

REQUEST FOR INFORMATION REGIONAL CLINICAL COORDINATOR WEST VIRGINIA SYSTEM OF CARE

INTRODUCTION

The Bureau for Children and Families in partnership with the Bureau for Behavioral Health and Health Facilities is collaborating to adopt a statewide "WV System of Care". A statewide planning process for implementation began August 2006. The initiative originated from the outcomes achieved in the "Child Mental Health Initiative (Region II)", funded by the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA) grant. In recognition of the efforts and recommendations of the West Virginia System of Care Collaboration (Call to Action, 2004), we believe it is time to focus our experiences, lessons learned, and successes, in developing a child and family focused, community-driven blueprint for system improvement.

The legislation (HB 2334) which passed in 2005 mandated the DHHR to establish a Commission to study the "Residential Placement of Children", to work across agency boundaries, and to examine practices, policies and funding processes of every agency that serves youth at risk of out of home care. The Commission's studies and discussion resulted in a May 2006 recommendations report titled "Advancing New Outcomes" that provides a clear directive to begin work on a statewide, community based System of Care Approach. This report can be found at <http://www.dhhr.org/bcf/documents/reports/-NewOutcomesfinalreport5-19-06.swf>. As a result of the work of the Commission, an Implementation Team has been established to carry out the recommendations.

On behalf of the Implementation Team, we believe that no "one agency" approach can meet the needs of its consumers, and it requires cross-agency pooled resources and support to maximize its effect. The establishment of a State Implementation Team to carry out the recommendations of the Commission represents an important step in tackling the policy, funding and cross-agency planning challenges to successfully provide education, services and support to our most vulnerable children. This team understands the importance of community ownership, collaboration, family voice, and the continual commitment and support it will take to achieve such a goal. It is the intent of the State Implementation Team to partner with each DHHR region and work collectively to develop a sustainable system of care.

Funding has been set aside to address specific activities in the planning and development of a comprehensive, integrated, community-based WV System of Care for youth at risk of out-of-home/state placement and their families. This proposal will address the development of the regional clinical coordination for children/adolescents at risk of out-of-state placement and children in out-of-state placement in Region I, III, and IV. This proposal is based upon the Commission's recommendation that each region defined by DHHR will establish a regional gate keeping process for children at risk of out-of-state placement (Recommendation #6). This team will be developed and will provide resources and clinical expertise to the individual multi-disciplinary team (MDT) for any child/adolescent at risk of out-of-state placement and for those children in out-of-state placement at specific junctures during their placement. Each team will have a clinical resource coordinator who will provide support, facilitate monthly meetings, collect data, provide monthly reports, and communicate with the regional clinical assessment team and community partners on a regular basis.

DESCRIPTION OF PROPOSAL

This proposal is for a Regional Clinical Coordinator in Region I, III, and IV. Each Coordinator will serve within the identified region and provide duties that will support the development of the regional clinical assessment team. These individuals will work directly with the WV System of Care project director.

- Region I: Brook, Calhoun, Doddridge, Gilmer, Hancock, Harrison, Marion, Marshall, Monongalia, Ohio, Pleasants, Ritchie, Tyler, Wetzel, Wirt, Wood
- Region III: Barbour, Berkeley, Grant, Hampshire, Hardy, Jefferson, Lewis, Mineral, Morgan, Pendleton, Preston, Randolph, Taylor, Tucker, Upshur
- Region IV: Braxton, Clay, Fayette, Greenbrier, McDowell, Mercer, Monroe, Nicholas, Pocahontas, Raleigh, Summers, Webster, Wyoming

The applicant must understand that the Regional Clinical Coordinator will work with regional partners to develop a regional clinical assessment team, provide day to day support, assist local DHHR offices with children at risk of out-of-state placement and to develop appropriate discharge plans for children targeted to return from out-of-state placement.

Following is guidelines that the applicant is will adhere to if selected:

1. The applicant will be the fiscal agent. The applicant will provide administrative oversight of the approved funding and maintain any information necessary for fiscal reporting and client case records.
2. The applicant must provide direct services (treatment, case management, etc) within the selected region.
3. The applicant will hire and employ one Regional Clinical Coordinator (see job description attached) that lives and works within the region's geographic area. The Regional Clinical Coordinator will be placed in a location that will meet the needs of the region.
4. The applicant will include the WV System of Care project director and a selected review team in the hiring and selection process.
5. The applicant will provide administrative supervision (in-service training, work hours, leave time, agency compliance, etc). The day-to-day oversight of the duties will be outlined between the applicant and the WV System of Care project director. A letter of understanding between the applicant and WV System of Care Project Director will be developed.
6. The applicant will ensure the Regional Clinical Coordinator will receive agency required training and attend all required System of Care training. System of Care core training includes: Family Centered Practice, Solving the Puzzle of Child-Adolescent Diagnosis, WV System of Care, Marshalling the Troops, Wrapping Resources around Families, Youth Advocate Curriculum, and CANS.
7. The applicant will ensure that the data is shared with the Regional Children Summit and/or Community Collaborative Teams, Regional System of Care Oversight Team, etc.
8. The applicant understands that the Regional Clinical Coordinator will adhere to the best interest of the child and their family and will seek services and supports from the most appropriate service provider.

PROPOSAL FORMAT

The following information is required from agencies/organizations that wish to apply for these funds. **The contents of the proposal, including the budget and budget narrative, cannot exceed 10 pages and must be double spaced.** (attachments are not included in the 10 pages)

Organizational Capability

Include information about the applicant's ability to develop and support this project by addressing the following:

- Describe in one paragraph why your agency should be considered and selected.
- What is the history of this agency/organization?
- What type of services is provided by your agency?
- Who will be responsible for the fiscal oversight and supervision of the clinical resource coordinator? What are their qualifications? Does the agency have the organizational capacity to provide the fiscal and supervisory duties?
- Are you a licensed Behavioral Health Provider? Are you in good standing?
- Are you in good standing with Workers Compensation, Unemployment, and provider tax?
- What additional/other licenses and certifications does your agency possess?

Community Partnerships

- Describe how your agency collaborates with other agencies within your region?

- Please list any community teams or networks that your agency actively participates in to better the delivery and services for children and their families (such as: Regional Summit, Community Collaborative, FRN, etc)

Work plan

- The plan to hire, select, and train the Regional Clinical Coordinator will be developed between the applicant and WV System of Care Project Director within 30 days of funding award.

Budget

- Applicants must consider this a specialized project and adhere to salaries and travel reimbursements outlined in the job description. Complete an operating budget and budget narrative that includes the following:
 - Salary
 - Fringe Benefits (cannot exceed 30%)
 - Travel (44.5 cents per mile)
 - Staff Development (listed above)
 - Supplies
 - Equipment
 - Indirect cost (cannot exceed 10%)
 - In-kind contributions such as office space, usage of copier or other agency equipment, etc.

Attachments

Please include the following:

- Cover Sheet (attached) signed by an authorized official
- Proof of non-profit or for-profit status

Deadline

- **Proposals must be postmarked no later than October 15, 2006 for consideration. No faxed or emailed proposals will be accepted.**
- **Interested applicants can email questions to Linda Watts at linda.watts@prestera.org from September 14-20, 2006. Questions will be answered by September 25, 2006 and posted on the following website:www.orgsites.com/wv/msfa**
- **Mail proposals to:**

**WV System of Care
Attention: Linda Watts, Project Director
940 4th Avenue, Suite 335
Huntington WV 25701.**

- **The WV System of Care Implementation Team will select a team to review the proposals. All applicants will receive notification of their decision, no later than November 3, 2006.**