

County and Tribal Matching Grant SFY22-23

Contact Information

Violet Bolstridge, Behavioral Health Program Officer

Violet.Bolstridge@mt.gov

Mary Collins, Special Populations Section Supervisor

Mary.Collins@mt.gov

Program Description

- The County and Tribal Matching Grant (CTMG) program is an appropriation by the Montana legislature to fund counties and federally recognized tribes for the purpose of reducing admissions to the Montana State Hospital.
- The funding is authorized by MCA [53-21-1203](#) and ARMs [37.89.1001 - 37.89.1009](#).
- \$4,650,000 over the biennium

Eligibility

- Eligible offerors include:
 - County governments and federally recognized tribal governments;
OR
 - A group of county governments and/or federally recognized tribal governments.
- Regional Approach:
 - Maximize impact of grant funding
 - A single county or tribal government must be primary in order to hold a contract or task order

Program Goals (*ARM 37.89.1001*)

- Align Montana's crisis system with national best practices;
- Reduce reliance on the Montana State Hospital for emergency and court ordered detention and evaluation;
- Support the treatment of mental illness closer to home by increasing local treatment capacity and creating better treatment outcomes;
- Increase the number of intervention and jail diversion options that provide judges, county attorneys, and law enforcement with alternatives to incarceration; and
- Establish and support collaboration among community stakeholders to address community needs.

RFP Restructure

Three Goals:

1. Increase participation for rural, frontier, and tribal communities;
2. Develop effective, integrated, and community-based crisis systems; AND
3. Promote consistent and evidence-based programming that aligns with Crisis Now model and SAMHSA's National Guidelines for Behavioral Health Crisis Care

RFP Format Changes

- Strategic Plan
 - Standardized format
- Simplified Format
 - Tiers
 - Menu of services
- Requirements Prior to Funding
 - Each available service has requirements

CATEGORY 2: CRISIS INTERVENTION TEAM (CIT)

The goal of Crisis Intervention Team (CIT) programs is to improve the outcome of law enforcement encounters with individuals experiencing mental health crises through a community-based approach. CIT programs foster connections between law enforcement, mental health providers, hospital emergency services and individuals with mental illness and their families and are established in communities nationwide. Each CIT program is able to enhance communication, recognize mental health resources for those experiencing crisis, and bolster officer and community safety through intensive trainings and collaborative community partnerships.

Service 2.A	Crisis Intervention Team Academy
Definition	Crisis Intervention Team Academy facilitated by CIT Montana or CIT International that complies with CIT Montana and CIT International guidelines.
Service 2.B	Crisis Intervention Team Lead
Definition	Team Lead is responsible for establishing an effective Crisis Intervention Team. (1) Serve as the primary contact for community's CIT program; (2) Foster multilevel communication among the CIT community: stakeholders, committee, police, leadership, and City/County officials; (3) Develop, implement, and review CIT policy and procedures; and (4) Provide leadership for CIT Patrol officers.
Requirements Prior to Funding Crisis Intervention Team Initiatives	
(1) Documentation of agreement from CIT Montana to host an academy that meets CIT Montana and CIT International guidelines.	

Tier 1: Crisis System Capacity Building

Tier 1 services are available to any community.

1. Crisis Training
2. Crisis Intervention Team (CIT)
3. Crisis System Foundation
4. Crisis Data

TIER 1 SERVICES: CRISIS SYSTEM CAPACITY BUILDING

CATEGORY 1: CRISIS TRAINING

Behavioral health-related training can improve the crisis system's capacity to appropriately respond to individuals in crisis.

Service 1.A	Crisis Training
Definition	<p>Trainings to support the development of a behavioral health workforce, community response to behavioral health needs, integrated behavioral health, and improved crisis services implementation and coordination.</p> <p>Examples include:</p> <ul style="list-style-type: none">(1) Certified Behavioral Health Peer Support Specialist Click here for a current list of approved training courses.(2) Applied Suicide Intervention Skills Training (ASIST) SAMHSA--Applied Suicide Intervention Skills Training (ASIST)(3) The Wellness Recovery Action Plan (WRAP®)(4) Question, Persuade, Refer (QPR)(5) SafeTALK(6) MANDT(7) Nonviolent Crisis Intervention
Requirements Prior to Funding Training	
<ul style="list-style-type: none">(1) Identified target population for the training.(2) Plan to advertise the training and enroll target population in the training.	

Tier 2: Crisis Services

Tier 2 services are available to communities that:

- *Have an active crisis coalition, crisis coordinator, and completed resource mapping; OR*
- *Were awarded funding for a Tier 2 service in CTMG SFY 20-21*

**These communities must actively establish a coalition, coordinator, and resource mapping*

1. Mobile Crisis Response Services
2. Criminal Justice Services
3. Community-Based Crisis Services
4. Housing Services
5. Crisis Infrastructure

Tier 3: Innovative Crisis Projects

Tier 3 services are available to communities that have:

- *Crisis coalition*
- *Crisis coordinator*
- *Resource mapping*
- *Mobile crisis response*

Innovative, community-based solutions for communities that have established the core elements of a behavioral health crisis system and have identified gaps that require creative solutions.

Tier 4: Planning and Development of Regional Crisis Stabilization Model

Tier 4 services are available to offerors who:

- ***Seek to develop a model that:***
 - *Serves a region that includes rural and frontier communities; AND*
 - *Aligns with national best practices for 24/7 crisis receiving and stabilization services for all referrals*
- ***Have the endorsement of the Montana Hospital Association and the Montana Healthcare Foundation.***

The purpose of the funding is to provide technical assistance and start-up funding to support the development of a regional crisis stabilization facility in an underserved region of the state.

Response Format

- Standardized structure
- "Plug-in" format
- Narrative explanations

Service Tier (from Scope of Services)	Example: Tier 2
If service is from Tier 2 or 3, offeror must provide evidence of an active crisis coalition, crisis coalition coordinator, and completed resource mapping. <i>Indicate any applicable attachments.</i>	Example: See Attachment A for Crisis Coalition See Attachment B for Crisis Coalition Coordinator See Attachment C for Completed Resource Mapping
Service Number (from Scope of Services)	Example: 3.A
Service Title (from Scope of Services)	Example: Crisis Coalition Coordinator
Narrative Explanation <i>(250-1000 words per response)</i>	
How will the proposed service be structured? (E.g. Location of service, number of FTE, staffing model, service hours, etc.):	
How does the proposed service align with the goals and objectives of the strategic plan?:	
How will funds received through this RFP be used for this service?:	
How will partners collaborate and commit to ongoing resource support for sustainability?:	

CTMG Budget, Step by Step

1) Identify county contribution*:

County/Tribe Contribution = (In-Kind Commitment) + (Cash Commitment)

2) Identify match rate (*see table in RFP*)

3) Calculate award amount:

State Contribution = (County/Tribe Contribution) x (Match Rate)

*The CTMG is a “**soft match**” grant, meaning offerors can utilize the value of existing resources such as personnel, office space, supplies or equipment to meet their grant requirement.

CTMG Matching Rate 101

$$\text{Award} = (\text{County/Tribe Commitment}) \times (\text{Match Rate})$$

Example: Match Rate of 0.7

What this means:

- If the county/tribe commits \$100, the State contributes \$70

What this does **NOT** mean:

- If the county/tribe commits \$70, the State contributes \$30
- If the total budget is \$100, the State contributes \$70

County	Total FY18 Admissions	2018 Population	Rate of Admission	FY2020 Match Rate Table
Beaverhead	4	9404	0.43	0.7
Big Horn	1	13338	0.07	0.7
Blaine	6	6807	0.88	0.7
Broadwater	0	6085	0.00	0.7
Carbon	3	10714	0.28	0.7
Carter	0	1238	0.00	0.7
Cascade	43	81643	0.53	0.7
Chouteau	1	5745	0.17	0.7
Custer	6	11586	0.52	0.7
Daniels	0	1747	0.00	0.7
Dawson	4	8680	0.46	0.7
Deer Lodge	21	9131	2.30	0.6
Fallon	0	2920	0.00	0.7
Fergus	27	11113	2.43	0.6
Flathead	55	102106	0.54	0.7
Gallatin	36	111876	0.32	0.7

CTMG Budget, Continued

4) Calculate full project budget

Budget = (County/Tribe Commitment) + (State Contribution)

in other words...

Budget = (County/Tribe commitment) + ([County/Tribe commitment] x [matching rate])

** Budget must align with proposal and include a detailed narrative*

Tentative RFP Timeline

- RFP released: March 2021
- RFP closed: April 2021
- Awards announced: May 2021
- Contracts and Task Orders finalized: June 2021
- Services started: July 1, 2021

Contact Information

Violet Bolstridge, Behavioral Health Program Officer

Violet.Bolstridge@mt.gov

Mary Collins, Special Populations Section Supervisor

Mary.Collins@mt.gov