



Proof Alliance

*Preventing fetal alcohol spectrum
disorders and supporting all impacted*

FASD Prevention Grant Request for Proposal

Total Grant Funding Available: \$434,240

Grant Period: Fall 2023-June 30, 2024

Proposal Due: September 29, 2023

This Grant is made possible by funding from the Minnesota Department of Health.

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FASD Prevention Grants – Request for Proposal

Preventing Fetal Alcohol Spectrum Disorders and Supporting All Impacted

Funding Opportunity

The Fetal Alcohol Spectrum Disorder (FASD) Prevention Grant Program, administered by Proof Alliance, is made possible through the Minnesota Department of Health (MDH). The overall goal of the FASD Prevention Grant Program is to help support pregnant and parenting women in recovery from alcohol- and substance-use disorders in Minnesota. Grants will be awarded to community-based organizations that are part of regional collaboratives that promote building healthy families and prevent future births of children exposed to alcohol and drugs by providing community-based and home-based recovery maintenance services. Proof Alliance has a **total of \$434,240** available to administer to grantees. Depending on the number and quality of grant applications, we anticipate this total to be distributed amongst 1– 3 grantees. The amount of funding to each recipient will depend on a variety of factors, such as the applicant’s level of readiness, the scope of the regional collaborative, and the number of women served during the grant period. The length of the grant period is contingent on Proof Alliance continuing to receive funding from MDH.

Proof Alliance continues to develop and maintain ongoing partnerships with communities across the state. On behalf of the Minnesota Department of Health, Proof Alliance is soliciting proposals from qualified applicants to establish or strengthen regional collaborations. This grant will be awarded to organizations that provide community-based long-term recovery supportive services for women that are pregnant or parenting with histories of alcohol-use disorders and substance use disorders to reduce the incidence rates of FASD and other drug-related effects in children in Minnesota. The Long-term services must be a minimum of one year, although it is preferred to that the services continue beyond one year.

Grantees will work within their community to:

- *Assist pregnant and parenting women in recovery in obtaining support and services designed to aid them in maintaining sobriety and staying in recovery by providing long-term community-based supportive services to help resolve the myriad of complex issues related to substance use disorders.* As women transition from chemical dependency treatment programs back to the community there is a need for long-term community-based and in-home supportive services to support the recovery maintenance of this population. These services must be gender responsive and specific considering the unique characteristics of the initiation of use, the effects of the use, histories of trauma, and co-occurring mental health and physical disorders.
- *Wrap services around the extended family members and ensure that children are in safe, stable home environments and receiving appropriate and timely health care services.* We recognize that when a woman is in recovery her entire family is in recovery as substance use disorders impact the whole family unit. What constitutes “family” will be defined by each woman served through this program and can include the supportive network of relatives as well as partners, friends, and/or others whom the woman identifies as part of her family. The research is clear that relationships, especially with family and children, play an important role in women’s substance use, treatment, and relapse. Family-centered support promotes the

development of healthy and stable families, well-adjusted children, and reaching economic goals.

- *Develop and sustain appropriate, effective, and culturally informed networks of community resources that will help families build and maintain healthy and economically viable households.* Collaboration is an important element of long-term community supports for women in recovery and their families. Often these families are involved with multiple systems (e.g., child welfare, child protection, criminal justice, and social service). Histories of trauma are also common, and there is the need for trauma-informed service systems and resources to address these families' complex needs. To effectively wrap services around the families, there is a need for strategic engagement of collaborative partners and resources including engagement with communities of faith and volunteers.
- *Actively and effectively engage individuals in long-term recovery with relevant lived experience in the design and delivery services.* Living up to the motto of “Nothing about us, without us” will be an essential part of the work of the successful grantees. Active and effective engagement of women in recovery can help reduce substance use disorders and serve as models of hope. It is also a vehicle to preserve dignity and counter stigma, shame, and discrimination. The most successful programs have developed opportunities for peer support and engagement.
- *Prevent prenatal alcohol exposure in current and/or future pregnancies.* A priority focus of the funds will be on women with histories of alcohol use disorders and on the prevention of alcohol use during pregnancy and FASD.

The services described in this RFP will sustain and grow the current community momentum that has taken place since 2010, focusing on increasing the number of babies born to women in recovery that have not been exposed to alcohol previously.

Family-centered long term recovery support services are critical for women in returning to the community, establishing a chemical free lifestyle, and improving economic and social well-being of families. Poverty, stigma, lack of community connections, and poor employment prospects are some of the major challenges many women in recovery face reintegrating into the community.

Understanding those unique challenges, grantees are expected to provide long-term supports including, but not limited to, the following services:

- Increase staff training to be able to identify suspected prenatal alcohol exposure (PAE) and understand fetal alcohol spectrum disorders (FASD)
- Develop comprehensive care plans for the women and their families
- Assistance for women to develop a recovery support network
- The provision of relapse prevention tools and services
- Housing, employment, and community service support and referrals designed to aid in economic stability
- Provide referrals as needed to access health insurance, county and state services and establish a primary care medical home
- Provide referrals and assistance for accessing behavioral health and mental health services
- Provide supportive, non-judgmental, and effective parenting support and training
- Encourage screening for Sexually Transmitted Infections
- Referrals for tobacco cessation services
- Screen or refer out screening for all children in custody for physical, developmental, behavioral, and dental needs. Refer to local FASD diagnostic clinic for all infants and children suspected of prenatal alcohol exposure
- Ensure all children are up to date on immunizations

- Arrange for transportation for health care, recreational, and other services
- Access to both community-based and home-based services and supports
- Coordination with hospital of delivery for access to birth toxicology screening and results for mothers and infants born during program participation
- Administer periodic urinary analysis to clients at entry, randomly during program, and at discharge for data collection
- Assist women and families to obtain competent, dependable, and appropriate childcare
- Maintain an emergency assistance fund to support clients in maintaining sobriety
- Provide funding and access to recreational and social events

Eligibility

Grant applications must be submitted by the identified **lead organization** of an established (or emerging) **regional collaborative** that has demonstrated (or promising) outcomes providing effective community-based recovery support services for women in Minnesota. The organization may have a physical location outside of Minnesota, but it must serve individuals living in Minnesota. Grant funds are restricted to serving Minnesota residents. Priority will be given to organizations serving underserved communities.

What is a lead organization?

A lead organization is identified as the fiscal agent of the grant submission and the administrator of the grant award contract. Lead organizations must meet legal qualifications for receiving grants, and include:

- 501(c)3 non-profit organizations
- government agencies
- tribal governments
- schools, or educational institutions
- for profit businesses with demonstrated experience and outcomes

What is a regional collaborative?

A regional collaborative is a partnership between at least one local government, a community-based organization(s), and could include a family home visiting program when available. A local government may include a county or multicounty organization, a tribal government, a county-based purchasing entity, or a community health board.

Established regional collaboratives with demonstrated outcomes providing effective community-based recovery support services for women may apply for expansion funding to further develop its current work. The collaborative must identify a service gap or expansion opportunity that will justify the need for the expansion funding requested (e.g., serving more women, increasing the length of services, additional service delivery, expanding its service area).

Emerging regional collaboratives with confirmed partners and promising outcomes can also apply for funding, providing they can 1) implement effective recovery support services within 6 months and 2) demonstrate program efficacy through documented outcomes within the grant period.

All Past and current grantees are eligible to apply. An agency may apply for multiple Proof Alliance grants during the same year.

Roles and Responsibilities

Proof Alliance Responsibilities:

Proof Alliance will serve as the grant manager during the grant period and will:

- Facilitate the process to ensure that each of the selected grantees is working in partnership to ensure the consistency of reports and evaluation metrics
- Convene periodic trainings and meetings
- Carry out site visits
- Provide feedback on reports
- Provide technical assistance

The Selected Grantee Responsibilities:

- The Grantee must follow its standard procurement practices prior to entering subcontracts.
- The Grantee is responsible for complying with the Minnesota Government Data Practices Act (Minnesota Statutes Chapter 13) as it applies to all data created, gathered, generated or acquired under your grant agreement.
- The Grantee must attend mandatory grantee meetings and trainings (including FASD Training)
- The Grantee must participate in site visits as required by the grant manager
- The Grantee must participate in a grantee annual kick-off meet and greet meeting
- The Grantee is responsible for all required reports, supporting documentation, deliverables or other items as required by the grant contract to include:
 - Monthly invoices and reports (mid-year report, year-end report, and potentially a site visit report[s])
- Provide required program evaluation data:
 - Per the legislative appropriation for these grants, grantees are required to provide:
 - Demographics of people served (e.g., race, ethnicity, language, geography, sexual orientation, gender identity, age)
 - Number of referrals to community-based agencies and/or FASD diagnostic clinics
 - Counties served
 - Number of pregnant women who received services
 - Number of pregnant women with dependent children
 - Number of women who received services
 - Number of women who entered the program this year
 - Ages and race/ethnicities of women and children in the program
 - Number of dependent children
 - Number of toxic free babies born/age of gestation babies became toxic free
 - Number of babies born to mothers in the program
 - Number of women who were not pregnant and did not have dependent children at the time of enrollment
 - Number of women who had a positive UA at intake/during programming
 - Number of staff trained during the grant year and types of trainings offered

Selection Process

The selection committee (comprised of staff from Proof Alliance and MDH) staff will evaluate applications and select 1-3 finalists based on the selection criteria. Selection criteria include:

- Strength of the Collaboration
- Program Feasibility
- Program Sustainability
- Lasting Impact on FASD Prevention

- Program Design and Evaluation

Proof Alliance will communicate its decision by email **within four weeks** from the application deadline. Finalists may be asked to provide additional information about your proposal, your organization, or your financials. We expect that the contract can be executed and the work can commence at the **beginning of November**.

Application Instructions

Applications must be submitted by **September 29, 2023 at 4pm**, through the Proof Alliance grant application portal <https://www.proofalliance.org/grants>. Make sure to include all items listed in the proposal check list, including required signatures. Any questions about the application process can be sent to Alyssa Huether at alyssa.huether@proofalliance.org.

About Proof Alliance

Alcohol use disorders are a serious issue for both a pregnant person and their children. Fetal alcohol spectrum disorders (FASD) is a range of physical, neurobehavioral and/or learning disabilities that can result from prenatal exposure to alcohol. The most significant impact is the resulting brain injury, which can be permanent and lifelong. In addition, prenatal alcohol exposure has also been linked to infant mortality issues including an increased risk of miscarriage, stillbirth, preterm delivery, low-birth weight, growth deficits, microcephaly, birth defects and sudden infant death syndrome.

Since 1998, Proof Alliance has had a dual purpose: providing education on the impact of alcohol use during pregnancy and championing efforts to enable individuals living with an FASD to reach their full potential. The mission of Proof Alliance is to prevent FASD and to support all impacted throughout Minnesota and beyond. Proof Alliance works to eliminate birth defects caused by alcohol consumption during pregnancy and to improve the quality of life of the individuals and families affected by FASD by providing resources and support. Proof Alliance continues to develop and maintain ongoing partnerships with communities across the state, and by building partnerships and improving services, Proof Alliance generates awareness of the importance of alcohol-free pregnancies and supporting those impacted.



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Application Checklist

1. Cover letter signed by the Executive Director of lead organization
2. Information about Lead Organization
3. Description of Regional Collaboratives
4. Goal, Objectives, Activities, and Timeline
5. Program Design and Evaluation
6. Program Feasibility
7. Leadership, Roles, and Staffing
8. Anticipated Challenges and Solutions
9. A letter of support from each partner in the regional collaborative
10. Copy of Lead Organizations' Anti-Discrimination Policy
11. Program Budget
12. List of Other Funding Sources for the Program (if applicable)
13. Organization's current year operating budget
14. Financials:
 - a. Most recent actual budget to actual
 - b. Most recent year-end financial statements
 - c. Most recent tax return (e.g., Form 990)
15. Proof of tax-exempt status (if applicable)

