

Michigan Department of Health and Human Services
Office of Recovery Oriented Systems of Care

Request for Letter of Interest
Deadline to Submit Letter of Interest: June 2, 2021

Introduction:

The Michigan Department of Health and Human Services (MDHHS) is soliciting letters of interest for grants to high schools that are specifically designated for students recovering from a substance use disorder (SUD). MDHHS shall award up to four (4) grants to support the costs of counselors, therapeutic staff, and recovery coaching staff at high schools that are offering or implementing a recovery high school.

MDHHS will give special consideration to interested entities who will achieve implementation of services within three (3) months of Notice of Award. Each grant awarded will not exceed \$150,000.00 per applicant. **The expected grant period is July 1, 2021 to September 30, 2021.**

Key Dates:

Please note the following key dates:

- **Deadline to submit questions about this grant program: May 17, 2021**
- **Anticipated distribution of responses to submitted question: May 19, 2021**
- **Deadline to submit letter of interest: June 2, 2021**

Questions About This Grant Program:

Interested eligible agencies may submit question and requests for clarification about the contents of this document. Questions must be submitted to Kelli Dodson, MDHHS Office of Recovery Oriented Systems of Care, at Dodsonk@michigan.gov, and must be received by May 14, 2021. MDHHS is not responsible for technical errors that prevent the timely delivery of questions and interested eligible are encouraged to submit their questions in advance of the deadline.

How to Submit Letter of Interest

Completed letters of interest must be submitted to Kelli Dodson, MDHHS Office of Recovery Oriented Systems of Care, at Dodsonk@michigan.gov, and must be received by June 1, 2021. MDHHS is not responsible for technical errors that prevent the timely delivery of submissions and interested eligible are encouraged to submit their questions in advance of the deadline.

Note: Submission of a letter of interest does not constitute an application for grant funding nor does it constitute an obligation to submit a grant application, and MDHHS is not obligated to award funding to any agencies that submit either a letter of intent or a grant application.

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Section I

SUD Community and School Outreach Special Provisions

1. Purpose:

The primary purpose is to:

- 1) Educate students in recovery from substance use or co-occurring disorders,
- 2) Meet state requirements for awarding a secondary school diploma,
- 3) Intend that all students enrolled be in recovery and working a program of recovery from a substance use or co-occurring disorder as determined by the student, treatment provider and school,
- 4) Be available to any student in recovery who meets state or district eligibility requirements for attendance.

Additionally, recovery high schools provide support for families learning how to live with, and provide support for, their teens entering into the recovery lifestyle.

The project should create an environment for students in recovery from a substance use disorder that is supportive of their recovery, stigma free, and offers the supplemental services on-site that students need to build recovery capital and remain free of illicit substances. This grant program is focused on providing treatment and recovery support services to students in need, while maintaining their presence in the school environment.

2. Match Requirements

No match is required for this grant program.

3. Definition of Key Terms

- a. **Recovery High School** – secondary schools designed specifically for students in recovery from substance use disorder or co-occurring disorders.
- b. **Substance Use Disorder** – a disease that affects a person’s brain and behavior and leads to an inability to control the use of a legal or illegal substance or medication.
- c. **Co-Occurring Disorder** – the existence of both a substance use disorder and another condition.
- d. **Recovery** – A highly individualized journey of healing and transformation where the person gains control over their life. It involves the development

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of new meaning and purpose and growing beyond the impact of a diagnosis. This journey may include the pursuit of spiritual, emotional, mental, and physical well-being.

4. Funding Priorities:

Public Act 0166 of 2020: Sec. 977. From the funds appropriated in part 1 for community substance use disorder prevention, education, and treatment, \$600,000.00 of federal state response to the opioid crisis grant revenue is allocated as grants to high schools specifically designated for students recovering from a substance use disorder to support the costs of counselors, therapeutic staff, and recovery coaching staff, with a priority placed on the cost of substance use disorder counselors. Each grant shall not exceed \$150,000.00 per high school.

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5. Program Requirements

Successful applicants will be required to comply with all requirements in the grant agreement language in addition to the following requirements:

- a. Grantee or community partner must have a therapist and counselor that have an appropriate Master Level Degree and experience in Substance Use Disorder treatment and recovery services.
- b. Must have peer coaches that have Recovery experience.
- c. Must provide recovery supports and connections to community supports for teens and families that are entering into the Recovery lifestyle. Examples include advocacy, educational support, employment assistance, peer mentor/coach, family coaching, and evidence based, or promising practices targeted at families impacted by substances.
- d. Meet state requirements for awarding a secondary school diploma.
- e. Intent that all students enrolled be in recovery and working a program of recovery from substance use or co-occurring disorders as determined by the student and the School.
- f. Available to any student in recovery who meets state or district eligibility requirements for attendance, i.e., students do not have to go through a particular treatment program to enroll, and the school is not simply the academic component of a primary or extended-care treatment facility or therapeutic boarding school.

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6. Reporting Requirements

Reporting requirements include an annual work plan, quarterly narrative reports, and monthly FSRs all submitted within EGrAMS. Virtual check in meetings will be scheduled as needed.

7. Expected Outcomes

Successful applicants for funding through this program must demonstrate measurable progress toward the achievement of the outcomes and document the progress achieved in monthly reporting.

- a. Demonstrate progress in the primary purpose of educating students in recovery from substance use or co-occurring disorders.
- b. Demonstrate that substance use disorder treatment and recovery services are provided to enrolled students.
- c. Students will be awarded a diploma or equivalent.
- d. Students will be connected to needed services for maintaining recovery in the community, post-graduation, or program completion.

8. Resources

- a. Association of Recovery Schools: <https://recoveryschools.org/>

Section II

LETTER OF INTEREST

Complete the form below, providing complete responses to each topic. Letters that do not contain responses to each topic may be rejected, and those agencies would not be considered for funding. Submissions must be limited to 14 pages in total, with specific limitations on narrative and budget below, 1-inch margins, 12-point font, tables may be 10-point font size.

Completed letters of interest must be submitted to Kelli Dodson, MDHHS Office of Recovery Oriented Systems of Care, at Dodsonk@michigan.gov, and must be received by close of business on June 2, 2021. MDHHS is not responsible for technical errors that prevent the timely delivery of submissions, and interested eligible agencies are encouraged to submit their responses in advance of the deadline.

Note: Submission of a letter of interest does not constitute an agreement for grant funding.

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1. What organization will be the lead organization for this application?
2. Provide the names of the staff who will be assigned to the following roles in EGrAMS, the electronic grant application and management software used by MDHHS:
 - Authorized Official (submits applications, signs agreements)
 - Financial Officer (submits financial status reports for successful applicants)
 - Project Director (assigns permissions to applicant users of EGrAMS)
3. Are the lead organization and all potential partners located within the state of Michigan? (Please mark yes or no.)

 Yes
 No
4. Please identify partner agencies and their function on the project:
5. Do any of the community-based partner organizations have an Outpatient Substance Use Disorder Treatment license through the Department of Licensing and Regulatory Affairs?
6. Does the identified SUD partner have a contract with the regional Prepaid Inpatient Health Plan for Outpatient Services?
 - a. Please indicated American Society of Addiction Medicine (ASAM) Level of Care SUD partner is approved to offer.
7. Do any of the community-based partner organizations have accreditation for behavioral health services? Ex. through CARF, COA or The Joint Commission (TJC)
8. Do any of the community-based partner organizations have experience serving the target population? (Please mark yes or no.)

 Yes
 No
9. Do any of the community-based partner organizations employ peer recovery coaches?
10. Will the project be ready to implement services within 3 months of award of funds?
11. Please provide a project narrative that includes (limit 8 pages):
 - a. Project design
 - b. Goals of the project

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- c. Target number of individuals served by the project
 - d. Implementation timeline
12. Please provide a complete budget and budget justification that includes all expected expenses that would be charged to this grant (limit 3 pages).

Section III

CERTIFICATIONS

I, the undersigned, am authorized to submit this document on behalf of my agency. I certify that the contents above are true to the best of my knowledge as of the time I completed this form.

Name (typed):

Title (typed):

Organization (typed):

Signature:

Date (typed):