



Recruiting and Developing Peer Recovery Coaches

To Support Children, Youth, and Families Affected by the Drug Crisis

Informational Webinar Questions and Responses

Question 1: Will a copy of the slides be emailed out after the webinar?

Response: Yes, the slides and the recording of this webinar are posted to the <https://www.rethinkthevillage.org/> website.

Question 2: Where can I access the Request for Applications (RFA)?

Response: The RFA for this project, "Supporting Children, Youth, and Families Affected by the Drug Crisis: Recruiting and Developing Peer Recovery Coaches" can be accessed at the www.Rethinkthevillage.org website.

Question 3: Our primary focus is providing SUD and Mental Health treatment. We provide that treatment to everyone. Are we disqualified?

Response: No, you are not disqualified.

Question 4: Our nonprofit has a behavioral health clinic and offers many other non-clinical services. Are we eligible to apply?

Response: Yes, keep in mind that the focus of this project is placement in non-traditional (e.g., non-clinical) community-based settings.

Question 5: Do you see this as primarily funding the training of the family peer workforce and then finding them partner placements in community settings to work/intern to provide direct services? Or do you expect the funding over 28 months to both hire staff to do the training of the workforce AND also employ family peers to provide services? Is there an expectation of budget split between the two buckets of primary required activities if it is in fact both of them?

Response: This funding is primarily for increasing the community's capacity to recruit, train, supervise and deploy paid Family Centered-Peer Recovery Coaches (FC-PRCs) and increase an organization's capacity to support this workforce. These staff can come from your organization, partners, or other community-based programs. Funds can be used for these purposes. It is expected that these FC-PRCs will be employed throughout your community and provide direct services to impacted individuals and families. You could also use existing PRC staff and provide them with the additional training to enhance their knowledge and skills and enhance their certification. PRC services are Medicaid reimbursable in many states and if it is available in your state, this funding can be leveraged for employing these staff. There is no specific expectation of budget split. The applicant is responsible for budgeting its project.

Question 6: What do you believe the national accreditation standards for organizations will look like? Who will be the accrediting body? What type of impact will ongoing accreditation have on organizational operations? Is the cost of accreditation or meeting those anticipated standards an allowable expense in budgets?

Response: We are not creating a new accreditation. Social Current already certifies organizations through its Council on Accreditation. We will be reviewing and revising existing standards to incorporate effective

organizational practices to support this workforce. There is no requirement that an organization be or become accredited, but the goal is that the organization incorporate these practices for supporting this workforce. Your funds should be prioritized for training and deploying paid FC-PRC staff.

Question 7: Are PRC's a reimbursable role taxonomy wise?

Response: PRC services are reimbursable in many states. You would need to check your State Medicaid authority for this information, as well as the qualifications for organizations to bill for these services if it is possible. If these services are reimbursable, you can leverage this funding for this project.

Question 8: Are you asking us to write a curriculum for these family-focused trainings?

Response: No, our project team will be responsible for writing the curriculum. We expect subawardees to use the curriculum to train project staff.

Question 9: Would I be able to apply if we anticipate having our SUD program running in 2025? We just begun the application process.

Response: You would be eligible to apply if you intend to recruit, hire, train, and deploy paid FC-PRCs within your community during the award period.

Question 10: Does it matter if the participants meet state or federal certification standards? Does one set of standards supersede the other?

Response: It does not matter. We are not developing all new standards for certifying PRCs. State and National certification processes remain the same. We will be enhancing the knowledge and capacity of PRCs to serve children and families as an enhancement to existing standards. If you have existing certified PRS staff, you could expand their knowledge and skills.

Question 11: For catchment areas that may have both a family peer curriculum and state certification, as well as a youth peer specialist curriculum and state certification/designation, how would you prefer that be included given the priority populations? In Texas for example, family peers support family members; youth peers support youth. Family peers do not support both and are often different types of peers across a lot of characteristics.

Response: You will need to evaluate the potential of this project against existing certifications in your state and apply accordingly. We cannot advise you on how to integrate this into existing certification in your state.

Question 12: Is this a new model/pilot? Is there an existing model? If so, can you provide an example. Can you provide clarification regarding JBS considering applications where two or more entities carry out the proposed project – is that a preference or a requirement?

Response: This is not a new model or pilot. This is a project to enhance the capacity of communities to utilize Family-Centered PRC staff to support youth who have been victimized as a result of the drug epidemic. We will do this through workforce development of the specialized PRC staff. It is a requirement that only one organization be the applicant, although two or more organizations can be part of your project. It would be possible to include another organization as a sub-recipient or subaward, depending on your project. There is no preference for either approach.

Question 13: The eligibility requirements state "specialize in substance use treatment and services and.....". We do not provide clinical treatment but have been providing recovery support services though recovery coaches ever since it became available here in Texas. What is the standard for "substance use treatment"?

Response: The requirement's intent is that the applicant organization understand substance use disorders, including experience in the delivery of effective treatment and/or support services, and peer recovery services. Organizations must have the capacity to conduct the activities required to meet the goal and objectives of this project. If you are currently providing these services, you would meet the eligibility requirements. An organization that is interested but currently does not provide these services could partner with a substance use treatment provider or other organization with experience in providing these services.

Question 14: Would we be disqualified if we also provide clinical services?

Response: No. Organizations that provide clinical treatment services are eligible to apply.

Question 15: Does lived experience include family members of substance users who are in recovery from the effects of addiction, trauma, and dysfunction?

Response: Yes. Children and family members have their own lived experience and their own recovery. Please refer to the RFA for additional definitions.

Question 16: Regarding "Certification Objectives" (Page 10, Objective #4), are peer certification programs other than NAADAC acceptable?

Response: Yes.

Question 17: Does this require an abstinence approach to recovery? Or is a harm reduction approach supported?

Response: This initiative does not require an abstinence approach to recovery. Harm reduction approaches are fully supported.

Question 18: Is there a minimum/maximum number of coaches to be trained and deployed?

Response: No. Our goal is to increase the number of FC-PRCs in the community AND increase the community's capacity to continue to recruit, train and employ FC-PRCs even after the project period.

Question 19: Will there be a template for quarterly and semiannual reports?

Response: Yes, there will be a reporting template and mechanism. This information will be provided to selected subawardees.

Question 20: Are grantees expected to employ all of the program participants after they are certified? Or is the expectation for participants to be hired elsewhere in the community after certification?

Response: The objective is that FC-PRC staff be recruited, trained, and deployed as paid staff. That can be with the applicant organization, one of its partners or another community-based organization. Keep in mind that we are emphasizing deployment in non-traditional (e.g., non-clinical) settings.

Question 21: Is it allowable to utilize Public Allies, AmeriCorps, and other such federal programs to leverage resources?

Response: You can leverage whatever resources you have available and desire to leverage. However, they must be related to this project, and you should include a thorough description of how you will leverage them in your application and corresponding budget and budget narrative.

Question 22: How many children and families would you like to be served over the two years?

Response: We have no defined expectation for this.

Question 23: Can you explain what services delivered in non-clinical locations means?

Response: Peer Recovery Services are being provided in many clinical (treatment) service settings. For this project we are desiring that these services be expanded into non-clinical community-based organizations and settings. You can find examples in the RFA.

Question 24: For the purpose of this RFA are Certified Peer Specialists (CPS) also considered Peer Recovery Coaches? In Wisconsin there are more CPS than Recovery Coaches (a newer initiative).

Response: Yes. Peer Recovery Coaches may also be called Peer Support Specialists, Peer Navigators, etc. Different states have different titles for them.

Question 25: Can we get a list of the specific data points that will be collected before the RFA is submitted?

Response: This information will be provided to selected subawardees and will not be available prior to the application due date. For more information, please review section D. Performance Data and Plan for Measuring Project Performance on Page 16 of the RFA, including the linked resources.

Question 26: With the way the RFP is written it does say \$200,000 for “up to” 28 months. Does this mean that proposal timelines can be anytime up to 28 months, but can be shorter? Or is it written in that way but really means the project is 28 months? Similar follow-up, is the \$200,000 annualized budgets or is \$200,000 over 28 months in total?

Response: The maximum length of proposed projects is up to 28 months. Applicants can propose projects that are shorter than 28 months if they would like. The \$200,000 award amount is for the entire length of the project.

Question 27: Do you expect the PRCs to become Nationally Certified by NAADAC?

Response: PRCs do not have to become nationally certified by NAADAC.

Question 28: Are we expected to hire and support every person training to be a family peer specialist, or can we decide based on budget the % we can train and hire, and those we can train only and assist with placements?

Response: The applicant must determine its program design. Keep in mind that the goal of this project is to increase community capacity. You can include PRCs from partner organizations and other community organizations in your design.

Question 29: It looked like one of the first 3 or 4 slides required that the treatment group be a specific minority/underserved population only. Karen’s answers seem to suggest a broader treatment group. Please clarify. I may have misinterpreted slide.

Response: Please review the *Eligibility Information*, including the *Priority Areas and Priority Considerations Supporting Executive Order 13985* on pages 12 and 13 of the RFA for complete information about applicant eligibility and available priority considerations.

Question 30: As I understand it, to get preference we must be primarily an agency focused on ethnic populations.

Response: JBS will provide priority consideration when making award decisions to applicants that qualify under priority considerations A and/or B. However, applicants do not need to qualify for these priority considerations to apply or be selected.

Question 31: Does this include services for adult children and adult family members through family peer support?

Response: OVC is committed to serving children, youth and adolescents crime victims resulting from the U.S. opioid and drug crisis and their families. Please read the target population in the RFA.

Question 32: Does the organization have to be CAPRSS accredited?

Response: No.

Question 33: When can we see the details on the training so we can see how it can blend with our current programming?

Response: The training curriculum will be developed within the next few months.

Question 34: What is the timeline of the curriculum development and delivery? Will we be able to train our folks on our own timeline? Will we have to be in classes with the whole cohort or will it just be for one organization at a time?

Response: The training curriculum will be developed within the next few months. The process for training will be established once the curriculum is complete. We will establish a training process that is efficient and creates the least amount of disruption. Our goal is to give communities the ability to sustain training at the local level.

Question 35: Is the training that is going to be used from NADAAC available for review prior to applying? Applying suggests an endorsement of that curricula, and we would like to be mindful of what we are signing up for as an RCO before doing so.

Response: We will not be altering State and National certification standards or developing all new standards for certifying PRCs. We will be enhancing the knowledge and capacity of PRCs to serve children and families as an enhancement to existing standards and hope that state and national certifying organizations adopt them in the future as an enhancement to existing certification.

Question 36: The enhanced family centered PRC training is provided at no cost as part of this RFA. Does the applicant have costs here for budget preparation.

Response: JBS and its partners will provide the enhanced PRC and organization training at no cost as part of this project. The applicant is responsible for developing its budget. You should follow the guidance in the RFA. Applicants should ensure that the budget affords hired PRC staff time to participate in workforce development activities, including training, supervision, etc.

Question 37: Our organization is also a state (Texas) certified training institute for peers RSPS and MHPS. Could we write the grant to train our current peers (we have family, youth, and young adult groups) and include the NAADAC federal curriculum in our ongoing peer training institute trainings as an option?

Response: This could be an acceptable approach.

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