



Virginia Department of Behavioral Health & Developmental Services

School-Based Mental Health Services Grant Program Fiscal Year 2022

Full Text of Announcement

I. Funding Opportunity Description

Purpose of Program: The School- Based Mental Health Services Grant Program provides competitive grants to Community Services Boards/Behavioral Health Authorities (CSBs/BHAs) and Non-profit Private Providers to provide mental health services to students with Serious Emotional Disturbance (SED) in local educational agencies (LEAs) with demonstrated need. SAMHSA defines SED as youth up to age 18 who have a diagnosable behavioral, mental, or emotional issue (as defined by the Diagnostic and Statistical Manual of Mental Disorders). This condition results in a functional impairment that substantially interferes with, or limits, the youth's role or functioning in family, school, or community activities.

Summary: The Department of Behavioral Health and Developmental Services (Department) is issuing grants to Community Services Boards/Behavioral Health Authorities (CSBs/BHAs) and Non-profit Private Providers for Substance Abuse and Mental Health Services Administration (SAMHSA) Mental Health Block Grant funds under the American Rescue Plan Act (ARPA) of 2021 beginning in fiscal year (FY) 2022 for the School-Based Mental Health Services Grant Program. Funding will be available through September 30, 2025.

Awards will be prioritized to CSBs/BHAs that meet the application requirements.

Dates:

Posting of Solicitation for Applications: **December 3rd, 2021**

Deadline for Applications: **January 13, 2022 no later than 5:00 pm.** Only complete applications will be accepted, any information that may come after the deadline will not be reviewed.

Submission Requirements: Submit via email to Pam Fisher at pamela.fisher@dbhds.virginia.gov

Pages must be typed in black, single-spaced, using a font of Times New Roman 12, with all margins (left, right, top, bottom) at least one inch each.

Background: The Substance Abuse and Mental Health Services Administration through the American Rescue Plan Act (ARPA) of 2021 has released funds to the Virginia Department of Behavioral Health and Developmental Services to assist communities dealing with mental

health and substance use challenges during the COVID-19 pandemic. From social isolation to family stress, youth's mental health needs have worsened during the pandemic. This has been especially true for youth with serious emotional disturbance who may not have been able to access other community-based treatments via telehealth or in-person during the pandemic. Mental health services that are offered in the school allow for the identification and treatment for youth with serious emotional disturbance (SED) using a person-centered approach to service location and delivery. Applicants must offer mental health screenings, functional behavioral assessments, and service interventions based on the screening and assessment results for students in the school setting. Additionally, a percentage of students served annually must be students of color, LGBTQ+, migrant, refugee populations or students of households that are experiencing socio-economic insecurities related to or exacerbated by the pandemic. Applicants may determine this percentage by submitting a Disparity Impact Statement or other demographic data with their application that supports the percent chosen. All services provided for this program must be trauma informed and culturally responsive.

Application Requirements: In its application, an applicant must describe the following:

- (a) **Severity and magnitude of the problem and how the applicant will identify and select LEAs with demonstrated need to be served by the proposed plan. (15 points)**

Applicants must describe the lack of school-based mental health services and its effect on students in the LEA(s) served by the grant. Applicants must also describe the nature of the problem for the LEA(s), based on information including, but not limited to, the most recent available ratios of service providers to students enrolled in the selected LEA(s), school-level demographic data, health equity data, school climate surveys, school violence/crime data, and data related to suicide rates or prevalence of mental health needs. **(5 Points).**

A description of the community which the LEA serves should demonstrate the need for mental health services for students including those from disparate, marginalized or socio-economically stressed families. One way to determine disparities in communities is through a Disparity Impact Statement of the selected community. SAMHSA provides an example of a Disparity Impact Statement at this link:

<https://www.samhsa.gov/sites/default/files/disparity-impact-statement-example-services.pdf> Based on data in your community that may or may not include a Disparity Impact Statement, the applicant must provide the percentage of students from marginalized or socio-economically stressed families they plan to serve annually. **(10 Points)**

Section Review Criteria

The Department will consider the need for the proposed project. In determining the need for the proposed project, the Department will consider the extent to which

specific weaknesses, gaps, or needs in services; infrastructure; or opportunities have been identified and will be addressed by the proposed project, including the nature and magnitude of those weaknesses, gaps, or needs. Additionally, the Department will consider the applicant's description of the need to serve students from disparate, marginalized or socio-economically stressed families.

(b) Project Services. (45 points)

The applicant must describe its approach to providing school-based mental health services. **Funds cannot be used for Therapeutic Day Treatment (TDT).**

The description should indicate how the approach taken under this program will update or expand on any previous approach and how such new approach will take into consideration the previous barriers. Applicants must outline the number of staff providing services, how often they will be in the school setting, how the referral process will work including how they will determine if a youth has SED, how soon students will receive services once identified, the screening and functional assessment tool or tools that will be used, how they will determine successful or unsuccessful discharge from services, and the school or schools where services will be provided. Describe the specific intervention service or services you will provide and the rationale for choosing to provide these services. **(20 points)**

Priority points will be given to applicants that propose to use evidence-informed or evidence-based practices. Suggested brief evidence-based interventions include Motivational Interviewing, Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), the Cognitive Behavioral Intervention for Trauma in Schools Program (CBITS) the Supports for Students Exposed to Trauma (SSET) Program, the Adolescent Community Reinforcement Approach (A-CRA), and the Youth Screening, Brief Intervention, and Referral to Treatment (Y-SBIRT). Additionally, for students and families with complex needs that require a flexible, multi-system, coordinated planning approach, Intensive Care Coordination using High Fidelity Wraparound (HFW) and peer supporters (Family Support Partners and/or Youth Support Partners) is recommended. If you choose an evidence-informed or evidence-based practice that is not listed here and you describe how it is appropriate for the population you plan to serve, then your application will still receive priority points. **(5 Points)**

The Title IV-E Prevention Services Clearinghouse describes Motivational Interviewing as a clinical process to help individuals identify reasons to change behavior and reinforces behavior changes are possible. It can be used with individuals or in a group setting with a range of target populations and for a variety of problems. Sessions are typically delivered over one to three sessions lasting 30 to 50 minutes and are often used prior to

or in conjunction with other treatment services. For more on Motivational Interviewing, click on this link: <https://motivationalinterviewing.org/>

Trauma Focused Cognitive Behavioral Therapy is a short-term treatment of between 12-25 sessions, 60-90 minute sessions each, divided approximately equally between youth and parent/caregiver. For more on the implementation requirements for Trauma-Focused Cognitive Behavioral Therapy click on this link: <https://www.nctsn.org/interventions/trauma-focused-cognitive-behavioral-therapy>

The Cognitive Behavioral Intervention for Trauma in Schools Program is a school-based cognitive behavioral therapy program that involves both group and individual interventions. It has been used with students in the 5th through 12th grades that have experienced or witnessed traumatic life events. The program generally consists of group sessions of 6-8 students each for one hour per week for ten weeks. It can also be modified to work with students experiencing crisis as a result of the COVID-19 pandemic. For more on the Cognitive Behavioral Intervention for Trauma in Schools Program and to access a free training e-book click on this link: <https://cbitsprogram.org/>

The Supports for Students Exposed to Trauma Program is based on the Cognitive Behavioral Intervention for Trauma in Schools Program, but can be implemented by non-clinical staff. It is a ten session hourly once per week group intervention for students aged 10 through 16. Information about the program and free training materials can be accessed at these links: <https://ssetprogram.org/>
https://www.rand.org/content/dam/rand/pubs/technical_reports/2009/RAND_TR675.pdf

The Adolescent Community Reinforcement Approach is a behavioral treatment that can be used for youth ages 12 to 18 years old with substance use disorders. The Adolescent Community Reinforcement Approach seeks to increase the family, social, and educational/vocational reinforcement to support recovery. The approach includes guidelines for three types of sessions: youth alone, parents/caregivers alone, and youth and parents/caregivers together. According to the youth needs and self-assessment of happiness in multiple life areas, clinicians choose from a variety of procedures that address, for example, problem-solving skills to cope with day-to-day stressors, communication skills, and active participation in positive social and recreational activities with the goal of improving life satisfaction and eliminating alcohol and substance use problems. For more information on the approach, click on this link: <https://www.chestnut.org/ebtx/treatments-and-research/treatments/a-cra/>

The Youth Screening, Brief Intervention, and Referral to Treatment (YSBIRT) is an evidence-based practice to prevent and reduce risky substance use among adolescents ages 12 to 18. The practice can be provided in the school setting and involves screening for determining the youth's risk of substance use or needs related to a substance use disorder, brief intervention to raise awareness if at risk of substance use or set goals for change, and referral to treatment if the youth is at a very high risk of substance use. For more about Youth Screening, Brief Intervention, and Referral to Treatment, go to this link: <https://www.ysbirt.org/>

High Fidelity Wraparound is a team-based, collaborative planning process for developing and implementing individualized care plans for children with behavioral health challenges, and their families. Team meetings may occur in the school setting if this meets the youth and family's needs. High Fidelity Wraparound is an evidence-based process driven by ten principles, four phases and a theory of change. The process has four goals: To meet the stated needs (not services) prioritized by the youth and family, to improve the youth/family's ability and confidence to manage their own services and supports, to develop or strengthen the youth/family's natural support system over time, and to integrate the work of all child-serving systems and natural supports into one streamlined plan. **Since it is a care planning process, High Fidelity Wraparound can be practiced in conjunction with service interventions based on the family's needs and preferences.** For more on the implementation requirements for High Fidelity Wraparound click on this link: <http://www.systemofcare.virginia.gov/highFidelityWraparoundIndex>

Applicants must describe their crisis response plan for students that are actively in crisis i.e. experiencing suicidal thoughts, threatening harm to self or others, domestic violence, homelessness, reports of child abuse/neglect. **(5 points)**

Applicants must provide the number of students they propose to serve annually (minimum requirement is 50 youth per year) including a percentage of students of color, LGBTQ+, migrant, refugee populations or students of households that are experiencing socio-economic insecurities related to or exacerbated by the pandemic. Provide a description of the outreach efforts that will occur including outreach to disparate and marginalized families in the community. Additionally, describe how families will be informed about the services. Priority will be given to applicants that are able to provide innovative strategies for outreach to families that have traditionally experienced barriers to services such as transportation or lack of technology. **(5 points)**

Applicants must outline how they will provide culturally and linguistically appropriate services for students of color, LGBTQ+ identified students, or that are from migrant, refugee, Appalachian or socio-economically stressed populations. The Office of Minority

Health defines culturally and linguistically appropriate services as those that are respectful of and responsive to the health beliefs, practices, and needs of diverse consumers. Applicants must also outline how they will provide trauma-informed services. SAMHSA defines trauma as events or circumstances experienced by an individual as physically or emotionally harmful or life threatening which result in adverse effects on the individuals functioning and well-being. Trauma informed services are those that are provided with an awareness of the effects of trauma on individual lives.

(6 points)

Applicants must describe how project funds will supplement, and not supplant, funds that would otherwise be available for activities funded under this program. Applicants must describe how they will use the School-Based Mental Health Services Grant Program funds to expand, rather than duplicate, existing, ongoing, or new efforts in LEA(s) with demonstrated need and how the plan will integrate existing funding streams and efforts to support the plan. **(4 points)**

Section Review Criteria

The Department will consider the quality of the services to be provided by the proposed project. In determining this, the Department will consider the extent to which the services proposed by the project are likely to alleviate mental health challenges for students with serious emotional disturbance. In addition, the Department will consider the quality and sufficiency of strategies for ensuring equal access and treatment for eligible project participants who are members of groups that have traditionally been underrepresented based on socio-economic status, race, color, national origin, gender, age, or disability.

(c) Project Personnel (10 points)

Applicants must describe the qualifications of key project personnel, including education, experience, and relevant training. Additionally, if consultants or subcontractors are employed for the project, applicants must describe the education, experience, and/or relevant training of these project partners. **(5 points)**

Priority will be given to applicants that make an effort to hire key project personnel, consultants or subcontractors from populations that are similar to the student populations they plan to serve, i.e. members of populations in their communities that have traditionally been underrepresented based on socio-economic status, race, color, national origin, gender, age, or disability. **(5 points)**

Section Review Criteria

The Department considers the quality of the personnel who will carry out the proposed project. In determining the quality of project personnel, the Department considers the

education, experience and relevant training of project personnel, consultants or subcontractors. Additionally, the Department will consider the extent to which the applicant encourages applications for employment from persons who are members of populations in their communities that have traditionally been underrepresented based on socio-economic status, race, color, national origin, gender, age, or disability.

(d) Partnerships and Resources (10 points)

Applicants must describe the existing collaborative structure in place with the selected LEA(s) [e.g. current partnership agreements; communication structures] and describe in detail how the CSB/BHA or non-profit private provider will collaborate with school-employed mental health providers, such as school counselors, school psychologists and school social workers to implement the proposed service. The description should include the plan for information sharing with consideration to applicable confidentiality and privacy laws. Also, describe how the school staff will know about the mental health services you plan to provide and how you will educate them in identifying students that may need services. Applicants must include letters of commitment from each participating LEA, signed by the school division superintendent or the principal of each school where services will be provided. **Proposals will not be reviewed without letters of commitment. (5 points)**

The applicant must provide a plan for continued support of the project after grant funding ends, including funding source or sources, and as appropriate, the demonstrated commitment of appropriate entities to support sustainability. **(5 points)**

Section Review Criteria

The Department will consider the adequacy of partnerships and resources for the proposed project. In determining this, the Department will consider 1) the relevance and demonstrated commitment of each partner to the implementation and success of the project, including required commitment letters from each LEA where the applicant proposes to provide mental health services; 2) the plan for continued support of the project after the grant funding ends, including fund sources and as appropriate, the demonstrated commitment of appropriate entities to support sustainability.

(e) Detailed project budget and other support (10 points).

The applicant must provide a detailed project budget and narrative justification of the items included in the proposed budget, as well as a description of existing resources and other support you expect to receive for the proposed project. Other support is defined as funds or resources, whether federal, non-federal or institutional, and indirect costs. The indirect cost rate limit is 10% unless your agency has a negotiated rate with the

federal government. If you have a negotiated rate, you must provide your indirect cost rate agreement letter with your application. Include a line-item budget for one-time costs. Funds cannot be used for vehicles, construction, and any renovation. **Applicants must use the budget template located in Appendix A of this document. Please provide an annual budget for each year of the grant.** The first year will not be a full year so funds will likely be at a reduced rate the first year. For Years 2-4 the annual budget must be the same each year. The federal fiscal year begins October 1 and ends September 30 of each year.

The Department will consider the appropriateness of the detailed project budget in terms of reasonableness of the costs relative to the project description and narrative justification.

(f) Provider is a CSB/BHA (10 points)

Priority will be given to those applicants that are CSBs or BHAs

Optional Information (not included in the total page count)

Options for provision of student mental health services via secure telehealth services.

The applicant must describe the steps it will take in order to ensure that any service using telehealth services does so in a manner consistent with the Family Educational Rights and Privacy Act (FERPA) and the Individuals with Disabilities Education Act (IDEA), as well as all applicable Federal, State, and local laws and ethical obligations and ethical requirements and profession-specific ethical obligations. The description of the provision of telehealth mental health services to students must also include proposed methods to ensure equitable access and compliance with applicable privacy requirements (including FERPA and IDEA), and identify proposed technology platforms, and plans for the collection, maintenance and use or sharing of any Personally Identifiable Information (PII) and student data.

II. Evaluation Plan and Reporting

1. The following Evaluation Plan components are required so that the Department can evaluate the success of the project:
 - a. The numbers of youth served through screenings, functional behavior assessments, and intervention services. A minimum of 50 youth should be served annually.
 - b. The numbers of youth discharged from services including the reasons for discharge and how many of these were determined to be successful discharges.

- c. For CSBs/BHAs: The DLA-20 score initial, at 6 months after service begins, and at discharge from services. Any other requirements related to the CSB's licensing requirement must also be completed.
 - d. For Private Providers: The DLA-20 score initial, at 6 months after service begins, and at discharge from services.
 - e. Satisfaction surveys from parents, caregivers, and/or students at the conclusion of services (survey to students should be provided to those that are 12 years or older). **Applicants must use the Parent/Caregiver Survey located in Appendix D and the Student Survey located in Appendix C of this document.**
 - f. Satisfaction surveys from the school(s) and other community partners yearly. **Applicants must use the School Staff/Community Partner Survey located in Appendix B of this document.**
 - g. **Non-cash** incentive payments, **with a value of no more than \$30**, may be offered to youth and families completing data reporting and satisfaction surveys. **Incentive payments are not allowed for families to participate in outreach events, mental health treatment or prevention services.**
2. Awarded applicants will be required to provide a progress report to the Department two times per year on March 31 and September 30 throughout the project that include the above components of the Evaluation Plan. At the end of the project, awarded applicants will be required to share a final report with the Department that demonstrates the outcomes of the project. The report must use tables and graphs to show the initial measures and measures throughout the project. It should also include an interpretation of the results, strengths and weaknesses of the school-based program, and recommendations for program improvement.

III. Award Information

Type of Award: Discretionary grants.

Estimated Available Funds: \$6,800,000 through September 30, 2025. Awards will be for approximately six months the first year, therefore the funded award will be reduced the first year.

Contingent upon the availability of funds and the quality of applications, we may make additional awards in subsequent years from the list of unfunded applications from this competition.

Estimated Range of Awards: Up to \$340,000 per year. Budgets that request the maximum award must serve multiple schools.

Estimated Number of Awards: 5-10

Note: The Department is not bound by any estimates in this notice.

Funds must be expended by September 30, 2025

III. Application Review Information

1. Selection Criteria: The maximum score for all selection criteria is 100 points. The points assigned to each criterion are indicated in parentheses.
2. Page limit: Application not to exceed 10 pages. Commitment letters, project budget, and option for telehealth description are not included in the page limit. A budget and justification template is included in Appendix A. All applicants must use this budget template in order to be reviewed. Pages must be typed in black, single-spaced, using a font of Times New Roman 12, with all margins (left, right, top, bottom) at least one inch each.
3. **Applications due by 5:00 pm on January 13, 2022.** Submit via email to Pam Fisher at pamela.fisher@dbhds.virginia.gov
4. Selection Review: The selection review committee will include staff from both the Department of Behavioral Health and Developmental Services and the Department of Education.
5. Review and Selection Process: We remind potential applicants that in reviewing applications in any discretionary grant competition, the Department may consider, the past performance of the applicant in carrying out a previous award, such as the applicant's use of funds, achievement of project objectives, and compliance with grant conditions. The Department may also consider whether the applicant failed to submit a timely performance report or submitted a report of unacceptable quality. We also reserve the right to consider any current or past licensing violations when reviewing and selecting applicants.

VI. Award Administration Information

1. Reporting:
 - (a) If you apply for a grant under this competition, you must ensure that you have in place the necessary processes and systems to comply with the reporting requirements.
 - (b) Equipment is a single item of tangible, nonexpendable, personal property that has a useful life of more than one year.
 - (c) At the end of your project period, you must submit a final performance report, including financial information, as directed by the Department.

FOR FURTHER INFORMATION ABOUT THIS REQUEST FOR APPLICATIONS CONTACT: Pam Fisher at pamela.fisher@dbhds.virginia.gov

Appendix A: Budget and Justification Template

A. Personnel: Provide employee(s) of the applicant organization, including in-kind costs for those positions whose work is tied to the grant project.

Position	Name	Annual Salary/Rate	Level of Effort	Cost
(1) Project Director	John Doe	\$64,890	10%	\$6,489
(2) Grant Coordinator	To be selected	\$46,276	100%	\$46,276
(3) Clinical Director	Jane Doe	In-kind cost	20%	\$0
(4) Screener	To be selected	\$30,550	100%	\$30,550
			Total	\$83,315

Sample Justification: Describe the role and responsibilities of each position.

- (1) The Project Director will provide daily oversight of the grant and will be considered staff.
- (2) The coordinator will coordinate project services and project activities, including training, communication and information dissemination.
- (3) Clinical Director will provide necessary guidance to staff for 200 clients served under this project.
- (4) Screener conducts all school based screening

B. Supplies and Equipment: Supplies are items costing less than \$5,000 per unit (federal definition), often having one-time use. Equipment is a single item of tangible, nonexpendable, personal property that has a useful life of more than one year. The justification must include an explanation of the type of supplies and equipment to be purchased and how it relates back to meeting the project objectives.

Provide the following information for the narrative and justification:

1. **Items** – list supplies by type, e.g., office supplies, postage, laptop computers.
2. **Calculation** – describe the basis for the cost, specifically the unit cost of each item, number needed and total amount.
3. **Supply Cost Charged to the Award** – provide the total cost of the supply items to be charged to the award during the budget period.

Item(s)	Rate	Cost
General office supplies	\$50/mo. x 12 mo.	\$600
Laptop Computers	2 x \$900	\$1,800
Printer	\$300	\$300
Copies	8000 copies x .10/copy	\$800
Furniture	\$1000	\$1000
Total		\$4,500

Sample Justification for Supplies and Equipment

1. Office supplies, copies and postage are needed for general operation of the project.
2. The laptop computers and printer are needed for both project work and presentations for Project Director.
3. The furniture includes a desk and desk chair for the screener.

C. Travel: Explain need for all travel other than that required by this application. Local travel policies prevail.

Purpose of Travel	Location	Item	Rate	Cost
(1) Regional Training Conference	Chicago, IL	Airfare	\$150/flight x 2 persons	\$300
		Hotel	\$155/night x 2 persons x 2 nights	\$620
		Per Diem (meals)	\$46/day x 2 persons x 2 days	\$184
(2) Local Travel	Outreach workshops	Mileage	350 miles x .38/mile	\$133
			TOTAL	\$1,237

JUSTIFICATION: Describe the purpose of travel and how costs were determined.

1. Grantees will provide funding for two members to attend the regional technical assistance workshop (our closest location is Chicago, IL).
2. Local travel rate is based on agency's POV reimbursement rate. If policy does not have a rate use GSA.

Total Request	
A. Personnel	\$83,315
B. Supplies and Equipment	\$4,500
C. Travel	\$1,237
Total	\$89,052

Appendix B: School Staff/Community Partner Survey

School Staff Survey	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
I value having mental health services available in the school building.					
I am satisfied with the support provided to students through the mental health services.					
There is a clear process in place to refer students in need of mental health services to a mental health provider.					
I am more mindful of student mental health needs.					
I am more aware of mental health services available in the school setting.					
I am able to communicate with the mental health provider easily when needed.					

Appendix C: Student Survey

Student Survey	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
I got school mental health services that were helpful to me.					
Staff spoke to me in a way that I understood.					
I felt safe in the places I received school mental health services.					
I could get school mental health services when I needed them.					
Because of school mental health services					
I am better able to cope when faced with challenges.					
I am doing better in school.					
I am more hopeful.					

Appendix D: Parent/Caregiver Survey

Parent/Caregiver Survey	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
I am satisfied with the support my child received from the school mental health services.					
Mental health services staff communicated with me in a way that was easy to understand.					
During my discussions with the mental health staff, I felt safe to say everything I thought was important.					
It was easy for my child to get mental health services at the school.					
Since receiving school mental health services					
My child is more interested in going to school.					
My child's relationship with the teacher (or teachers) has improved.					
My child's relationships with other students have improved.					
My child's grades have improved.					