PROPOSAL SUBMITTAL FORM

Agency Information

Agency Name: The Methodist Home of Kentucky

Mailing Address: 1115 Ashgrove Road, Nicholasville, KY 40356

Street Address: 1115 Ashgrove Road, Nicholasville, KY 40356

Phone: (859) 523 - 3001

Is your Agency registered with the IRS as a 501(c)3 organization? ☑ Yes ☐ No

*Note: Agencies **must** be registered with the IRS as a 501(c)3 organization to be eligible for ESR Program funding.*

Does your agency have a current profile with Blue Grass Community Foundation's GoodGiving.net? ☑ Yes ☐ No

*Note: Agencies **must** have profiles with GoodGiving.net to be eligible for ESR funding.*

Website Address: www.kyumh.org

Agency Representative *(typically the Executive Director - Name, Title, Phone, Email)*:

Randy A. Coy, President/CEO, 859.523.3001, Randy.Coy@kyumh.org

Person Completing Application *(Name, Title, Phone, Email):*

Rachel Smith, Director of Community-Based Programs, rachel.smith@kyumh.org, 859-813-0569

Program Information

Name of program for which funds are being requested: **Mending Point Behavioral Health**

Total Funding Amount Requested: $ **206,155**

RFP #11-2019 PROPOSAL SUBMITTAL FORM

- **Save this PDF formatted Proposal Submittal Form to your hard drive before beginning to enter responses in it to ensure your responses are saved to the form.**
- **LIMIT RESPONSES IN TEXT BOXES TO 250 WORDS**
- **REMINDER: All proposals must be written in a clear and concise manner, as there will be no follow-up or clarifications to proposer's submittal form once the evaluation process begins.**

5.1 Program Proposal & Design

5.1.1 Needs Statement—Purpose of the Program Proposal / Problem Statement **15 Points**

Using local data, provide a description of the problem in Fayette County. Identify the specific population your program is targeting (i.e. age, geographical region, economic status, etc.) and explain why. Discuss whether this population is under-served or at-risk. Describe your understanding of the local system of services addressing this problem, obstacles and/or opportunities your clients face, and how your agency fits within this system of services.

There is great need for accessible home and community-based mental health and substance abuse treatment services for adolescents in the Fayette County area. Adolescent substance use is a major public health problem. Based on Substance Abuse and Mental Health Services Administration (SAMHSA) prevalence estimates, as many as 24,000 youth in Kentucky meet criteria for illicit drug use and at least 35,000 youth meet criteria for alcohol use. Of those, approximately 13,000 and 10,000, respectively, meet criteria for illicit drug or alcohol dependence. The National Survey on Drug Use and Health, lists Kentucky in the top ten states in several drug-use categories for ages 12 and older: past-year non-medical use of pain relievers; past-month use of illicit drugs other than marijuana; and illicit drug dependence. According to KY Administrative Office of the Courts in 2015, a total of 3,690 drug/narcotic arrests were made in Fayette County alone. The Kentucky Office of Drug Control Policy estimates that in 2017, 75 Kentucky residents between the ages of 5 and 24 died in overdose-related incidents. In Fayette County in 2017, there were 42 heroin-related overdose deaths and 112 fentanyl-related overdose deaths; making Fayette County in the top five counties for heroin and/or fentanyl-related deaths, per capita, in 2017. In 2017, Fayette County's overdose fatalities increased by 49, from 74 deaths in 2016. Obstacles for many of these youth are limited services and cost. Addiction treatment can range from $10,000 - $30,000. Mending Point Behavioral Health (formerly Next Step & Restore Hope) is an innovative model addressing the treatment challenges faced by adolescents and their families.

5.1.2 Service Delivery Model **15 Points**

What steps will you take or what activities will you provide to assist clients in achieving these goals? Describe each "unit of service" you will provide for clients and how often and how long this service will be provided (e.g. a one-time three-hour training; a weekly one-hour support group for 12 weeks; one 30-minute health exam twice a year; 1-3 hour advocacy services as needed; etc.) How will these services address the problem as identified in the Needs Statement above? Be specific.

Mending Point Behavioral Health (formerly Next Step & Restore Hope) offers a comprehensive array of services designed to address the multiple levels of care and need outlined in our Problem Statement:
-Initial and continued multi-dimensional assessment identifying specific issues helps guide families and staff in developing effective treatment plans and determining appropriate course of treatment from the menu of options below:
-Substance Use and Co-Occurring Disorder Outpatient Program - Using Motivational Enhancement and Cognitive Behavioral Therapy, this program offers group, individual, and family counseling. Services are not time limited and are open groups to join when needed.
-SMART Recovery - an on-going group designed for youth who have completed an outpatient substance abuse program or residential treatment program. Groups meet weekly.
-Strengthening Families Program (SFP) - a nationally/internationally recognized parenting/family strengthening program for high-risk and general population families. SFP is an evidence-based family skills training program designed to improve parenting skills and family relationships, reduce problem behaviors, delinquency and alcohol and drug abuse in children and improve social competencies and school performance.
-Individual and Family Therapy - Individual and family therapy provided by Master's level therapists experienced in substance abuse treatment, mental health treatment, child and adolescent development, and family dynamics. The recommended unit of service is 12 weeks.
-Targeted Case Management - planning and coordinating health and social services individualized to meet a client's needs. Targeted Case Management services are not limited while receiving services and are available throughout the continuum as well as 6 months post-discharge from any of the services available above.

5.1.3 Client Eligibility and Requirements **5 Points**

What eligibility requirements must clients meet to qualify for services? What are the expectations of clients while receiving services? (e.g. client must pay $30 fee for each class; client must remain sober; client is responsible for chores; nothing other than participation in services; etc.)

We offer outpatient individual and family therapy, substance abuse services, support/skills-based groups, targeted case management, and comprehensive treatment plans for youth ages 12-21 who live with substance abuse and mental health/behavioral disorders. There are no eligibility requirements to qualify for services beyond having alcohol or drug use or dependence issues. We only expect clients to be participating in services. With substance abuse, we understand there will be setbacks. We simply want our clients to have the desire to gain freedom from the negative effects of untreated substance use and mental health disorders.

5.1.4 Evidence-Based/Best Practice **10 Points**

Describe the evidence-based or promising practice model on which this service approach is based. Provide particular sources that indicate what you are doing is best-practice.

Mending Point Behavioral Health uses Motivational Enhancement Therapy and Cognitive Behavioral Therapy, SMART Recovery, Strengthening Families Program, and the ASAM criteria. MET/CBT effectively combines Motivational Enhancement Therapy (MET) and Cognitive-Behavioral Therapy (CBT). This treatment method provides ways for clients to find motivation to change, training tips for building necessary skills to increase social support, how to engage in non-drug related activities, and avoidance and coping mechanisms to deal with potential relapse issues. MET/CBT is beneficial for adolescents due to its less directive, non-confrontational approach in teaching coping skills. It also incorporates the power of peer influence into group sessions. MET/CBT are listed as evidence-based practices by SAMHSA and are listed with the National Registry of Evidence-Based Practices and Policies (NREPP).

SMART Recovery is the leading self-empowering addiction recovery support group. Participants learn tools for addiction recovery based on the latest scientific research. SMART Recovery is a recognized resource for substance abuse and addiction recovery by the American Academy of Family Physicians, the Center for Health Care Evaluation, the National Institute on Drug Abuse (NIDA), US Department of Health and Human Services, and the American Society of Addiction Medicine (ASAM).

The ASAM Criteria, formerly known as the ASAM patient placement criteria, is the result of a collaboration beginning in the 1980s to define one national set of criteria for providing outcome-oriented and results-based care in addiction treatment. The ASAM Criteria is the most widely used and comprehensive set of guidelines for placement, continued stay and transfer-discharge of patients with addiction and co-occurring conditions.

5.2 Program Measures & Evaluation

5.2.1 Service Efficacy & Desired Outcomes **10 Points**

What do you hope to help your clients achieve? What are some examples of goals you will set with clients? What is your service philosophy in terms of helping your clients achieve these goals? Describe how you define "successful" completion of services. (e.g. service is complete if: client remains for entire three-hour training; client continues services until judge orders otherwise; etc.) What percentage of clients meet that criteria for success?

Mending Point Behavioral Health (formerly Next Step & Restore Hope) provides community-based assessment, education, case management, treatment, prevention and aftercare services to youth ages 12-21 who live with substance use and any co-occurring behavioral/mental health disorders. Our program is unique because we can go to client rather than requiring them come to us—eliminating transportation barriers and allowing us to witness the client in their own environment. By empowering our clients with resources and tools, we help them achieve freedom from the effects of harmful substances and severe mental illness. Clients learn functional methods of coping and move towards abstinence from mood/mind altering substances. With an emphasis on teaching more adaptive social and emotional strategies, some examples of goals we set in collaboration with our clients include:

-Learn skills needed to achieve a drug free lifestyle.
-Learn to express negative feelings effectively.
-Develop a positive commitment to sobriety.
-Develop healthy lifestyle practices including nutrition, exercise, and sleep hygiene.
-Learn to tolerate uncomfortable feelings without using chemicals or unhealthy coping mechanisms.
-Learn to share positive feelings with others.
-Develop the skill to effectively ask for what is wanted or needed.
-Learn healthy communication skills.

To help clients achieve these goals, the service philosophy of Mending Point Behavioral Health represents the greater mission of the Kentucky United Methodist Children's Homes to provide for the physical, emotional, educational, and spiritual needs of youth and families. To this end, we offer exceptional treatment services that are progressive and relevant to the needs of the community.

5.2.2 Client Empowerment & Community Impact **10 Points**

Describe what meaningful difference these services make in the lives of people served. What value is added to the community? Provide examples. (e.g. client demonstrates change in attitude; client has behavior change; etc.)

Despite its modest size, Mending Point Behavioral Health (formerly Next Step and Restore Hope) has served over 350 youth and families since the programs began. The meaningful difference that our services make is to empower the youth and families we serve to develop the tools and strategies needed to live more fully in their lives, free from the debilitating effects of harmful substance use and untreated mental illness and trauma. Mending Point makes a meaningful difference in the lives of people served each day by increasing their resiliency, promoting their dignity and worth, and revealing the capacity for recovery that lies within each person who struggles with substance use and mental illness. Abstinence from mood and mind altering substances is attainable for those who participate in the services offered by Mending Point. With the cost of inpatient substance use and mental health treatment in Kentucky reaching staggering new highs, the availability of more cost effective community-based treatment services is paramount and easily demonstrates a meaningful difference in every life touched. The value added to the community through the efforts of Mending Point treatment services is demonstrated by youth and families having access to sustainable and affordable treatment, by youth demonstrating renewed ability to successfully attend to and complete their educational programs, and the increased wholeness of the families which in turn enhances the health of the community as a whole.

5.2.3 Data Assessment & Quality Improvement **10 Points**

While it doesn't have to be complicated, evaluation is more than saying "we provided this many 'units of service.'" How will you know if your services have been effective? How does this relate to the desired outcomes for your clients? How will the information gathered be used to improve your services in the future? Be specific (for example, data collection may be through focus groups, pre-and post-tests, client satisfaction surveys, etc.), and also **be specific regarding sampling size and frequency of evaluation.**

Mending Point Behavioral Health measures the effectiveness of its services through regular collection of measurable outcome data, using evidence-based practices, providing satisfaction surveys to all program participants, and the demonstrated successes of its participants who achieve meaningful improvements. The desired outcome for each person served is embracing abstinence, although we recognize that for some who find abstinence unattainable at this time reducing their use of harmful substances can be an effective and meaningful alternative.
The frequency of evaluation and data collection is quarterly. Client satisfaction surveys are offered to each program participant and these represent our sampling size.
Data collected measuring effectiveness is based on the following inquiries:
-Did the participant actively engage in the services offered to them? Goal: minimum of 75% of all participants successful
-Did the participant achieve active recovery from using substances while participating in the program? Goal: minimum of 50% of all participants successful.
-While in the program, did the youth able to successfully participate in their educational or work setting (if applicable) as evidenced by lack of suspension, expulsion, school referrals, work write-ups, and sustained employment? Goal: minimum of 75% of all participants successful.
- Did the participant achieve sustained recovery as evidenced by not relapsing for a period of 30 days? Goal: minimum of 50% of all participants successful.
-Did the participant demonstrate an overall increased level of functioning as evidenced by achieving improvement on evidence-based assessments? Goal: minimum of 75% of all participants successful.

5.3 Capacity & Sustainability

5.3.1 Staff Qualifications & Experience **5 Points**

Provide information on the key/primary individuals that will be involved in the provision of services and demonstrate that they have the capacity to address the stated need. List each position by title and name of employee, if available. Describe the anticipated roles and responsibilities for each person as it relates to this project. Describe the experience, expertise, and capacity of each individual to address the proposed activities.

Mending Point Behavioral Health offers staff expertise in the areas of substance abuse treatment and co-occurring disorders and accompanying psychosocial stressors. The program is under the overall direction of the Director of Community-Based Programs, Rachel Smith, LPCC, TCADC. Under the Director of Community-Based Programs are two full-time Master's level therapists (1 CSW, and 1 LPCA working toward independent clinical licensure) who carry out the therapeutic services delivered in the multidimensional assessment, substance use disorder program, co-occurring disorder program, SMART Recovery, Strengthening Families Program, and individual, family, and group therapy. The Director and the two Master's level clinicians are all trained in MET, CBT, SMART Recovery, Strengthening Families, and the ASAM Criteria. There are three bachelor's level staff who conduct targeted case management (TCM) services. The two Targeted Case Managers are all trained in the 12-hour TCM Core, 6-hour Substance Use Disorder (SUD) sub-training, 6-hour Severe Emotional Disturbance (SED) sub-training, and the 6-hour Severe Mental Illness (SMI) sub-training. All case managers are registered with the Department of Behavioral Health, Developmental and Intellectual Disabilities' (DBHDID) Training Records Information System (TRIS). The Director of Community-Based Programs is supervised by the Director of Clinical Services, Caitlin Bryant, LCSW. All therapists and case managers cover Fayette County.

5.3.2 Partnership & Resource Leverage **5 Points**

How do your programs and services support our community's comprehensive response to the identified priority area of Community Wellness & Safety? Does your organization have any formal agreements or informal working relationship with other local service programs?

What role does your governing board members, volunteers, and / or donors play in facilitating viable service delivery and program administration? Does your program have any major civic benefactors or corporate sponsors? Describe other secured funding sources and committed operational resources your organization has allocated for the proposed program.

We work collaboratively with other service providers to provide comprehensive services tailored to the individual needs of those served. For example: When a youth is mandated to complete substance abuse or mental health treatment, our program works closely with them and their Court Designated Worker or other designated official to satisfactorily meet the requirements of the court or the mandating agency. We work with middle schools, high schools, and alternative schools to respond to the needs of students identified as engaged in risky behaviors related to substances, mental health, and/or trauma.
Mending Point is one of only three providers in Fayette County who offer community-based substance abuse and behavioral health services to youth. We offer assistance with transportation to clients and families, as well as a crisis support line providing access to recovery support and crisis management 24 hours per day, 7 days per week.
Some of our partners: -Department of Juvenile Justice;-Department of Community Based Services; UK Adolescent Clinic;-Bluegrass Comprehensive Care; KVC Behavioral Health; The Ridge Behavioral Health System; Our Lady of Peace; Rivendell Behavioral Health Services; Hillcrest Hall; Good Samaritan Hospital;Lexington Police Department; Division of Youth Services. We have over 500 volunteers and over 8000 donors annually from throughout the state. Our volunteers serve in various capacities. We have significant financial and volunteer support from the faith community from various denominations in addition to the 800 United Methodist churches contributing volunteers and financial support. We also are able to bill medicaid for some of the costs of therapy.

5.3.3 Outreach & Inclusion Strategy **15 Points**

Demonstrate how the program will ensure services are available and accessible by all potential participants, especially related to language barriers for persons with limited English proficiency; persons with physical or other disabilities; and persons impacted by poverty and economic distress.

Has your organization enacted any policies (or employs any standard operating procedures) to ensure equitable service opportunity and / or benefit program to a diverse cross-section of the greater community?

Mending Point Behavioral Health provides appropriate and accessible services to all potential participants. Specifically, for youth who have limited English proficiency we work with DCBS, Fayette County Schools, to ensure they have access to services in their first language. Our outreach efforts include serving on the Department of Juvenile Justice's Family Accountability, Intervention and Response (FAIR) Teams as well as attending the local board meetings of the Kentucky Agency for Substance Abuse Policy (ASAP). We also provide regular outreach to the Department of Community-Based Services, Division of Youth Services, and Court Designated Workers. We work collaboratively with them to offer substance use and mental health education education, prevention, and treatment services to the youth served by them. As a program, Mending Point has fostered relationships with local recovery groups such as Al-Anon, SMART Recovery, Celebrate Recovery, Young People in Recovery, Voice of Hope, and Refuge Recovery. Individual members of the Mending Point team are actively involved in outreach to several Fayette County Public Schools and work collaboratively with school staff and administration to provide psycho-education, educational supports, assessment, and treatment. We advocate with the state legislature to enact legislation to benefit the at-risk population that we serve especially for mental health and substance use disorders and for increase support for substance use prevention, behavioral health education, and issues of poverty. Per agency policy, Mending Point accepts and serves youth of any gender, race, creed, national origin, sexual orientation, economic status, or religion.

6.0 Program Budget Summary Form Instructions

Proposal Submittal shall be considered incomplete and shall be rejected without completed Budget Summary Form. *(Including total amount of ESR grant request.)*

For organizations requesting funding for more than one program in this RFP, combine into a single Program Budget narrative for the proposal.

Please note that the Program Budget will be part of the grantee agreement with LFUCG and regular tracking and expenditure reporting will be required.

To ensure readability and uniformity, please use the Program Budget form included. Provide brief line-item detail as specified in each section below and verify all calculations.

This section provides a summary of the total proposed Program Budget for FY 2020. It requests the allocation of all projected funding amounts (City and non-City sources) for anticipated FY 2020 program expenditures.

Total Program Budget

Column A should reflect projected expenditures for the entire program (not just the proposed LFUCG ESR grant funding request portion). When the chart is completed this column should equal ESR Grant Funding Request plus other/non-ESR program funding. (A=B+C)

ESR Grant Funding Request

Column B is the grant amount being requested from this RFP to support this program's services to eligible Fayette County Participants.

Non-LFUCG Program Funding

Column C is the non-LFUCG ESR funding that is allocated to the Total Program Budget (A-B = C).

This form is for the budget for the PROGRAM applying for ESR funds, not the total agency budget.

For each category identify the amount requested and the amount to be leveraged through other programs or organizations (if applicable).

Staff Salaries – Identify the number of Full-time position salaries allocated to the program, and part-time positions allocated to the program, and the amounts of each allocated to Columns A, B, & C.

Consultant Services – In the "List Details" box, **briefly** describe any expenses associated with providing expanded supportive services or other services for which the organization intends to contract with another entity. Any of these expenses to be provided by the proposing organization should be included in other line items.

Space/Facilities – In the "List Details" box, **briefly** list the basis of the allocation of rental costs, utilities, janitorial costs, and any other facility costs for the Program. Identify any office or program space in an LFUCG owned building, and any other costs (rent, monthly utilities, etc.) reimbursed to LFUCG.

Scholarships/Stipends – In the "List Details" box, **briefly** list the type of scholarships or stipends, and include the number of people or organizations to receive funds.

Operating Expenses – In the "List Details" box, **briefly** list the costs associated with expenses, supplies, utilities, and any other expense associated directly with the operation of the project.

Other – In the "List Details" box, **briefly** list any other costs for the Program not covered above.

PROGRAM BUDGET SUMMARY

Agency Name **The Methodist Home of Kentucky**

Program Name **Mending Point Behavioral Health**

FY 2020 (July 1, 2019-June 30, 2020) Total Program Budget

	# of Employees:	Column A Total Program Budget [= B+C]	Column B ESR Grant Funding Request	Column C Non-ESR Program Funding [A-B]
1. Staff Salaries for Program				
Full-Time (FTE)	6	307,371	**146,760**	160,611
Part-Time	0	0	**0**	0
Total Salaries		307,371	**146,760**	160,611
3. Consultant Services	$	2,000	**1,000**	1,000
list details	Computer/software services			
4. Space/Facilities	$	13,870	**6,935**	6,935
list details	general supplies, bldg upkeep, equipment, utilities, telephon			
5. Operating Expenses	$	41,268	**32,014**	9,254
list details	Professional supplies, postage, subscriptions, travel expenses*(for travel in Fayette co.), computer equipment maintenance and labor, training expenses.			
6. Scholarships / Stipends	$	0	**0**	0
list details - numbers & amounts				
7. Other	$	38,892	**19,446**	19,446
list details	10% indirect cost accrued by program			
8. TOTAL PROGRAM BUDGET	$	403,401	**206,155**	197,246

Cost per Program Participant: $ **1,603**

I understand that this document in its entirety is incorporated into my grant Agreement with the Lexington-Fayette Urban County Government.

Authorized Representative *(typed name)*: Rachel Smith

Title: Director of Community Based Programs **Date**: 4/18/19