coalitions, or workgroups on tobacco prevention, opioid misuse prevention, suicide prevention, reentry and others should be included where these groups operate in the shared community.

Funding in subsequent years is based on criteria identified in section 3.05 of this RFP.

Match Requirement: The budget must include matching funds equal to 10.00% of the proposed Department funds. Calculate required match with the following formula:

Total Requested Grant Award x Required Match Percentage = Required Match

Federal grant funds may not be used to match federal funds awarded through this grant program, and State grant funds may not be used to match State funds awarded through this grant program.

Eligible sources of matching funds include:

- Local Cash: local sources, including local tax receipts, municipal revenue sharing, cash donations
- Local In-Kind: donated items of value for which the applicant incurs no cost, including volunteer labor and donations of supplies, equipment, space
- Other Sources: government and non-government grant awards, third party receipts, direct receipts such as gaming or sales of goods
- Grant Income: earnings anticipated as a result of this project proposal receiving award, and Medicaid reimbursements if award of this grant is required for the applicant to bill Medicaid for awarded services
- Medicaid: includes Medicaid which is not Grant Income, as well as other third-party receipts)

Proposed Budget: The applicant must submit a budget proposal for the first fiscal year of the project. The proposed budget detail and narrative (including required match) will support the program's results-based service delivery and staffing requirements stated in this RFP.

All applicants must dedicate grant funding and other resources to support and coordinate a comprehensive wellness coalition and maintain an active role in the statewide wellness promotion effort, and the Alaska Suicide Prevention Coalition. All applicants must include travel to Anchorage for a mandatory 3-day all-grantee meeting held annually. This meeting provides an opportunity for discussion, learning, and networking. Attendees should include project staff and key coalition members. Grant funds can be utilized to pay for up to four attendees.

While DBH's goal is to fully fund as many proposals as possible, the state reserves the right to recommend reduced funding if the proposed budget requests do not appear realistic or there are not enough dollars to fund all quality

applications at the requested level of funding. If budget requests are reduced by DBH, potential grantees will have the choice to accept the reduced funding or decline the grant award. If accepted, there will be an opportunity to revise the year 1 budget.

All coalitions will be required to work with either a coalition evaluator or a contracted evaluator/s Coalitions will be required to submit data and reports from on a regular basis and should include a description of the evaluator resources that will support the coalition.

Funding Priorities:

Group A: Priority will be given to communities that demonstrate strong community collaboration through submitted documents. Only communities without current or recent coalitions will be considered. Secondary priority for these applicants will be based on geographic considerations to promote geographic distribution across the State. Priority will also be given to applicants proposing to serve groups of communities in a sub-region such as linking smaller communities in a multiple community collaboration. Additional priority will be given to the number of other coalitions within the geographic region, and the feasibility for long-term coalition sustainability.

Group B: Only applications from coalitions with evidence of current capacity will be considered for Group B funding. Priority will be based on PEC and staff review of applications based on the intent and requirements defined in the RFP. Some consideration will be made based on promoting a geographic distribution of coalitions across the State. Up to one applicant from any given community or population will be funded. Up to one applicant for a community of youth grant will be funded.

Group C: Up to one applicant will be funded.

Regional Suicide Prevention lead funding is limited to a maximum of seven applicants representing the identified regional public health areas. Priority will be given to applicants that demonstrate the ability to meet the conditions and requirements outlined in the RFP. Group B applicants will be given priority over Group A applicants. All applicants that are not awarded as a lead applicant will be required to be a supporting applicant with the Regional Suicide Coalition if the region is assigned a lead agency and the Statewide Suicide Prevention Coalition.

Section 2 Applicant Qualifications

2.01 Agency Experience

Proposal evaluation will include consideration of the applicant's history of compliance with service and grant requirements, and previous experience in providing the same or similar services. Evaluation may include Department site reviews, program audits, and confirmation of the successful resolution of any findings. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

All applicants must:

1. Describe previous experience providing the same or similar services and the intended population served.
2. Demonstrate the ability to engage and involve partners when designing and implementing the grant proposal and action plan. (Examples of documentation include: meeting agendas and minutes, work group rosters, letters of support, work plans, memorandums of understanding, etc.)

For Group B only:

1. The description must also clearly describe the time period over which SPF (or similar data driven process)

supported services were provided. These applicants should provide a brief history that demonstrates sustainable fiscal and administrative capability, and responsibility.

Demonstrate the continuation of any previous behavioral health prevention and wellness coalition activities. (Examples of documentation include: strategic plans, work plans, logic models, etc.)

2.02 Project Staffing

Project staffing must be sufficient to implement the proposed activities in order to meet the program goals and anticipated outcomes.

Resumes (and/or position descriptions) and professional credentials for key project personnel must be uploaded as part of the response. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

At least one active coalition member should be Substance Misuse Prevention Specialist Training (SAPST) certified. If no staff is SAPST certified or equivalent (for example ICRC), the proposal should include how this will be obtained.

Group A: A minimum of one 0.25 FTE Wellness Coalition Coordinator must be dedicated to this project. Upon award Group A grantees will need to provide documentation of program related staffing levels as part of the SPF steps 1-3. The proposal shall include staffing either trained or a proposal to train toward SAPST certification.

Groups B and C: A minimum of one 1.0 FTE Wellness Coalition Coordinator must be dedicated to this project. Group B applicants applying to support the Regional Suicide Prevention Coalition Chair must include a position description and defined staff support (recommended 0.5 FTE) dedicated to support the regional Suicide Prevention Coordinator role. (see description for Regional Suicide Prevention Coordinator duties below).

Describe your organization's staffing, including qualifications and number of staff required to implement the proposed activities. Applicants must provide resumes for all key project personnel (at minimum Wellness Coalition Coordinator), and job descriptions for each position funded through this grant program.

Duties of the Wellness Coalition Coordinator include, but are not limited to (see **Attachment 10- Sample Job description Wellness Coordinator**):

- Ability to develop a strategic plan to guide program efforts.
- Provide measure outreach to community members and organizations.
- Ability to recruit supporters to the project.
- Facilitate community efforts to support wellness coalition goals and report all program activities to prevention section staff on a quarterly basis.

Duties of the Regional Suicide Prevention Coalition Coordinator in year 1 include, but are not limited to:

- Organize and coordinate a Regional collective of individuals, businesses, community members and people with lived experience, whose purpose is to develop a region specific plan to reduce suicide and suicide attempts, that is aligned with the Alaska's Suicide Prevention Plan.
- Conduct a regional landscape analysis of factors contributing to suicide, demographics, and gaps and needs that are specific to the region and communities served.
- Develop a strategic plan to guide regional efforts.
- Utilize region specific data to guide strategic planning and reporting on efforts of the Regional Suicide Prevention Coalition.

All group applicants that hire a new grant coordinator or staff without behavioral health prevention experience in Alaska must arrange for appropriate staff training and provide a training plan with the proposal.

All grant funded staff positions and wellness coordinators must attend:

1. Comprehensive Behavioral Health Prevention and Early Intervention annual training conference;
2. Web-based training opportunities sponsored by the DBH prevention section;
3. SAPST certification training if not SAPST certified; and
4. Annual Suicide Prevention Conference

All Wellness Coalition Coordinators are encouraged to pursue additional state and national level training opportunities as appropriate and as pre-approved by DBH program staff (see **Attachment 1- FY24-Prevention_Resource_Guide, pg. 34**)

Group A grantees and all new staff from Groups B and C are required to attend SPF orientation training from the DBH prevention section upon award.

2.03 Administrative, Management, and Facility Requirements

The applicant must demonstrate the agency's sustainable fiscal and administrative capacity. Executive, administrative, and financial staff must be qualified, as indicated by the resumes of position holders uploaded as an element of the proposal. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

1. The applicant must ensure procedures are in place to protect client confidentiality compliant with State and federal standards.
2. The applicant must ensure its most recent financial audit was submitted to the appropriate state office (see Audit Requirements below), and any findings identified have been resolved.

Awarded proposers will be required to submit additional agency information if the agency GEMS record is not current.

Audit Requirements:

Federal Requirements: Agencies spending $750,000 or more total Federal Financial Assistance in the agency fiscal year may be required to comply with conditions of the Single Audit Act of 1984, P.L. 98-502, as amended by the Single Audit Act Amendments of 1996, P.L. 104-156, and as defined in 2 CFR 200.

State Requirements: Agencies spending $750,000 or more total State Financial Assistance in the agency fiscal year are required to comply with the conditions of 2 AAC 45.010-090. The current regulations may be viewed at the State of Alaska, Department of Law website, Department of Law Document Library, or copies may be obtained from the contact identified on the cover page of the RFP.

Information on State and Federal Single Audit Acts compliance may be obtained from:

State Single Audit Coordinator
Department of Administration
Division of Finance
PO Box 110204
Juneau, AK 99811-0204
Telephone: (907) 465-4666

Fax: (907) 465-2169

Department of Health Program Audit Requirements: All DOH grantees are subject to the requirements of 7 AAC 78.230. If awarded, agencies which are not required to file State Single Audits under 2 AAC 45.010 must ensure a fiscal audit of the agency operations under the grant program is performed by an independent, licensed, certified public accountant at least once every two years and submitted to:

State of Alaska Department of Health
Finance and Management Services
Audit Section
PO Box 110602
Juneau, AK 99811-0602
Telephone: (907) 465-3120

Facility, Service Access, and Safety:

1. The applicant must address potential safety concerns for clients and staff in the management of services proposed in response to this RFP.
2. The applicant should describe client accessibility to services and the way in which that will enhance project success.
3. All applicants for Department grants should have a written plan for emergency response and recovery that provides for potential safety concerns and the safe evacuation of clients and staff. This plan is mandatory for agencies providing residential and/or critical care services as noted in the State Grant Assurances.

2.04 Support/Coordination of Services

Applicants must demonstrate the proposed project has the necessary support and coordination for the successful delivery of services. The proposal must address the following:

1. Coordinate the completion of a Coalition Capacity Survey (Except Group C and Community of Youth applicants) for at least 50% of the active members. Proposals must specify how many surveys were completed for this proposal (see **Attachment 4- Coalition Capacity Survey**).
2. Shared funding among coalition members is expected and should be established through sub-contracts and/or Memorandums of Agreement (MOA's) (see **Attachment 13- Sample MOA MOU**). Copies must be submitted with this application.
3. Proposals prioritizing school-age youth must obtain a MOA to work with local schools and utilize the Youth Risk Behavior Survey (YRBS) and/or the School Climate and Connectedness Survey (SCCS) (see **Attachment 5- Shared Factors for Adolescents More Matters**).
4. Involvement of the public and potential service recipients in the planning process for program implementation.

Group A

1. A current letter of support from the administration of the applying organization(s) demonstrating leadership understanding of the work to be conducted, the application of funds towards a 0.25 FTE Wellness Coalition Coordinator, and fiscal and administrative responsibility for the performance of the coalition. Letter of support must be signed by the Chief Executive Officer (CEO or equivalent), and the department head or equivalent in which the program will reside.
2. The applicant must work with a coalition to develop the preliminary assessments.

3. The proposal must include a list of current coalition members who were active in the application process. An additional list should include relevant prevention partner coalitions or groups in the defined service area that are or will be included.

Group B

1. A current letter of support from the administration of the applying organization(s) demonstrating leadership understanding of the work to be conducted, the application of funds towards a 1.0 FTE Wellness Coalition Coordinator, and the fiscal and administrative responsibility for the performance of the coalition. The letter of support must be signed by the CEO or equivalent, and the department head or equivalent in which the program will reside.
2. A list of wellness coalition members and relevant partner coalitions or groups actively represented in the coalition, including agency and sector representation that will be supporting Year 1 activities (see **Attachment 1- FY24-Prevention_Resource_Guide, pg. 23**). This list must identify the relevant contact persons within those agencies and briefly identify the activities coordinated or supported by each partner.
3. Submit at least 3 MOA's or Memorandum of Understandings (MOU's) for community resources and support where shared activities or services are occurring. (see **Attachment 13- Sample MOA MOU**). Applicants applying to become regional Suicide Prevention Coalition chairs must include letters of support from regional partners.

Group C

1. A current letter of support from the administration of the applying organization(s) demonstrating leadership understanding of the work to be conducted, the application of funds towards a 1.0 FTE Wellness Coalition Coordinator, and the fiscal and administrative responsibility for the performance of the coalition. The letter of support must be signed by the CEO or equivalent, and the department head or equivalent in which the program will reside.
2. Include a list of current coalition members and agency partners who were active in the application process. An additional list should include relevant prevention partner coalitions or groups in the defined service area that are actively involved in the Alliance.
3. Submit at least 5 MOA's from core stakeholders partners willing and able to contribute supporting resources and demonstrating a commitment to partnering or participating on the Statewide Alcohol Prevention Alliance.

Section 3 General Instructions for Proposal Submission

3.01 Eligibility

Applicants must be eligible to apply under 7 AAC 78.030 (Eligible Applicants). Eligible applicants are state agencies; political subdivisions of the state such as cities, organized boroughs, and Regional Educational Attendance Areas; nonprofit organizations and consortia of nonprofits; and Alaska Native entities. As follows, eligibility will be verified by Grants and Contracts.

1. Political subdivisions of the state and Regional Educational Attendance Areas will be verified by State records.
2. Eligible nonprofits are listed in the State's database of registered nonprofit entities or the US Internal Revenue Service's register of tax-exempt organizations. Nonprofit subsidiaries of nonprofit corporations must also provide a letter from the parent organization confirming nonprofit status.
3. Alaska Native entities as defined in 7 AAC 78.950(1) must submit, with the application, a legally binding resolution waiving the entity's sovereign immunity to suit through the duration of the program, identified in

RFP Subsection 3.05. The resolution must be authorized in compliance with the tribe's constitution, either by the tribal council or by majority vote of the tribal membership. The required template is provided at Subsection 4.02, Other Technical Requirements.

Federal Funding Accountability and Transparency Act (FFATA): In accordance with 2 CFR Chapter 1, Part 170 Reporting Sub- Award And Executive Compensation Information, reporting is required of any grant award with federal funding equal to or greater than $30,000. FFATA is intended to hold the federal government accountable for spending decisions. Accountability data is available to the public at U.S. Government spending. Reporting requirements extend to recipients of State-issued awards with federal funds. An Agency Power User must complete the FFATA form under Federal Reporting in the GEMS Agency Administration tab. The report data will reflect the audited figures of the agency's most recently completed fiscal year. The report captures expenses and executive compensation for your agency. More information regarding FFATA requirements can be found at Federal Funding Accountability and Transparency Act Subaward Reporting System.

The US Federal Government is transitioning from the Dun & Bradstreet Data Universal Numbering System (DUNS) number to a System for Award Management (SAM) generated Unique Entity Identifier (UEI) alpha-numeric value for federal awards management. During this transition the DUNS number will be phased out and all grantees receiving awards with federal funds will be required to have a UEI. More information regarding this transition can be found on the U.S. General Services Administration webpage at U.S. General Services Administration.

The Grants Electronic Management System (GEMS) has been updated to include fields for both the DUNS nine-digit number and the UEI twelve-digit alpha-numeric value under the General section of the Agency Administration tab. An Agency Power User must confirm the current DUNS number is listed in GEMS and is responsible for adding the UEI once one has been assigned. The DUNS number will continue to be displayed in GEMS until the Federal Government's transition to the UEI is complete.

Applicant agency GEMS records must contain the agency's current State of Alaska Business License number, and a current governing board roster which includes titles, contact information, and terms of office for each seat. The roster must include emergency contact information outside the applicant agency for one or more officers.

Grants and Contracts will verify neither the applicant agency nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from receiving grant assistance from any State or federal department or agency. If an agency or its principals are excluded from receiving grant assistance, the proposal may not be considered.

If this grant program includes Federal funding, effective November 12, 2020 Federal Uniform Guidance 2 CFR 200 requires that agencies be registered on the System for Award Management (SAM) website at System for Award Management (SAM). If an applicant is recommended for award and is not registered on this site, the offered award will not be executed, and funds will not be issued until agency registration is confirmed.

Applicants who have had a contract or grant to help produce this RFP are not eligible to apply and any submitted proposal will not be considered.

3.02 Acceptance of Terms

By submitting a proposal, an applicant accepts all terms and conditions of this RFP including all identified attachments and guidelines, 7 AAC 78, and any other applicable statutes and regulations. Copies of these may be accessed through the contact person identified on the cover page or through the web address(es) identified in this RFP.

If a grant is awarded, this RFP and the applicant's proposal become part of the grant agreement. The applicant will be bound by the provisions contained in the awarded proposal unless the Department agrees that specific parts of the proposal are not part of the agreement.

Proposals and other materials submitted in response to this RFP become the property of the State and may be returned only if the State allows. Proposals are public documents and may be inspected or copied by anyone after grants have been awarded.

3.03 Inquiries

Applicants should immediately review this RFP for defects and questionable or confusing content. Questions that can be answered by directing the applicant to a specific section in the RFP may be answered verbally by the contact person identified on the RFP cover page. Questions that cannot be answered by directing an applicant to a specific section of the RFP may be declared substantive. The applicant will be directed to submit the question in writing to the contact person at the email address on the cover page no later than the Deadline for Written Inquiries, also identified on the cover page. This will allow issuance of any necessary amendments and/or clarifications to all prospective applicants.

Applicants are responsible for monitoring GEMS or the State's Online Public Notices website (Online Public Notices) for any clarifications or amendments that may be issued regarding this solicitation.

Proposals will not be accepted after 3:59 PM prevailing local time on the due date identified on the cover page.

3.04 Proposal Costs and Content

The Department will not be responsible for any expenses incurred by the applicant prior to the authorized grant performance period. All costs of responding to this RFP are the responsibility of the applicant.

The applicant is responsible for the content of the proposal.

3.05 Duration

This RFP is for a 3-year period, beginning 7/1/2023 through 6/30/2026. At the discretion of the Department, a project funded under this RFP may be considered for continued funding in subsequent program year(s). The annual decision to continue funding for the subsequent year(s) of the 3-year grant cycle is based on the following general conditions:

1. the Department's judgment that there is a continued need for the grant project service;
2. the grantee's satisfactory performance during the previous grant year;
3. the availability of sufficient grant program funds, and whether continuation of the financing is consistent with public health and welfare; and
4. the ability of the grantee and the Department to agree on any adjustments in payments or service.

Applicants will submit a budget proposal for year one of the grant only. Funding in each subsequent year will require submission and approval of documents needed to update service plans, evaluation measures, and budgets. Grants and Contracts will notify grantees of specific submission requirements necessary to qualify for consideration

of continued funding.

This RFP is for fiscal year FY2024, 7/1/2023 through 6/30/2024.

3.06 Proposal Review

Following the deadline for receipt of proposals, no revisions will be accepted unless provided in response to a request from the contact person named in this RFP. Proposals will be reviewed as follows:

1. Proposals will be evaluated in a manner that will avoid disclosure of contents before notices of grant award have been issued.
2. Department of Health staff will evaluate each proposal for minimum responsiveness and other technical requirements and eliminate nonresponsive proposals from consideration.
3. Using the criteria set out in this RFP and 7 AAC 78.100 (Criteria for Review of Proposals), Department staff will evaluate each responsive proposal. **Scores for each criterion will be based solely on the response to the associated question. Points will not be earned if the information was provided in response to another question in Section 4**. Department staff will also review relevant departmental documentation regarding the applicant. Staff recommendations regarding awards and levels of funding will include consideration of the following:
    i. a history of the applicant's compliance with grant requirements, to include records of program performance, on-site program reviews, and prior year audits;
    ii. priorities in applicable State health and social services plans;
    iii. requirements of applicable State and federal statutes; and
    iv. municipal ordinances or regulations applicable to the grant program.

If there are multiple responsive proposals for which there is insufficient money to fully fund, or supplementary expertise is deemed necessary to the review of proposed services, the Department may appoint a Proposal Evaluation Committee (PEC) as an additional advisory body. PEC members will initially evaluate proposals, independently of other committee members. As a committee the PEC will meet in a **closed session** (7 AAC 78.090 Review of Proposals) to further review proposals and develop recommendations. Scores will be assigned based on the applicant's response to each individual question and the associated criteria. **Applicants will not earn points for a given question based on a response to another question in the RFP**. The PEC review will include discussion of each proposal's merits. PEC recommendations will rank proposals in priority order and include approval or disapproval for award, modifications to the proposed project, and special compliance conditions.

All staff advisory recommendations and, if applicable, those of the PEC, and all review materials will be submitted for consideration by the Division Director, who will make recommendations to the Commissioner of the Department of Health or the Commissioner's designee.

3.07 Final Decision Authority

Recommendations are advisory only, including those from any PEC that may be held. The final decision to approve or disapprove award, the amount of each award, and whether to impose special conditions or modifications rests with the Commissioner or Commissioner's designee.

NOTE: The final decision may include additional considerations, such as a lack or duplication of services in certain locations, or alternative services that may be available; a critical need for services by vulnerable populations; and

matters of health, life and safety. The Department has the responsibility to ensure public monies are utilized in a manner that protects the interests of the people of the State and retains the right to make final awards that ensure responsible distribution of grant funds.

3.08 Notification of Grant Award and Appeals

Within fifteen (15) days after the decision regarding grant awards, applicants will be notified of the final funding decisions, and, if awarded, any conditions of award or modifications. Following any necessary negotiations for revisions to the proposed budget and scope of services, successful applicants will be issued a grant agreement. This formal agreement will contain specific performance and reporting requirements consistent with Department policy and procedure and 7 AAC 78.

Per 7 AAC 78.305 (Request for Appeal), an applicant may appeal a final grant award decision. Requests for hearing must be addressed to the Commissioner and received in writing at the address below within 15 days after the applicant receives notification of the decision. The request must contain the reasons for the appeal and must cite the law, regulation, or terms of the grant upon which the appeal is based.

With a copy to the contact identified on the solicitation cover page, send appeal to:

Heidi Hedberg, Commissioner
Department of Health
3601 C Street, Suite 902
Anchorage, Alaska 99503-5923

3.09 Cancellation of the RFP/Termination of Award

Contingent upon funding appropriations and the Governor's approval, the Department may fund proposals from eligible applicants. The Department may withdraw this RFP at any time and reserves the right to refrain from making an award when such action is deemed to be in the best interest of the State. Funds awarded for a grant as a result of this RFP may be withheld and the grant terminated by written notice from the State to the grantee at any time for violation by the grantee of any terms or conditions of the grant award, or when such action is deemed to be in the best interest of the State.

Section 4 Submission Requirements/Evaluation Criteria

4.01 Minimum Responsiveness Criterion per 78.100(2)(A)

Proposals that fail to meet the minimum responsiveness requirements below will be eliminated from consideration per 7 AAC 78.090(b)(2).

1 (Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) - Applicant is eligible per 7 AAC 78.030.

Evaluation/Review Criteria		Review	Points
a	Applicant is eligible per Alaska Administrative Code 7 AAC 78.030.	☑	0

4.02 Other Technical Requirements per 7 AAC 78.060, 78.090(b) and 78.100

Response & Organizational Documentation

1 (Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) - If applying as a non-profit organization, confirm non-profit status is documented.

Evaluation/Review Criteria		Review	Points
a	The agency is listed as a non-profit in good standing on the State's corporation database, confirmed at State Corporation Database and/or	☑	
b	The agency's current 501(c)(3) status is confirmed on the Exempt Organizations page, accessible at IRS Tax Exempt Organization Search.	☑	
c	If a non-profit subsidiary of a non-profit corporation, a verifying letter from the parent non-profit agency is uploaded to the applicant's agency GEMS record (under General in the Agency Administration tab). The parent corporation must meet criteria a and/or b.	☑	

2 (Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) - If applying as a Federally recognized tribal entity, upload the signed Resolution for Tribal Entities using the template provided below. Confirm the following criteria are met.

Evaluation/Review Criteria		Review	Points
a	The applicant is a recognized Alaska Native entity as verified by the Federal Register at Federal Register. If a tribal consortium, all members are recognized Alaska Native entities.	☑	
b	A Resolution, completed on the provided form, is uploaded in the space provided. If a tribal consortium, a Resolution from each member tribe is uploaded as a single file.	☑	

3 (Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) - If applying as a government entity, confirm the following criterion is met.

Evaluation/Review Criteria		Review	Points
a	The applicant is another State Agency, such as the University; a political subdivision such as a city or municipality, verified at Local Boundary Commission; or an REAA under AS 14.08.031 verified at Department of Education Alaska School Map.	☑	

4 ***(Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) - Confirm neither the applicant agency nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from receiving grant assistance from any State or federal department or agency. If an agency or its principals are excluded from receiving grant assistance, the proposal may not be considered.***

Evaluation/Review Criteria		Review	Points
a	Neither the applicant agency nor its principals are barred from receiving federal assistance as verified in the federal System for Awards Management at System for Award Management (SAM).	☑	

5 ***(Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) - Electronically sign the State Grant Assurances form.***

Evaluation/Review Criteria		Review	Points
a	State Grant Assurances form is signed by an individual authorized to enter into legal agreements on behalf of the applicant agency.	☑	

6 ***(Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) -***

This program receives federal funds. Confirm the following criteria are met.

Evaluation/Review Criteria		Review	Points
a	The Federal Assurance and Certification form is electronically signed by an individual authorized to enter into legal agreements on behalf of the applicant.	☑	
b	The applicant agency GEMS record, under General in the Agency Administration tab, contains the agency's UEI number.	☑	
c	The required Federal Funding Accountability and Transparency Act (FFATA) information, located under the Federal Reporting section of the Agency Administration tab, has been provided for the agency's most recently completed fiscal year. This task can only be completed by an Agency Power User.	☑	

7 ***(Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) - Confirm the following information is provided at the Agency Administration tab. These tasks must be completed by a Power User. If the information is found to be incomplete or not current, there may be delay in execution of any offered award.***

Evaluation/Review Criteria		Review	Points
a	The General section contains a current governing board roster. The roster includes terms of each seat and contact information outside the applicant agency for one or more officers.	☑	
b	The Other Funding section contains a record for each source of agency operating funds. The record includes funds applied for under this solicitation. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.	☑	
c	The General section contains a State of Alaska business license number, verified at Alaska Business Licenses Search.	☑	
d	All agency contact records are up to date, including Head of Agency, Primary Contact, and Head of Financial Operations.	☑	
e	The applicant's agency record contains the Agency Fiscal Year Start Date.	☑	
f	The applicant's agency GEMS record contains a current Federally Negotiated Indirect Cost Rate Agreement. If lapsed, the agreement is uploaded with written confirmation from the negotiating agency that the rate is valid until a new agreement is approved.	☑	
g	The applicant indicates willingness to serve as a Regional Suicide Prevention Coalition chair and has included a budget line item for this.	☑	
h	The applicant indicates interest in initiating the Youth 360 (Icelandic Model-Planet Youth) process in FY2024 and includes a budget line item for this.	☑	

4.03 History of Compliance with Grant Requirements per 7 AAC 78.100(2)(B)

1 ***(Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) -***

Previous recipients of DOH awards will confirm the following criteria pertaining to past performance and compliance are met. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200. All other applicants will mark Complete without confirming.

Evaluation/Review Criteria	Review	Points

a	Fiscal, narrative, and data reporting in prior years has been complete and timely.	☑	
b	Required State and Federal Single Audits have been submitted, verified at Division of Finance, State Single Audit. Any prior year audit exceptions have been resolved, verified by the Finance and Management Services Audit Section contact identified at Finance and Management Services Audit Contact.	☑	
c	Activities in prior year(s) demonstrate effective delivery of services. Department review may include documentation such as performance reports, audit reports, grant records, site visits, etc.	☑	
d	Agency historically maintains required standards. Verification may include, though is not limited to, quality assurance reviews, licensing, and certifications.	☑	

4.04 Questions and Criteria Related to Program Policy, Goals, Outcomes, and Activities

1 ***(Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) -***

(Application Group A, Application Group B, Application Group C) -

In the text box below, describe the intent and ability to coordinate prevention partnerships with individuals, agencies, initiatives, and stakeholders in the targeted service area and at the statewide level in order to reduce the burden association with behavioral health challenges.

Evaluation/Review Criteria		**Review**	**Points**
a	The proposal describes how wellness and prevention efforts will be coalition lead with stakeholders representing the diversity of the service area. Proposal includes how the wellness coalitions will partner with agencies, task groups, and coalitions that are working on similar wellness initiatives that may be outside the direct focus of this program. Proposal describes if the coalition will serve as a supporting or a lead regional suicide prevention coalition member.	☐	100

2 ***(Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) -***

(Application Group A, Application Group B, Application Group C) -

Describe the proposed project in the text box below, identifying the ways in which it will achieve the program goals and anticipated outcomes state in this RFP.

Evaluation/Review Criteria		**Review**	**Points**
a	The description demonstrates a thorough understanding of Strategic Planning Framework and promoting wellness across the lifespan. Proposal address one or more of the identified Healthy Alaskans 2030 indicators and clearly identifies the ways in which they will be achieved for proposed service area.	☐	80
b	Proposal demonstrates the coalition's familiarity and willingness to maintain fidelity to and ability to successfully adhere to the five steps of Strategic Prevention Framework.	☐	80
c	Proposal demonstrates a shared risk and protective factor approach to prevention efforts.	☐	80
d	Proposal demonstrates that cultural responsiveness will be central to all prevention efforts.	☐	80
e	Proposal has incorporated a plan for sustainability in order to maintain prevention efforts post grant award.	☐	80

3 ***(Group B- Program Implementation) -***

(Application Group B) -

In the text box below, describe the ways in which the project aligns with program intent. The response will identify project resources, activities, and clearly state the project's anticipated goals, outputs, and outcomes. In the upload field below, provide evidence of an active comprehensive wellness coalition, including a coalition member list and activity reports.

Evaluation/Review Criteria		**Review**	**Points**
a	The described activities are well developed, reasonable and supportive of program intent.	☐	80

b	The response identifies project resources, activities, and clearly states the project's anticipated goals, outputs, and outcomes.	☐	40
c	The applicant's logic model identifies project resources, activities, and projected outcomes that meet program intent.	☐	120
d	The applicant has stated they will conduct at minimum a baseline and biennial community readiness surveys.	☐	50
e	The applicant has stated they will conduct at minimum a baseline and biennial Coalition Capacity surveys.	☐	50
f	The applicant has provided a summary of a recent needs assessment completed or updated prior to June 30, 2021, or stated they will conduct a comprehensive behavioral health assessment of their service area in FY2024. Applicants indicate either annual updates or a timeline when needs assessments will be reviewed and updated.	☐	100
g	The applicant has uploaded evidence of annual updates to a strategic plan, logic model, and timeline. Applicant indicates a plan to review and update these annually.	☐	100
h	The applicant has provided evidence of an active comprehensive wellness coalition, including a coalition member list that includes a member activity summary.	☐	100
i	Proposal demonstrates inclusion and progress toward at least one long-term policy initiative.	☐	50
j	The applicant has provided a detailed timeline that includes intended events, coalition meetings, and community training events that are compatible with the proposed initiative.	☐	120

4

(Group A- Build Capacity) -

(Application Group A) -

In the text box below, compile findings from the preliminary community assessment.

Evaluation/Review Criteria	**Review**	**Points**

a	The proposed evaluation plan includes indicators and data gathering strategies aligned with the program performance measures identified in Subsection 1.04.	☐	80
b	The applicant has proposed a strategic plan for completing the first three steps of the SPF process. The strategic plan includes a timeline to complete the SPF process by June 2024.	☐	100

5 ***(Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance) -***

(Applicant Group B, Applicant Group C) -

In the text box below, describe past experiences and successes your coalition has had in the chosen behavioral health prevention initiative. In the upload field below, scan and attach as a single document a completed SPF or similar planning process and a fidelity checklist.

Evaluation/Review Criteria		**Review**	**Points**
a	The description clearly identifies the proposed target population and service area and meets the intent of the services solicited.	☐	80
b	Proposal provides a realistic sustainability summary that describes what the coalition needs and how those needs will be met post grant award.	☐	40
c	Proposal identifies the coalition as either a lead for a Regional Suicide Prevention Coalition or as a supporting member. Lead coalitions includes strategies and activities that will be included in the coalition strategic plan to carry out this leadership role.	☑	
d	Proposal describes how the SPF steps 1-5 were applied toward identifying at least one best practice strategy, or an alternative to using a best practice strategy with justification as to why it was the best choice for the proposed implementation, service area, and intended population.	☐	50
e	Proposal describes how the SPF steps will be used during the future progress of the proposed initiative.	☐	50
f	Proposal describes how the goals and long-term objectives identified during the most recent SPF process were addressed, and how these are linked to Healthy Alaskans 2030 indicators.	☐	50

g	The applicant has provided a detailed summary of the successes and challenges in meeting intended outcomes using the SPF or similar planning process, and has included a completed fidelity checklist.	☐	50
h	Proposal includes a summary of a detailed plan to implement changes from their already existing strategic plan.	☐	50
i	Proposal provides an outline of enhancements that will be made to continue success in the chosen outcome area(s).	☐	50

6 ***(Group C- Statewide Alcohol Prevention Alliance) -***

(Application Group C) -

In the text box below, describe the ways in which the project aligns with program intent. The response will identify project resources, activities, and clearly state the project's anticipated goals, outputs and outcomes.

Evaluation/Review Criteria		**Review**	**Points**
a	Proposal demonstrates that the applicant has reached out to Alliance stakeholders, active members, and regional Alliance chairs throughout the state who are invested in alcohol prevention. Proposal describes what if any efforts will be made to reach out to new partners or members in FY2024 including outreach to engage stakeholder groups with the highest disparity in alcohol related morbidity and mortality.	☐	150
b	Proposal is built from the published guiding frameworks established during the past four funding cycles of the Alliance from FY2020 through FY2023. Proposal demonstrates the application of collective change model and transformative justice to coordinate FY2024 strategic planning with members and stakeholders to review existing Alliance planning and strategy documents and other statewide data on alcohol misuse and map out a five-year strategic plan.	☐	100

7 ***(Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) -***

Provide the proposed budget for the first year of the project. Include detail and supporting narrative as shown in the DOH Grant Budget Preparation Guidelines (Documents tab). Confirm the following criteria are met.

Evaluation/Review Criteria	**Review**	**Points**

a	The budget narrative is complete and mutually consistent with the budget detail.	☑	
b	Cost line items are allowable under 7 AAC 78.160 and are compliant with stated program requirements.	☑	
c	Travel costs are consistent with 7 AAC 78.160(h) and (i), and with any program requirements or limitations identified in the solicitation.	☑	
d	Equipment costs and subcontract costs are allowed by the program and consistent with 7 AAC 78.280.	☑	
e	Indirect costs are fully compliant with rates and exemptions of the agency's current Federally Negotiated Indirect Cost Rate Agreement, uploaded in the General section of the Agency Administration tab.	☑	
f	The budget supports the proposed project and program intent, and the project appears achievable with demonstrated resources.	☐	40
g	Costs are reasonable and substantiated in the narrative.	☐	20
h	The proposed budget narrative clearly describes any necessary allocation of resources among target populations or service areas.	☐	20
i	Proposed sources of Required Match are identified in the budget narrative as well as in the Matching Fund Source table located near the beginning of the application. All proposed sources of matching funds are eligible, and the level of match is met.	☑	

4.05 Applicant Qualifications - Criteria Relating to Personnel, Management, and Facilities

1 ***(Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) -***

In the text box below, describe the agency's previous experience in providing services the same as, or similar to, those proposed and plan for all grant funded staff positions and wellness coordinators to attend conferences/trainings that are outlined in RFP section 2.02. Clearly identify the time period over which services were provided and the population served. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

Evaluation/Review Criteria	**Review**	**Points**

a	The applicant's previous experience providing the same or similar services demonstrates the resources and capacity needed to provide the solicited program services.	☐	60
b	Applicant agrees that all grant funded staff positions and wellness coordinators will attend all required conferences and trainings detailed in RFP section 2.02.	☐	60

2 ***(Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) - In the text box below, describe the proposed project's program and administrative staffing needs. Scan the following documents as a single file and upload in the space provided below: 1) Position descriptions for key project positions 2) Resumes and professional credentials for position holders 3) Resumes of administrative staff providing supervision, fiscal, reporting, and management needs. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.***

Evaluation/Review Criteria		**Review**	**Points**
a	Staff providing services are qualified and competent as demonstrated by the uploaded position descriptions, resumes, and professional credentials.	☐	120
b	Staffing levels are sufficient to support the requirements of the proposed project and compliant with all identified program mandates.	☐	80
c	Position descriptions support the intent of the RFP and the project proposed.	☐	60
d	Administrative staff is qualified as demonstrated by the resumes provided.	☐	80
e	Administrative capacity demonstrates capability to meet management and reporting needs.	☐	80

3 ***(Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) - In the text box below, describe the procedures that will be used to protect client confidentiality.***

Evaluation/Review Criteria		**Review**	**Points**
a	The applicant's description identifies the procedures necessary to protect client confidentiality compliant with State and Federal standards.	☐	100

4 ***(Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) - In the text box below, describe the service delivery facilities and locations and the ways in which access to services will enhance project success.***

Evaluation/Review Criteria		Review	Points
a	The facilities described are safe and appropriate to the purpose of the program.	☐	60
b	Access to the locations will enhance delivery of services to the targeted populations.	☐	60

4.06 Demonstration of Support/Coordination of Service

1 ***(Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) -***

In the upload field below, provide a single-file scan of documented community support for the proposed project.

Evaluation/Review Criteria		Review	Points
a	Appropriate documentation of support is provided from each community in which the applicant proposes to provide services.	☐	60

2 ***(Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) - In the text box below, describe the ways in which the project planning process involved the public and potential service recipients.***

Evaluation/Review Criteria		Review	Points
a	The applicant's description demonstrates the involvement of the public and potential recipients of services in planning the project proposed.	☐	40

3 ***(Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) - In the text box below, describe partnerships or collaborations necessary to the proposed project. In the upload field below, provide a single-file scan documenting existing partnerships and collaborations specific to the proposed project.***

Evaluation/Review Criteria		Review	Points
a	Partnerships and collaborations necessary for the effective delivery of services are well described. Evidence specific to the proposed project is provided.	☐	60

4 (Group B- Program Implementation, Group C- Statewide Alcohol Prevention Alliance, Group A- Build Capacity) - In the text box below, describe the in-place or planned coordination with the State or other providers for referrals necessary to project success. Identify the project staff involved as well as the responsible positions at the referring agencies.

Evaluation/Review Criteria		Review	Points
a	The applicant's description demonstrates a clear understanding of the roles that must be performed by the applicant and by referring agencies for the effective delivery of services to the targeted population.	☐	60