



Request for Applications Alternative Response Team Grant Program

SFY2024

Submission deadline: Friday, April 12, at 5 pm

Funding period: July 1 to June 30

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Definitions & acronyms

Alternative Response: Emergency response to provide supportive services to individuals in crisis whether from drug use, behavioral health, or other factors. Teams work to connect individuals to community and regional resources. The goal of alternative response is to connect individuals to services and reduce call burdens on first responders.

ARTG: Alternative Response Team Grant

AWC: Association of Washington Cities

CARES: Community Assistance, Referrals, and Education Services. Typically, a program embedded in a fire department. CARES teams work with individuals to fund long-term, sustainable solutions to complex medical and social challenges. CARES teams can serve as an alternative to EMS services to reduce the amount of non-emergent calls firefighters and paramedics respond to.

City: An incorporated local government located in Washington state. Cities include first-class cities, second-class cities, towns, code cities, and unclassified cities.

Co-Response: Means a multidisciplinary partnership between first responders and human services professionals that responds to emergency situations involving behavioral or mental health crises and people experiencing complex medical needs. First responders include public safety telecommunicators, law enforcement officers, firefighters, emergency medical technicians, and paramedics. Human services professionals include social workers, behavioral health clinicians, advanced registered nurse practitioners, registered nurses, community health workers, and peer support specialists. Co-responders may provide call-for-service crisis response and follow-up care including case management, resource navigation, and transportation.

Facility-Based Crisis Triage and Stabilization Services: Facilities that fill a need for urgency crisis services not found within emergency departments or inpatient hospitalization. Facilities act as a resource for individuals experiencing crisis who may encounter first responders as a result of their behavioral health symptoms. Facilities are designed to act as a specialized and accessible treatment option for these individuals.

HCA: Health Care Authority

LEAD: Law Enforcement Assisted Diversion. Typically, a program embedded in a police department. LEAD teams work with individuals who engage in low-level crimes to connect them with services including crisis response, psychosocial assessments, and long-term, wrap-around services like housing and substance use disorder treatment. LEAD teams help divert individuals away from entering the criminal legal system.

Mobile Crisis Teams: Teams can be deployed rapidly to respond to individuals in crisis and provide crisis assessments and stabilization services.

Introduction and overview

The Alternative Response Team Grant (ARTG) is funded by the Washington State Operating Budget through the Health Care Authority (HCA). The Association of Washington Cities (AWC) manages the grant in partnership with HCA. The purpose of the ARTG Program is to provide funding to cities to create new programs within different alternative response models including law enforcement assisted diversion (LEAD), community assistance referral and education services (CARES), and mobile crisis teams.

To date, the ARTG Program has awarded \$3.8 million to cities across the state. Programs that received grant funds include CARES teams, LEAD programs, co-response, and mobile crisis teams. Cities are providing services directly through their police or fire programs, working with their regional fire district, or contracting with local non-profits and service providers to staff their teams.

The ARTG Program is funded by state general fund dollars and operates on the state fiscal year calendar with contracts beginning July 1 of each year and ending June 30 of the following year.

The ARTG Program can fund a wide range of expenses cities may incur when establishing an alternative response team. However, AWC prefers to provide funding for staff positions and services that provide direct care to those in need. We encourage programs to thoughtfully consider what equipment or durable good expenses can be covered by non-ART Grant funds.

AWC understands that cities may not have the resources or technical expertise to launch a program entirely contained within their city operations. We encourage cities to consider working with local mental health providers, regional fire districts, non-profits and community-based organizations, and other groups that may be able to help establish and run a successful alternative response program.

The ARTG Program is not a program for cities looking to hire a consultant or outside group to develop a proposal for an alternative response team. Applicants for this grant should already have a plan in place for launching a program before applying.

While cities are not required to be the direct service provider, a city must apply and serve as the fiscal agent for the grant.

Eligible applicants

Cities are the only eligible entity who can apply for the ARTG Program. Non-city groups may work with a city to submit an application; however, the city will be responsible for the program as well as serving as the fiscal agent.

The goal of the grant is to help cities with the cost of creating co-responder programs. In keeping with that goal, programs implemented for less than 18 months at the time of application are eligible for funding. Programs that should apply include brand new programs, programs in development, pilot programs, and first-year programs.

Current recipients of ART grant funds can apply and may receive funding for qualifying applications up to three total grant cycles depending on performance, application competitiveness, and availability of funds.

Grant amounts

Cities may apply for any amount of funding. AWC prioritizes funding grant requests for staff and services providing direct support to individuals. If an applicant's request is only partially funded, AWC will work with the applicant to create a Scope of Work and Budget Narrative to reflect the level of funding.

Submitting application

Grant applications and supporting documents must be submitted by email to grants@awcnet.org by Friday, April 12, 2024. If documents exceed email limitations, an application and materials may be submitted in multiple emails if the number of emails sent is noted by the applicant.

An application template can be accessed on [AWC's ARTG website](#).

Applications submit after Friday, April 12, 2024, will not be accepted.

Application timeline and deadline

A completed application must be submitted by Friday, April 12. The grant application timeline is as follows:

- Application period opens: Monday, March 11
- ARTG Program Webinar: Thursday, March 7
- Application period closes: Friday, April 12

AWC expects to notify applicants of their status by May 30; however, this date is subject to change.

Available funds

\$1.9 million in grant funding is available for programs covering expenditures made between July 1, 2024, through June 30, 2025.

Term of grant & grant agreement

The anticipated term of the resulting contract will begin on July 1, 2024, and end on June 30, 2025. The applicant must execute a Grant Agreement prior to July 1, 2024. A draft of the agreement is available on the program's page of AWC's website. By applying for this grant, the applicant agrees that, if their application is successful, they will be expected to agree to all terms and conditions found in that document.

Requirements for grant application

Applications for the ARTG Program must be submitted by email to grants@awcnet.org. A Word version of the grant application can be accessed here:

Applications must include the following items:

1. Program overview

- a. Provide a brief abstract of your proposed program. Include a brief summary of your program goals, need for funds, and expected outcomes. Please limit your abstract to about 500 words.

2. Organizational overview and key personnel

- a. List full names of key individuals involved in the program. Include qualifications, relevant experience, and other characteristics that make them suited for their role.
- b. Detail the roles and responsibilities of each organization involved in the program. Clearly explain lines of authority between organizations.

3. List of facility-based crisis triage and stabilization services located within program boundaries

- a. A key part of the state funding this grant is to gain better insights into the number of facility-based services located in communities in Washington. List the names, addresses, and bed counts for any facility-based crisis triage and stabilization services located within your program boundaries.
- b. If you do not have services located directly within your program boundary but do have services located in your county or neighboring county, please list those facilities.

4. Program narrative

- a. Provide an overview of your program goals, objectives, and outcomes. Please specifically address how your program will:
 - i. Reduce arrests, time spent in custody, and/or recidivism for individuals served by your program.
 - ii. Increase access and utilization of non-emergency behavioral health services.
 - iii. Reduce use of emergency services
 - iv. Increase resiliency, stability, and well-being of individuals served
- b. Provide an overview of local challenges and needs. Include a description of who your program will primarily serve.
- c. Describe any foreseen challenges your jurisdiction may face in the coming year. Explain how you plan to address these challenges.
- d. Describe the evidence-based practices that will be used in your program.
- e. Provide an overview of how your program will be staffed.
- f. Provide the current state of your program. If your program will not be operational by July 1, 2024, please provide a timeline of when your program will be operational and providing services.

5. Funding request

- a. Provide an overview of your requested funding amount. Provide details of requested funding for contracts, and staffing. Details should include a description of roles and duties of specific staffing positions and contracts.
- b. Provide an overview of other non-ART Grant funds that will be used to support this program. This can include city general funds, other private or public grants, other funding sources, or in-kind items.

6. Program sustainability

- a. The ARTG Program is meant to help cities during the startup period of creating an alternative response team program. Explain how your jurisdiction will continue to fund this program after grant funds are no longer available. Include what steps your jurisdiction will take to ensure this program will be self-funded in the near future.

7. Letters of support

- a. Letters of support should be included for listed partners, the authorized agent of the city, and any other relevant organizations. Letters of support should explain how the organization will support or directly aid the proposed program.

Frequently asked questions

What is the funding source of this grant?

The ARTG program is funded by state general fund dollars. Grant funds originate with the Health Care Authority; however, AWC oversees the grant program and administers reimbursements.

Are existing programs eligible to apply for funding?

The goal of the grant is to help cities with the cost of creating co-responder programs. In keeping with that goal, programs implemented for less than 18 months at the time of application are eligible for funding. Programs that should apply include brand new programs, programs in development, pilot programs, and first-year programs.

Current recipients of ART grant funds can apply and may receive funding for qualifying applications up to three total grant cycles depending on performance, application competitiveness, and availability of funds.

Can counties, fire districts, or other public agencies apply for funding?

No – This program is specifically to reimburse cities for costs associated with creating co-responder programs. Cities are encouraged to partner with outside organizations including counties, fire districts, non-profits, and others. However, cities must apply for funding and must serve as the lead agency.

How much funding can a jurisdiction apply for?

There is not a limit to how much funding a city can apply for. We understand that costs can vary depending on where a jurisdiction is located and want to provide adequate funding to cities to effectively stand-up programs in their communities. We encourage applicants to thoughtfully consider their needs and expenses as they complete the grant application.

Will additional funding be available in the future?

As these are state funds, we cannot guarantee that funding will continue into the future.

Our jurisdiction does not have crisis stabilization and triage beds available in our community. Should we still apply for funding?

Yes – It is not a requirement that your city has these beds available. Cities without locally available beds may consider resources located in another community, virtual options, or other feasible ways of connecting individuals to services.

What types of programs are eligible to apply?

The state budget proviso specifically mentions alternative response programs including law enforcement assisted diversion (LEAD), community assistance referral and education (CARES), and mobile crisis teams.

Programs should have a focus on serving individuals living with drug addiction, mental illness, homelessness, or individuals who are high utilizers of emergency services.

It is understood that once established, alternative response programs will serve a wide variety of individuals.