CONTRACT NO. «VendorIDSOW»

PROGRAM ATTACHMENT NO. «FY18Attachment»

CONTRACTOR: «OPNameSOW»

SYSTEM AGENCY PROGRAM: «ProgramLongNameSOW» ()

**SECTION I. STATEMENT OF WORK:**

1. **PURPOSE**

The purpose of the Texas Strategic Prevention Framework Partnerships for Success (SPF-PFS) is to expand the existing coalition prevention infrastructure and substance abuse prevention services to underserved, high-need communities in Texas. Funded SPF-PFS coalitions shall provide community-based prevention utilizing evidence-based environmental strategies focused on the SPF-PFS prevention priorities of underage drinking and prescription drug misuse and abuse. Contractor shall build an effective and sustainable coalition plan by establishing relationships and partnerships to build a collaborative coalition infrastructure utilizing volunteers for activities, maximizing community mobilization through joint community action, and engage in broad community actions to change social policy.

1. **GOALS**
   1. To promote emotional health, prevent the onset, and reduce the progression of substance abuse in underserved high-need communities in Texas. This includes underage drinking of alcohol by youth and young adults (ages 12-20) and prescription drug misuse and abuse by youth and young adults (ages 12-25);
   2. To reduce substance abuse-related consequences in Texas communities;
   3. To build substance abuse prevention capacity and infrastructure at the state and community levels; and
   4. To align funding to support statewide efforts.
2. **TARGET POPULATION**
3. The primary population for the prevention of underage drinking is youth (ages 12-17) and young adults (ages 18-20); and the primary population for the prevention of prescription drug misuse and abuse is youth ages (12-17) and young adults (ages 18-25).
4. The secondary populations are subpopulations (i.e., racial, ethnic, sexual/gender minority groups) within the youth and young adult 12 – 25 age range who are vulnerable to health disparities.
5. **SERVICE CATCHMENT AREA**
6. Contractor shall target a defined zip code, neighborhood, or city located within Bexar, Cameron, Dallas, El Paso, Harris, Hidalgo, Kinney, Maverick, Starr, Tarrant, Travis, Val Verde, Webb, or Zapata Counties.
7. PFS coalitions’ environmental strategies shall target communities based on identified gaps in services as evidenced by the epidemiological data collected in the coalition’s needs assessment conducted for this project.
8. **ADMINISTRATIVE REQUIREMENTS**

Contractor shall:

1. Ensure that the PFS prevention staff members are culturally competent and understand the cultural characteristics of the target community(ies) in their Region.
2. Provide PFS prevention services in a safe, clean, well-lit, and well-maintained environment. The site where activities shall be held (including buildings, electrical, lighting, plumbing, sanitation, ventilation and mechanical systems, appliances, equipment, and furniture) shall be structurally sound, functional, and in good repair. The site’s building and grounds shall be clean and free of garbage and debris.
3. Develop and maintain current policies and procedures for employees, subcontractors, interns, or volunteers who work with the community. The written policies and procedures shall address participant safety and ensure that all activities with participants are conducted in a respectful, non-threatening, non-judgmental, and confidential manner. Contractor shall maintain current policies and procedures on file and make them available for System Agency review upon request.
4. Have a formal policy to reflect the PFS coalition’s cultural competency efforts. Contractor shall maintain current policies and procedures on file and make them available for System Agency review upon request.
5. Post in a prominent location legible prohibitions against firearms, weapons, alcohol, illegal drugs, illegal activities, and violence at program sites that do not have the existing prohibitions posted.
6. Contractor’s administrative site shall post the hours and days of operation at all building entrances. Standard days of operation shall reflect a forty (40)-hour workweek, Monday through Friday.
7. Ensure that all activities conducted are directly related to the activities/strategies required in the contract.
8. Post exit diagrams conspicuously throughout program sites (except in one-story buildings where all exits are clearly designated as such).
9. At the request of the PFS Project Manager, Contractor shall provide the System Agency with a written quality improvement action plan within the deadline assigned by the PFS Project Manager to respond to deficiencies, problems, or issues identified relating to the implementation of the environmental strategies, documentation and collection of evaluation process and outcomes data, or other staffing or organizational issues.
10. **PROGRAM REQUIREMENTS**

Contractor shall provide PFS services in accordance with the rules in [Title 25 of the Texas Administrative Code (TAC), Chapter 447](http://texreg.sos.state.tx.us/public/readtac$ext.ViewTAC?tac_view=5&ti=25&pt=1&ch=447&sch=A&rl=Y).

**Coalition Membership**

1. Contractor shall promote community efforts to raise awareness and generate support from multiple community sectors for effective implementation of evidence-based strategies that address underage drinking and prescription drug misuse and abuse.
2. Contractor’s coalition membership shall include one or more active representatives from each of the following Community Sectors:
3. Youth;
4. Young adults;
5. Parents;
6. Business communities;
7. Media;
8. Schools and/or higher education;
9. Organizations that serve youth or young adults;
10. Law enforcement agencies;
11. Faith-based organizations;
12. Civic and volunteer groups;
13. Health care professionals;
14. State or local or tribal government agencies with expertise in the field of substance abuse; and
15. Other organizations involved in reducing substance abuse or suicide prevention coalitions.
16. Coalition Membership shall be comprised of members who currently work or reside in or within the targeted community or county.
17. Contractor shall complete and submit the PFS Coalition Logic Model that details the connections between program activities and program goals that shall be implemented to address the identified PFS prevention priorities of underage drinking and prescription drug use and abuse.
18. Contractor shall ensure that the PFS coalition members participate in the completion of the PFS Coalition Logic Model. Contractor shall document the work and completion of the PFS Coalition Logic Model in the Coalition Meeting Minutes and attach the Coalition Meeting Minutes to the Documentation Form which shall include the following:
    * + 1. Date, time, and duration of activity;
        2. Key contact persons/providers involved (attach a copy of the sign-in sheet);
        3. Purpose and goal of activity;
        4. Further action steps needed;
        5. Action or change achieved;
        6. Signature of the prevention staff conducting the activity; and
        7. Date prevention staff documented the activity conducted.
19. Contractor shall be required to update and submit a revised PFS Coalition Logic Model annually for review and approval by the date specified by the System Agency, and maintain a copy of the System Agency-approved PFS Coalition Logic Model, Meeting Minutes, and Documentation Form on file for System Agency review upon request.

**Implementation**

Contractor shall:

* 1. Use the Strategic Prevention Framework (SPF) Model 5-step process to guide the selection, implementation, and evaluation of effective, culturally appropriate, and sustainable prevention activities.
  2. Attend online webinar training through the System Agency funded prevention training services (PTS) contractor for the Strategic Prevention Framework (SPF) 5-step process to guide the selection, implementation, and evaluation of effective, culturally appropriate, and sustainable prevention activities.
  3. Ensure that the program design, content, communications, and materials are culturally, linguistically, and developmentally appropriate to the target population, as evidenced by:
     1. Educational materials that are gender- and age-specific and appropriate for educational and health literacy levels of the target population;
     2. Literature and signage in languages of the target populations;
     3. Use of interpreters, as appropriate; and
     4. Personnel records that document adherence to staff competency requirements.
  4. Address or follow Culturally and Linguistically Appropriate Services (CLAS) standards for the proposed target population and good faith effort recruitment of reaching out to under-served sub-populations [ex. tribal communities, Colonias, military, and Lesbian, Gay, Bisexual and Transgender (LGBT)]. Contractor shall include in their Mid-Year and Annual Report detail of how they conducted their CLAS analysis and good faith effort recruitment of the under-served sub-populations.
  5. Submit a written request for any changes to the target population specified in Contractor’s initial response to the solicitation submitted for this Project. Contractor shall also submit a written request for any change to the System Agency-approved service area. Contractor shall obtain written approval from the System Agency, prior to changes in the System Agency-approved PFS coalition services.
  6. Conduct the Center for Substance Abuse Prevention (CSAP) prevention strategies which include:
     1. **Information Dissemination** is a strategy designed to create awareness and knowledge of alcohol, and other drugs (AOD) use, abuse, and addictions; and their harmful effects on individuals, families and communities. Information can be in the form of brochures, pamphlets, resource directories, literature, and information about available resources. Information about available services and resources can be disseminated a number of ways to include, but not be limited to, in-person (e.g., walk-in visitor, at a presentation, at a health fair, town hall meetings, etc.), distributed through the mail or electronically (by fax or e-mail). All AOD presentations conducted under the Program Attachment shall be focused on alcohol (underage drinking) and prescription drugs. AOD presentations focused on prevention priorities for youth, young adults, and the general community are designed to create awareness and knowledge of alcohol and drug use, abuse and addiction; its harmful effects and consequences on individuals, families, and communities. This strategy also increases awareness about alcohol and other drug programs and services available to the general population. All presentations shall have an educational goal and objective and be conducted for a minimum of thirty (30) minutes. Contractor shall conduct the activities as stated above and document this strategy as follows:

1. Date, time, and duration of activity;
2. Location of activity;
3. Printed name, signature, and date of the staff/volunteer conducting activity;
4. Number of participants and/or number of individuals receiving written information/literature;
5. Educational goal and objective of presentation or purpose and goal of activity; and
6. A brief description and details about the presentation/or outcome of activity.
   * 1. **Community-Based Process** aims to enhance the ability of the community to more effectively provide prevention, intervention, and treatment services for alcohol, tobacco and other drugs problems through community mobilization, collaboration, coalition building, networking and community empowerment efforts. This strategy is designed to encourage collaboration and the development of working agreements between System Agency funded and non-System Agency funded community organizations to increase community mobilization and support for the implementation of evidence-based environmental strategies targeting environmental, social norm, and policy changes. **Coalition Meetings shall be conducted on a monthly basis**. Contractor’s program service coordination with another provider shall include a written agreement that is renewed annually (by signature or other documented contact) and includes:
7. Names of the entities entering into the agreement;
8. Services or activities each entity shall provide;
9. Signatures of authorized representatives; and
10. Dates of action and expiration.

Documentation of community-based process through coalition meetings, task force meetings, or networking activities shall include, as applicable:

* + 1. Date, time, and duration of activity;
    2. Key contact persons/providers involved;
    3. Purpose and goal of activity;
    4. Further action steps needed;
    5. Action or change achieved; and
    6. Staff printed name, signature, and date.

* + 1. **Environmental and Social Policy** is a strategy that aims to decrease the incidence and prevalence of AOD and/orHuman Immunodeficiency Virus (HIV) infection among populations by establishing and/or changing written and unwritten standards, codes and attitudes within the community. Environmental strategies aim to combat substance abuse and related harms with concerted, community-based and comprehensive efforts to change norms, behaviors, systems and contexts that contribute to substance abuse problems in our communities [Community Anti-Drug Coalitions of America (CADCA)]. Environmental strategies incorporate efforts aimed at changing or influencing community conditions, standards, institutions, structures, systems and policies. This strategy may include activities that center on legal and regulatory initiatives and those which relate to service and action oriented initiatives. Contractor shall conduct the activities as stated above and document this strategy using the System Agency approved template as follows:

1. Date, time, and duration of activity;
2. Key contact persons/providers involved;
3. Purpose and goal of activity;
4. Further action steps needed or completed;
5. Environmental, social norm, or policy change achieved;
6. Printed name and signature (including date) of the prevention staff conducting the activity.

* 1. Conduct a Community Needs Assessment (CNA) that reflects the data used to identify the target community and population and develop a written CNA Summary Report summarizing the CNA data collected and used to select the target community and population. The CNA Summary Report shall include the following:

1. Community data of the demographic make-up on substance use consumption patterns, consequences, and risk factors; emotional and behavioral prevalence data; population and cultural-specific effects; and data about assets that protect against substance use, and promote emotional well-being;
2. Data that identifies community trends in incidence and prevalence of alcohol use, misuse, and abuse, and related problems for the targeted community(ies);
3. Data that includes content on the local language and literacy needs, sexual identity, disability, and needs of the high-need sub-population.
4. Data that identifies community trends in incidence and prevalence of the secondary focus of prescription drug misuse and abuse, and related problems for the targeted community(ies); and
5. Data that demonstrates the community prioritized risk and protective factors based on a risk assessment that captures the specific cultural, linguistic, and demographic characteristics of the targeted community(ies).
   1. Conduct and submit a CNA and an updated CNA Summary Report annually to guide the coalition activities for review and acceptance by the date specified by the System Agency, and maintain a copy of the System Agency accepted CNA Summary Report on file for System Agency review upon request.
6. Ensure that the coalition members participate in the CNA activities. Contractor shall document the work and completion of the CNA in the Coalition Meeting Minutes and attach the Coalition Meeting Minutes to the Documentation Form which shall include the following:
   * + 1. Date, time, and duration of activity;
       2. Key contact persons/providers involved (attach copy of the sign-in sheet);
       3. Purpose and goal of activity;
       4. Further action steps needed;
       5. Action or change achieved;
       6. Signature of the prevention staff conducting the activity; and
       7. Date prevention staff documents the activity conducted.
7. Maintain a copy of CNA and Coalition Meeting Minutes and Documentation Form(s) on file for System Agency review upon request.
8. Develop a local strategic plan that shall help guide the implementation of the strategies and activities focused on the environmental strategy, policy or social norm changes to be achieved in the targeted community (Strategic Plan). Funding shall support each PFS coalition to develop a strategic plan aligned with the statewide prevention priorities. The strategic plan shall include an implementation timeline, findings from the community needs assessment, address community readiness, local intervening variable data, program evaluation, and propose strategies that are culturally and linguistically appropriate. Contractor shall ensure that the coalition members participate in the completion of the Strategic Plan. Strategic plan submitted by coalitions shall include:
   * + 1. An organized logic model;
       2. The outcomes of the community needs assessment;
       3. An assessment of coalition readiness and plans for improvement;
       4. A clear plan, derived from epidemiological data on consumption and related consequences with intervening variables (risk and protective factors) identified;
       5. A proposal for implementation of evidence-based environmental strategies; and
       6. A proposed process and outcome evaluation for measuring change in the community.
9. Document the work and completion of the Strategic Plan in the Coalition Meeting Minutes and attach the Coalition Meeting Minutes to the Documentation Form which shall include the following:
   * + 1. Date, time, and duration of activity;
       2. Key contact persons/providers involved (attach a copy of the sign-in sheet);
       3. Purpose and goal of activity;
       4. Further action steps needed;
       5. Action or change achieved;
       6. Signature of the prevention staff conducting the activity; and
       7. Date prevention staff documented the activity conducted.
10. Submit an updated Strategic Plan annually for review and approval by the date specified by the System Agency, maintain a copy of the System Agency-approved Strategic Plan, Coalition Meeting Minutes along with Documentation Forms(s) on file for System Agency review upon request.

1. Develop an Implementation Plan that details specific action steps and activities Contractor shall conduct to achieve the goals and objectives described in their strategic plan. Contractor shall ensure that the coalition members participate in the completion of the Implementation Plan.

1. Document the work and completion of the Implementation Plan in the Coalition Meeting Minutes and attach the Coalition Meeting Minutes to the Documentation Form which shall include the following:
2. Date, time, and duration of activity;
3. Key contact persons/providers involved (attach a copy of the sign-in sheet);
4. Purpose and goal of activity;
5. Further action steps needed;
6. Action or change achieved;
7. Signature of the prevention staff conducting the activity; and
8. Date prevention staff documented the activity conducted.
9. Submit an updated Implementation Plan annually included in the annual report for review and approval by the date specified by the System Agency and maintain a copy of Implementation Plan, Meeting Minutes along with Documentation Form(s) on file for System Agency review upon request.
10. Implement evidence-based environmental strategies and activities that target policy and social norm changes within the identified community/count. Contractor shall ensure that all evidence-based environmental strategies and social policy activities that are implemented are directly related to the planned activities in Contractor’s Strategic Plan. All the strategies and activities shall be focused on the targeted environmental strategy, policy or social norm change for the identified community(ies) and shall be related directly to intervening variables discovered through available data sources, and have a clear and direct impact on the statewide prevention goals.

1. Conduct media awareness activities in the target community(ies) focused on the targeted environmental, policy, or social norm change. Examples include, but are not limited to, media campaigns/contacts, public service announcements, billboards, editorials, press releases, and television. Contractor shall conduct media awareness activities as follows:

Conduct only media awareness activities and campaigns focused on the substance abuse prevention priorities of underage drinking and prescription drug misuse and abuse related to the targeted environmental, policy, or social norm change.

Coordinate and collaborate with System Agency prevention program staff and System Agency funded providers through the Drug-Free Texas Media Campaign to develop and/or promote a consistent statewide message for media campaigns focused on the state’s prevention priorities of alcohol (underage drinking) and prescription drugs; determine the outcome and goal of the media message. Assess the most strategic approach to determine the type of media activities that will be conducted to promote a statewide message focused on the prevention priorities to reach communities effectively.

Conduct regional surveys to determine the type of media activities that shall be conducted to promote an effective media message focused on the substance abuse prevention priorities of underage drinking and prescription drug misuse and abuse to reach communities effectively. Surveys shall help identify how individuals receive information (radio, television, newspaper, billboards, etc.) and their current knowledge about the focused topic to help Contractor determine the most appropriate type of media activity for the targeted population and community.

Support the System Agency funded Prevention Media Campaign through participation in the statewide media campaign and the annual Red Ribbon Rally media outreach activities

Participate in meetings and conference calls regarding collaboration and participation in System Agency – funded Prevention Media Campaign.

Conduct pre/post survey activities to measure the impact of the media activities conducted in Contractor’s targeted community.

1. Conduct presentations for youth, young adults, and adults in the general community focused on the prevention priority, as approved by the System Agency. The presentations shall be designed and conducted as a strategy leading the coalition to achieve the targeted environmental or social norm change. The identified primary priority shall be alcohol - specifically focused on underage drinking, and include the secondary priority on prescription drug misuse and abuse. The presentations shall address the primary and the selected secondary priority(ies). The presentations shall have an educational goal and objective to reduce or prevent underage drinking and prescription drug misuse and abuse. The presentations shall be age-appropriate and designed to create awareness of the health and legal consequences of underage drinking and prescription drug misuse and abuse. The presentations may be conducted in town hall meetings, schools, colleges, universities, and/or community settings to educate and obtain community buy-in to support the targeted environmental or social norm change.

1. Establish and maintain working linkages through Community Agreements (CAs)/Memorandums of Understanding (MOUs) with a resource network of community and social service agencies serving or having an interest in the identified community(ies). The CAs/MOUs shall encourage networking and coordination to help address gaps in services in their respective regions, communities, and service areas and to address the needs of the community(ies) identified in Contractor’s response to the solicitation document, as approved by the System Agency. Contracts that are newly funded as of the current fiscal year, must have CAs/MOUs in place within 60 days of the start date of this Program Attachment. All other contracts being renewed and continued as of the current fiscal year, must adhere to the specified quarterly goals as outlined in Section II: Performance Measures of this Program Attachment. All CAs/MOUs shall be reported into the Clinical Management for Behavioral Health Services (CMBHS) system as they are established/renewed each month, in support of their quarterly goal.
2. Contractor shall maintain signed copies of the CAs/MOUs on file for review by the System Agency upon request.
   * 1. All CAs/MOUs shall address the non-duplication of services;
     2. All CAs/MOUs shall be signed by both parties, contain begin and end dates, and be renewed annually;
     3. At a minimum, Contractor shall have CAs/MOUs with the following entities in Contractor’s service area.
3. All System Agency funded substance abuse prevention, intervention, and treatment providers; and
4. The Community Sectors listed in Section F. Coalition Membership.
   * 1. Contractor shall also secure CAs/MOUs with the other identified entities such as hospitals, colleges and universities, non-System Agency funded coalitions and other identified partners that may assist with their data collection efforts throughout the term of the contract.

1. In order to ensure the vast data collection efforts result in continuous quality improvement, Contractor shall collaborate with the System Agency funded State Epidemiological Outcomes Workgroup (SEOW), Statewide Evaluator, and System Agency funded Prevention Resource Center (PRC) contractor in the Region by sharing data and resources. The SEOW shall play a critical role in the directing, collection and reporting of population data relevant to the outcome evaluation and the PFS evaluator shall continue to meet with the SEOW to seek input on critical evaluation data collection issues to assess changes in individual substance use, attitudes and related risk factors. Feedback shall be provided based on the monitoring of the fidelity measures on each of the SPF steps and their progress in the fulfillment of goals and expectations.
2. Ensure that Contractor’s Coalition Coordinator, and one to two coalition members attend the two day Coalition Summit held at the System Agency Annual Behavioral Health Institute (BHI), to receive training and technical assistance in program coordination and coalition related strategies. Contractor shall sign-in at the trainings to confirm attendance and maintain copies of the training certificates received by the attendees on file for System Agency review upon request.
3. Ensure that Contractor’s Program Director and Coalition Coordinator attend three days of the System Agency Annual Fall Provider Meeting to increase knowledge and skills to help develop or enhance the PFS coalition capabilities.

1. Also ensure that Contractor’s Program Director and Coalition Coordinator participate in activities involving the statewide PFS local evaluation and the federal cross-site evaluation. Participation may include the following:
   * + 1. Conference calls;
       2. Webinars;
       3. Data collection activities;
       4. Interviews;
       5. Focus groups; and
       6. Workgroup meetings.
2. Provide support and cooperation with the System Agency funded statewide evaluation contractor and the federal cross-site evaluation in the collection of community-level process measures, outcome measures, and other performance measures. Contractor shall provide support by identifying problem and barriers in the administration of evaluation activities, assist in developing solutions, and identify community stakeholders and resources with System Agency Program staff, System Agency PFS Project Manager, SEOW, and the Statewide Prevention Evaluator, as scheduled by the System Agency.
3. Ensure that Contractor’s Program Director and Coalition Coordinator participate on monthly conference calls for project updates, training and technical assistance with System Agency Program staff, System Agency PFS Project Manager, SEOW, and Statewide Prevention Evaluator, as scheduled by the System Agency.
4. Prepare and submit the PFS Mid-Year Program and the PFS Final Program reports annually by the dates as specified by the System Agency. Contractor shall maintain copies of the PFS Mid-Year and the PFS Final Program Reports on file for System Agency review upon request.

1. Maintain the Coalition Management System (CMS) data collection software license from the Collaborative Planning Group Systems, Inc. (CPGSI). PFS coalitions shall be required to use CMS to collect and track coalition activities and generate reports to monitor the coalition’s program and CMBHS monthly measures submissions. NOTE: Contractor shall include the data collection software license fee in their proposed categorical budget under “Supplies.” The CMS software is designed to collect and track all required coalition activities and help monitor the progress and success towards achieving the targeted environmental strategies outlined in the coalition’s logic model and strategic plan.The cost of the CMS software license shall include face-to-face and web-based training, and technical assistance, as well as telephone and email technical support. Contractor shall:
   * + 1. Use the software to collect and track all coalition activities on or before November 1.
       2. Use the CMS system to generate the report(s) with the data that shall be entered in the CMBHS system to report the coalition’s monthly measures.
       3. Send an email notification to CPGSI and the designated System Agency program staff to report any issue with the CMS system.
       4. Notify the System Agency assigned contract manager if termination of engagement and use of the CMS software license with CPGSI occurs before the termination date of the contract.
       5. Reimburse the System Agency the amount of the prorated refunded fee received from CPGSI.
2. **CRIMINAL BACKGROUND VERIFICATION REQUIREMENTS**

Conduct criminal background verifications. Contractor shall:

* 1. Not employ or allow a subcontractor to use any individual who is on probation or parole to conduct PFS coalition activities with youth and/or their families;
  2. Prior to employment, conduct and document criminal background checks and pre-employment drug testing of Contractor’s potential employees and/or subcontractors who shall conduct PFS coalition activities and/or have direct contact with youth and/or their families;
  3. Conduct annual criminal background checks for Contractor’s current staff and/or subcontractors who shall conduct PFS coalition activities and/or have direct contact with youth and/or their families;
  4. Conduct criminal background checks of interns or volunteers who shall conduct PFS coalition activities and/or have direct contact with youth and/or their families;
  5. Ensure that any individual who is on probation, parole and/or is the subject of an ongoing investigation by law enforcement is prohibited from working directly with youth and/or their families;
  6. Develop and maintain current written policies and procedures addressing the requirements for criminal background checks as a condition for employment of potential employees, subcontractors, interns, and/or volunteers who work directly with youth and/or their families;
  7. Develop and maintain current written policies and procedures that require individuals (staff, subcontractors, interns, and volunteers) to notify Contractor of an arrest, conviction, investigation, or any other legal involvement;
  8. Maintain documentation of each notification of arrest, conviction, investigation, or any other legal involvement on file and make available to the System Agency for review upon request; and
  9. Maintain documentation of each criminal background check and pre-employment drug testing on file and make available to the System Agency for review upon request.

1. **STAFFING REQUIREMENTS:**
   * + 1. Within 30 days of the start date of the contract, Contractor shall hire a Program Director to provide oversight and coordination of the PFS program.
       2. Within 30 days of the start date of the contract, Contractor shall hire a full-time Coalition Coordinator dedicated 100% to the PFS program. The Coalition Coordinator shall be responsible for convening coalition meetings, authoring reports, maintaining data, ensuring contract compliance and submission of deliverables to the System Agency. The Coalition Coordinator shall also be responsible for reporting the appropriate data as requested by the System Agency for reporting to Substance Abuse and Mental Health Services Administration Center for Substance Abuse Prevention (SAMHSA/CSAP).
       3. At Contractor’s discretion, a PFS Coalition Specialist may be hired within 30 days of the start date of the contract. PFS Coalition Specialist shall adhere to the training requirements outlined in the contract.
       4. Notify the System Agency within ten (10) business days of any staffing changes to PFS program staff. This includes the Program Director and the Coalition Coordinator.
       5. Submit one (1) Substance Abuse Prevention Program Organization Staffing (SAPPOS) Form annually which includes a list of all the direct prevention staff for Contractor’s System Agency funded PFS coalition program by the date as specified by the System Agency. Template to be provided by the System Agency.
2. **STAFF COMPETENCIES:**
   * + 1. Ensure that the Program Director is a Certified Prevention Specialist (CPS) or an Associate Prevention Specialist (APS) working towards CPS certification. Contractor shall submit copy of Program Director’s CPS or APS certificate to the System Agency by the date as specified by the System Agency.
   1. The Prevention Program Director who does not possess a CPS certification shall obtain a CPS certification within 12 months of employment in this position. Contactor shall submit a copy of the Program Director’s CPS certificate within 30 calendar days of his/or her attainment of the CPS certification. Contractor shall maintain a copy of the employee’s CPS certification in the personnel file and make it available for review by the System Agency upon request.
3. Contractor shall ensure that all non-certified prevention staff employed with the organization achieves their APS designation within **18 months** of employment for this program. Contractor shall maintain a copy of the employee’s APS designation in the personnel file and make it available for review by the System Agency upon request.
   * + 1. Ensure that the Program Director and all PFS coalition staff shall complete the required following trainings as specified below:
   1. **Cardio-Pulmonary Resuscitation (CPR) and First Aid Certifications.** Contractor shall ensure that all PFS coalition staff complete and maintain current CPR and first aid certifications within 60 days from the start date of the Program Attachment or 60 days from the date of hire for a PFS coalition position, whichever is later.
4. **15-hour Prevention Training.** This required training shall be completed through the System Agency funded Prevention Training Services (PTS) contractor. PFS coalition staff shall complete the 15-hour Prevention Training within 6 months from the start date of the Program Attachment or 6 months from the date of hire for any prevention position, whichever is later (or be able to provide documentation that the training has been completed at any time). (*This is a one-time requirement that shall be completed by the Program Director and all prevention staff. Staff who have already received this training may waive this requirement by providing a copy of their certificate to the System Agency as evidence of completion.)* The fifteen (15) hours shall include a minimum of three (3) hours in each of the following areas:
   1. Cultural competency;
   2. Risk and protective factors/building resiliency;
   3. Child development and/or adolescent development, as appropriate;
   4. Strategies for strengthening families; and
   5. Prevention across the life span.
5. **Substance Abuse Prevention Skills Training (SAPST).** This required training shall be completed through the System Agency funded Prevention Training Services (PTS) contractor. (*This is a one-time requirement that shall be completed by the Program Director and all PFS coalition staff.) Staff that have a certificate of completion for the previously required Substance Abuse Prevention Specialist Training (SAPST) are not required to attend the new SAPST training.)*
6. The Program Director shall provide documentation of their completion of the SAPST training upon the date of hire for the Program Director position. Contractor shall maintain a copy of the employee’s SAPST certificate in the employee’s personnel file and make it available for review by the System Agency upon request.
7. Contractor shall ensure that all other PFS coalition staff employed with the organization complete the SAPST training within 18 months of employment for the PFS program.
8. **15-Hour Prevention Continuing Education**. A minimum of 15 hours of prevention continuing education specifically related to prevention or job-related duties shall be completed annually. This required training may be obtained through the System Agency funded Prevention Training Services (PTS) contractor, the BHI, or other entities approved as continuing education providers by the Texas Certification Board of Addiction Professions (TCBAP). Information for certification may be found on the TCBAP website at [www.tcbap.org](http://www.tcbap.org/). This training shall be completed prior to the end of the contract. The 15 hours of continuing education is not required to be completed during the same Program Attachment year as the **15-hour Prevention Training** listed above in 2.b.
9. **Coalition Management System Software (CMS). The Collaborative Planning Group System, Inc. (CPGSI)** CMS System (URL: <http://www.collaborateandgrow.com/>) is an online data collection and tracking application that gives access to many performance tracking and reporting tools specifically tailored to the activities and work performed by the System Agency funded (PFS) Coalition Programs.. Contractor’s Program Director and Coalition Coordinator shall be required to be trained on the CMS software.
10. **Suicide Prevention Training.** Contractor’s Coalition Coordinator shall be required to attend at least one suicide prevention training each year to build competence and encourage integration of mental health promotion strategies in their work.
11. **Comprehensive Strategic Plans.** Contractor shall be provided training and technical assistance through the PTS and PFS Project Manager to develop and implement a comprehensive strategic plan based on the Texas prevention priorities of underage drinking (alcohol) and prescription drug misuse and abuse. Contractor shall attend required training and shall participate in technical assistance conference calls.
    * + 1. Maintain documentation of credentials and training certificates for the Program Director and all PFS coalition staff in personnel files and make them available for review by the System Agency upon request.
        2. The requirements in the Staff Competencies section apply to all employees, subcontractors, interns, or volunteers. This applies to individuals that serve as the Program Director, Coalition Coordinator, or as a System Agency funded coalition staff member.
12. **GUIDANCE ON INCENTIVES**
13. Agency shirts or T-shirts (with Contractor’s name and/or logo) for staff conducting program activities are not necessary for performing the duties of the Program Attachmentand are not an allowable cost. Reasonable cost to purchase T-shirts for participants with a ‘No use’ Alcohol, Tobacco, and Other Drugs (ATOD) message to provide education and awareness on the harmful effects of ATOD is allowable.
14. Gift cards or food purchases for PFS activities are not an allowable expense.
15. Incentives used to engage participants in youth and young adult PFS coalition activities purchased with System Agency funds shall be of reasonable cost and shall be imprinted with a drug-free message. Incentive items may include an imprint with the name of the youth and young adult PFS coalition program, phone number and/or website, but may not include the organization’s name.
16. **SUBMISSION SCHEDULE AND REPORTING REQUIREMENTS:**
17. Contractor shall submit all documents identified below by the dates specified by the System Agency. Contractor shall submit documents to the designated System Agency Substance Abuse mailbox (SubstanceAbuse.contracts@dshs.state.tx.us) unless otherwise noted.
18. Contractor’s duty to submit all documents shall survive the termination or expiration of the Contract.

|  |  |
| --- | --- |
| **Report Name** | **Due Date\*** |
| Security Attestation Form and List of Authorized Users | October 15 and March 15 |
| Substance Abuse Prevention Program Organization Staffing Form | October 15 |
| Program Director’s CPS or APS Certificate | October 15 |
| Community Needs Assessment (CNA) | November 15 |
| Logic Model | December 17 |
| Strategic Plan | February 1 |
| Implementation Plan | March 1 |
| PFS Mid-Year Report | April 15 |
| PFS Final Program Report | October 15 |
| CNA Summary Report | November 1 |
| Performance Measures – CMBHS | 15th of the month following the month being reported |
| Financial Status Report (FSR) | Last business day of the month following the end of each quarter of the Program Attachment term.  *Final Financial Status Report (FSR) due within 45 days after Program Attachment end date.* |
| Closeout documents – Annual Report | Annual Report due 45 days after Program Attachment end date. |

\*If Due Date is on a weekend or holiday, the Due Date is the next business day.

**SECTION II. PERFORMANCE MEASURES AND GOALS:**

1. Contractor's performance will be measured in part on the achievement of the following key performance measures below.
2. Contractor shall report these performance measures monthly through CMBHS under the Measures component.

**KEY PERFORMANCE MEASURE(S):**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Measure: | Oct-Dec | Jan-Mar | Apr-Jun | Jul-Sep | Annual Goal |
| «Meas1Text» | «Meas1Q1» | «Meas1Q2» | «Meas1Q3» | «Meas1Q4» | «Meas1Total» |
| «Meas2Text» | «Meas2Q1» | «Meas2Q2» | «Meas2Q3» | «Meas2Q4» | «Meas2Total» |
| «Meas3Text» | «Meas3Q1» | «Meas3Q2» | «Meas3Q3» | «Meas3Q4» | «Meas3Total» |
| «Meas4Text» | «Meas4Q1» | «Meas4Q2» | «Meas4Q3» | «Meas4Q4» | «Meas4Total» |
| «Meas5Text» | «Meas5Q1» | «Meas5Q2» | «Meas5Q3» | «Meas5Q4» | «Meas5Total» |
| «Meas6Text» | «Meas6Q1» | «Meas6Q2» | «Meas6Q3» | «Meas6Q4» | «Meas6Total» |
| «Meas7Text» | «Meas7Q1» | «Meas7Q2» | «Meas7Q3» | «Meas7Q4» | «Meas7Total» |
| «Meas8Text» | «Meas8Q1» | «Meas8Q2» | «Meas8Q3» | «Meas8Q4» | «Meas8Total» |
| «Meas9Text» | «Meas9Q1» | «Meas9Q2» | «Meas9Q3» | «Meas9Q4» | «Meas9Total» |
| «Meas10Text» | «Meas10Q1» | «Meas10Q2» | «Meas10Q3» | «Meas10Q4» | «Meas10Total» |
| «Meas11Text» | «Meas11Q1» | «Meas11Q2» | «Meas11Q3» | «Meas11Q4» | «Meas11Total» |
| «Meas12Text» | «Meas12Q1» | «Meas12Q2» | «Meas12Q3» | «Meas12Q4» | «Meas12Total» |
| «Meas13Text» | «Meas13Q1» | «Meas13Q2» | «Meas13Q3» | «Meas13Q4» | «Meas13Total» |
| «Meas14Text» | «Meas14Q1» | «Meas14Q2» | «Meas14Q3» | «Meas14Q4» | «Meas14Total» |
| «Meas15Text» | «Meas15Q1» | «Meas15Q2» | «Meas15Q3» | «Meas15Q4» | «Meas15Total» |

1. TTOR PERFORMANCE MEASURE(S):
2. Contractor shall report the below TTOR performance measures monthly in a manner and format provided by HHSC.

|  |
| --- |
| Measure: |
| Number of individual medication disposal pouches distributed |
| Number of prescription medication take back events held in collaboration with or sponsored by the TTOR prescription medication drop box recipient |
| Pounds of prescription medication returned during TTOR prescription medication drop box recipient sponsored take back event |
| Pounds of prescription opioids returned during TTOR prescription medication drop box recipient sponsored take back event |
| Pounds of prescription medication returned to TTOR purchased prescription medication permanent drop box site |
| Pounds of prescription opioids returned to TTOR purchased prescription medication permanent drop box site |

**SECTION III. PROGRAM SERVICE AREA**

Contractor shall deliver services or activities to participants and/or clients in the following counties:

«Counties»

**SECTION IV. ELIGIBLE POPULATION**

Male & Female

**SECTION IV. SOLICITATION DOCUMENT**

The Department of State Health Services (DSHS) Strategic Prevention Framework (SPF) – Partnerships for Success (PFS) issued April 6, 2015, RFP# 537-16-141998.

**SECTION V. RENEWALS**

The System Agency may renew this Program Attachment for up to one (1) additional one-year term at the System Agency’s sole discretion. Renewals are contingent upon the availability of federal funds.

**SECTION VII. PAYMENT METHOD**

Cost Reimbursement

Funding is further detailed in the attached Categorical Budget and, if applicable, Equipment List.

**SECTION VIII. BILLING INSTRUCTIONS:**

1. Contractor shall submit all invoices to the System Agency through CMBHS monthly.
2. Contractor shall be paid on a monthly basis and in accordance with services performed under this Program Attachment.
3. All invoices must reference Purchase Order Number.

**SECTION IX. FUNDING**

1. Contractor shall contribute an amount equal to at least thirty percent (30%) of the total System Agency share of the Program Attachment expenditures in matching cash or in-kind contributions from sources eligible to be used for matching purposes.
2. Contractor may access the Transactions List report in CMBHS to identify the amount of federal funds allocated to this award for each transaction.
3. The Catalog of Federal Domestic Assistance (CFDA) number for the Texas Strategic Prevention Framework Partnerships for Success (SPF-PFS) is 93.243. The CFDA number is identified in the CMBHS Transactions List report.
4. Any unexpended balance associated with any other Program Attachment on the Contract may not be applied to this Program Attachment.

Funding Source: «CFDAFunding»

DUNS Number: «DUNSNumber»

System Agency Share: «ContractedAmount»

Match: «MatchMoney»

Total: «Total»

**SECTION X. SPECIAL PROVISIONS:**

All requirements identified in the Fiscal Year FY2018 Program Attachment that extend past the term of that Program Attachment shall be due no later than October 15, 2018