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Jeffrey A. Meyers Commissioner

> Katja S. Fox Director

STATE OF NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION FOR BEHAVIORAL HEALTH

129 PLEASANT STREET, CONCORD, NH 03301 603-271-9544 1-800-852-3345 Ext. 9544 Fax: 603-271-4332 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

March 9, 2017

His Excellency, Governor Christopher T. Sununu and the Honorable Council State House Concord, New Hampshire 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services to enter into an agreement with the University of New Hampshire (vendor# 177867-B046), 51 College Road, Durham, NH 03824, for the training and coaching of NH Wraparound Coordinators, for an amount not to exceed \$15,000, effective upon Governor and Executive Council approval through September 30, 2017. 100% Federal and 0% General Funds.

Funds are available in the following account in State Fiscal Year 2017 and anticipated to be available in State Fiscal Year 2018, upon the availability and continued appropriation of funds in the future operating budget with the ability to adjust encumbrances between State Fiscal Years through the Budget Office, if needed and justified.

05-95-42-420010-1238 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: HUMAN SERVICES, HHS: CHILDREN YOUTH & FAMILIES, CHILD PROTECTION, FAST FORWARD GRANT

SFY	Class	Title	Activity Code	Budget
2017	102/500731	Contracts for Program Services	42103802	\$10,714.25
2018	102/500731	Contracts for Program Services	42103802	\$4,285.75

EXPLANATION

The purpose of this request is for the provision of the training and coaching of NH Wraparound Coordinators regarding the NH Wraparound model. The University of New Hampshire, Institute on Disability (UNH-IOD) will be responsible for training and coaching all new Wraparound Coordinators and agency staff who utilize the NH Wraparound Model for both the Families and Systems Together (FAST) Forward program, as well as the communities and schools associated with the Department of Education's and Cheshire

His Excellency, Governor Christopher T. Sununu and the Honorable Council Page 2 of 3

County's new System of Care (SOC) grants which began October 1, 2016, as needed. FAST Forward is a DHHS program that utilizes the NH Wraparound Model.

Wraparound is a nationally recognized approach to serving children and youth with Severe Emotional Disturbances (SED), engaging children, youth, and their families, and ultimately keeping children and youth in their own homes and communities. As defined by the National Wraparound Initiative, Wraparound is an intensive, holistic method of engaging with individuals with complex needs (most typically children, youth, and their families) so they can live in their homes and communities, and realize their hopes and dreams. Wraparound has been most commonly conceived of as an intensive, individualized care planning and management process. The Wraparound process aims to achieve positive outcomes by providing a structured, creative and individualized team planning process that, compared to traditional treatment planning, results in plans that are more effective and more relevant to the child and family.

During the DHHS SOC grant period, the UNH Institute on Disability (UNH-IOD) assisted the program by developing the Wraparound Model now called NH Wraparound. NH Wraparound was developed based on Wrap Milwaukee's curriculum and the standards for wraparound endorsed by the National Wraparound Initiative, and was modified by UNH-IOD for application in New Hampshire. The wraparound practice is a critical component, and the foundational practice, associated with the FAST Forward program and the System of Care work. UNH-IOD staff and subcontractors train NH Wraparound Coordinators.

This contract was competitively bid. The Department published a Request for Proposals on December 19, 2016. One (1) application was received. The application was evaluated by Division of Behavioral Health staff with knowledge of the program requirements. The applicant, University of New Hampshire, was selected. The bid summary score sheet is attached.

The attached agreement is for the provision of services through September 30, 2017, with the option, at the State's sole discretion, to renew for up to one (1) additional year, based upon continued availability of funding, satisfactory vendor performance and approval of the Governor and Executive Council.

Should the Governor and Executive Council determine not to approve this request the Department may not be able to maintain enough properly trained NH Wraparound Coordinators for the FAST Forward program. The FAST Forward program evaluation, done as part of the System of Care grant, shows that New Hampshire is meeting and exceeding the national averages for wraparound fidelity measurements and outcomes. The training and coaching services provided by UNH-IOD are critical for continued adherence to the practice and outcomes for wraparound.

Area served: Statewide

Source of funds: 100% federal and 0% general. (CFDA # 93.243; FAIN: SM061249)

His Excellency, Governor Christopher T. Sununu and the Honorable Council Page 3 of 3

In the event that the federal funds become no longer available, general funds will not be requested to support disability determination work.

Respectfully submitted,

Katja S. Fox Director

Approved by:

Jeffrey A. Meyers Commissioner



New Hampshire Department of Health and Human Services Office of Business Operations Contracts & Procurement Unit Summary Scoring Sheet

Training and Coaching for NH Wraparound Model

RFP Name

RFP-2017-DBH-03-TRAIN

RFP Number

Bidder Name

Disability	
Institute on E	
- UNH	

Disability						
1. UNH Institute on Disability	2. 0	3. 0	4. 0	5. 0	6. 0	7. 0

Actual Points	140	0	0	0	0	0	0
Maximum Points	150	150	150	150	150	150	150
Pass/Fail							

COOPERATIVE PROJECT AGREEMENT

between the

STATE OF NEW HAMPSHIRE, **Department of Health and Human Services** and the

University of New Hampshire of the UNIVERSITY SYSTEM OF NEW HAMPSHIRE

- A. This Cooperative Project Agreement (hereinafter "Project Agreement") is entered into by the State of New Hampshire, **Department of Health and Human Services**, (hereinafter "State"), and the University System of New Hampshire, acting through University of New Hampshire, (hereinafter "Campus"), for the purpose of undertaking a project of mutual interest. This Cooperative Project shall be carried out under the terms and conditions of the Master Agreement for Cooperative Projects between the State of New Hampshire and the University System of New Hampshire dated November 13, 2002, except as may be modified herein.
- B. This Project Agreement and all obligations of the parties hereunder shall become effective on the date the Governor and Executive Council of the State of New Hampshire approve this Project Agreement ("Effective date") and shall end on 9/30/17. If the provision of services by Campus precedes the Effective date, all services performed by Campus shall be performed at the sole risk of Campus and in the event that this Project Agreement does not become effective, State shall be under no obligation to pay Campus for costs incurred or services performed; however, if this Project Agreement becomes effective, all costs incurred prior to the Effective date that would otherwise be allowable shall be paid under the terms of this Project Agreement.
- C. The work to be performed under the terms of this Project Agreement is described in the proposal identified below and attached to this document as Exhibit A, the content of which is incorporated herein as a part of this Project Agreement.

Project Title: Training and Coaching for NH Wraparound Model

D. The Following Individuals are designated as Project Administrators. These Project Administrators shall be responsible for the business aspects of this Project Agreement and all invoices, payments, project amendments and related correspondence shall be directed to the individuals so designated.

State Project Administrator

Name: Erica Ungarelli Name: Susan Sosa

Address: Division for Behavioral Health
105 Pleasant Street/Main Building

Address: University of New Hampshire
Sponsored Programs Administration

Concord, NH 03301 51 College Rd. Rm 120 Durham, NH 03824

Campus Project Administrator

Campus Project Director

Phone: 603-271-5006 Phone: 603-862-4848

E. The Following Individuals are designated as Project Directors. These Project Directors shall be responsible for the technical leadership and conduct of the project. All progress reports, completion reports and related correspondence shall be directed to the individuals so designated.

State Project Director

Name: Erica Ungarelli Name: JoAnne Malloy

Address: Division of Behavioral Health Address: UNH Institute on Disability

105 Pleasant Street/Main Building Durham, NH 03824

Concord, NH 03301

Phone: 603-271-5006 Phone: 603-228-2084

F. Total State funds in the amount of \$15,000 have be allowable costs incurred under this Project Agreement exceeding the amount specified in this paragraph.	
Check if applicable ☐ Campus will cost-share % of total costs during	ng the term of this Project Agreement.
Federal funds paid to Campus under this Project Agareement No. 1U79SM061249-01 from Sulfadministration under CFDA# 93.243. Federal Campus as part of this Project Agreement, and in Cooperative Projects between the State of New Hampshire dated November 13, 2002, are attached which is incorporated herein as a part of this Project	regulations required to be passed through to n accordance with the Master Agreement for lampshire and the University System of New to this document as Exhibit B, the content of
G. Check if applicable Article(s) of the Master Agreement for Co Hampshire and the University System of New Han amended to read:	opperative Projects between the State of New hpshire dated November 13, 2002 is/are hereby
H. State has chosen not to take possession of equipmed State has chosen to take possession of equipment p issue instructions for the disposition of such equipment end-date. Any expenses incurred by Campus in carrifully reimbursed by State.	urchased under this Project Agreement and will ont within 90 days of the Project Agreement's
This Project Agreement and the Master Agreement cons Campus regarding this Cooperative Project, and superarrangements, oral or written; all changes herein must be the parties by their authorized officials.	ersede and replace any previously existing
IN WITNESS WHEREOF, the University System University of New Hampshire and the State of New Hagreement.	
By An Authorized Official of: University of New Hampshire Name: Karen M. Jensen	By An Authorized Official of: Department of Health and Human Services Name: Katja S. Fox
Title:Manager, Sponsored Programs Administration	Title: Director
Signature and Date:	Signature and Date:
1/2017	Signature and Date.
Wall I was a second	Jen Jelli
By An Authorized Official of: the New	By An Authorized Official of: the New
Hampshire Office of the Attorney General	Hampshire Governor & Executive Council
Name: Megan 1504	Name:
Title:	Title:
Signature and Date: 4/3/17	Signature and Date:
Page 2 of 5	1/-
V	Campus Authorized Official <u>F</u> Date <u>2/20</u> // -

EXHIBIT A

- A. Project Title: Training and Coaching for NH Wraparound Model
- **B.** Project Period: Date of Governor and Executive Council Approval, through September 30, 2017

The State reserves the right, at its sole discretion, to renew for one (1) additional year, contingent upon satisfactory delivery of services, available funding, agreement of the parties and approval of the Governor and Council.

C. Objectives: The Training and Coaching for NH Wraparound Model contract is for the provision of training and coaching services to NH Wraparound Coordinators regarding the NH Wraparound model, using existing curriculum. The Vendor will be responsible for training and coaching all new Wraparound Coordinators and agency staff who support the Wraparound Model for both the Families and Systems Together (FAST) Forward program, as well as the communities and schools associated with the Department of Education's new System of Care (SOC) grants, as needed.

D. Scope of Work:

- 1. Train new and existing Wraparound Coordinators, in the children's behavioral health field. Training will include, but is not limited to:
 - 1.1. Providing a location for the sessions to take place.
 - 1.2. Sessions will be as needed.
 - 1.3. Presenting the existing Wraparound Model curriculum in an engaging manner.
 - 1.4. Making all new training material associated with the NH Wraparound Model available to the Department.
 - 1.5. Surveying training participants on the quality and effectiveness of training at the end of each training module. Overall survey scores will be sent with the quarterly report outlined in Section
- 2. Coach new and existing Wraparound Coordinators on the material provided in the training. Coaching will include, but is not limited to:
 - 2.1. Referring to Wraparound core values when creating expectations.
 - 2.2. Communicating expectations in a way that is clear to participants receiving coaching.
 - 2.3. Assisting participants with linking the Model to actual practice by using action verbs when describing expectations in order to clarify that expectations are for demonstrated competency rather than for values alone.
 - 2.4. Certifying Wraparound Coordinators based on core competencies within the NH Wraparound Model curriculum.
 - 2.5. Surveying of coaching participants every six (6) months beginning from the start of coaching and every six (6) months going forward, on the quality and effectiveness of the coaching services provided.
 - 2.6. A set frequency and length of coaching time per Coordinator, which will be:
 - 2.6.1. One (1) hour a week per Coordinator for the first six (6) months.
 - 2.6.2. One (1) hour every other week for months seven (7) through nine (9).
 - 2.6.3. One (1) hour a month ongoing from month ten (10).
 - 2.7 Use coaching tools such as the NH Wraparound Facilitator Competencies Self-Rating Checklist and the Plan of Care Coaching Tool.

Campus Authorized Official Date 2/20/17

- 3. Report on the progress of the Wraparound Coordinators to the Program Director quarterly. The report will include, but not be limited to:
 - 3.1. Number of trainings conducted with the number of participants trained.
 - 3.2. Overall training survey scores for each training provided.
 - 3.3. Number of coaching sessions provided for each Wraparound Coordinator.
 - 3.4. Overall coaching survey scores for each individual coached.
- E. Deliverables Schedule: See D. Scope of Work

F. Budget and Invoicing Instructions:

- 1. This contract is funded with funds from the Catalog of Federal Domestic Assistance (CFDA) # 93.243, US Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Substance Abuse and Mental Health Services-Project of Regional and National Significance.
- 2. Invoicing Instructions:
 - Campus will submit invoices to the State on regular Campus invoice forms no more frequently than monthly and no less frequently than quarterly. Invoices will be based on actual project expenses incurred during the invoicing period, shall show current and cumulative expenses by major cost categories, shall document cumulative cost sharing through the end of the invoicing period and will certify that the match was not derived from federal funds or used as match against any other state contract or federal program. The State will pay Campus within thirty (30) days of receipt of each approved invoice. Campus will submit its final invoice no later than seventy-five (75) days after the Project end date.
- 3. See attached budgets on Exhibit A, Item F-1.

EXHIBIT B

This Project Agreement is funded under a Grant/Contract/Cooperative Agreement to State from the Federal sponsor specified in Project Agreement article F. All applicable requirements, regulations, provisions, terms and conditions of this Federal Grant/Contract/Cooperative Agreement are hereby adopted in full force and effect to the relationship between State and Campus, except that wherever such requirements, regulations, provisions and terms and conditions differ for INSTITUTIONS OF HIGHER EDUCATION, the appropriate requirements should be substituted (e.g., OMB Circulars A-21 and A-110, rather than OMB Circulars A-87 and A-102). References to Contractor or Recipient in the Federal language will be taken to mean Campus; references to the Government or Federal Awarding Agency will be taken to mean Government/Federal Awarding Agency or State or both, as appropriate.

Special Federal provisions are listed here: None or

Page 5 of 5

Campus Authorized Official Date 2/29//

University of New Hampshire Training and Coaching for NH Wraparound Model Exhibit A, Item F-1

Budget Items		SFY 2017 Budget		SFY 2018 Budget		Total	
1. Salaries & Wages	\$	1,002	\$	258	\$	1,260	
2. Employee Fringe Benefits	\$	400	\$	103	\$	503	
3. Travel	\$	167	\$	125	\$	292	
4. Supplies and Services	\$	9,550	\$	372	\$	9,922	
5. Equipment	\$	-	\$	-	S	-	
6. Facilities & Admin Costs	\$	2,839	\$	184	\$	3,023	
Totals	\$	13,958	\$	1,042	\$	15,000.00	

RFP-2017-DBH-03-TRAIN University of New Hampshire Exhibit A, Item F-1 Page 1 of 1 Campus Authorized Official LTDate 2/28/17