APPENDIX E- VENDOR WORK PLAN TEMPLATE
BEHAVIORAL HEALTH RESOURCE DEVELOPMENT
COMPONENT #5: SERVICE DELIVERY AND INTEGRATION
THE COMMUNITY REINFORCEMENT APPROACH AND FAMILY TRAINING (CRAFT)

Parts of RFP HSS-26-079, Appendix B-Scope of Work and Technical Requirements are restated for vendor completion of this Work Plan Template.

Nationally, the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA's) leads public health efforts to advance behavioral health. Its recent strategic priorities have focused on preventing substance misuse and addiction, addressing serious mental illness, expanding crisis services, and improving access to evidence-based treatment and recovery support programming for substance use, mental, and co-occurring disorders. These priorities are further strengthened by the SUPPORT Act Reauthorization (2025) which prioritizes scalable recovery infrastructure and non-clinical supports for individuals with substance use disorders.

A single state agency for behavioral health is the designated state-level entity responsible for managing federal funds designated to achieve identified federal priorities and administering programs for substance use and mental health services within a state. It is the official body that applies for, receives, and oversees funds for prevention, treatment, and recovery, though it may delegate operational responsibilities to other state, local, or private entities. The State of Delaware, Department of Health and Social Services, Division of Substance Abuse and Mental Health (DSAMH) is responsible for adhering to the responsibilities assigned in the role of the single state agency for the State of Delaware.

As the single state agency, DSAMH is responsible for the development, implementation, maintenance, and oversight of a state plan for prevention, treatment, and recovery support; coordination of state and federal funding; and development of standards for the certification and approval of prevention, treatment, and recovery support programs. The Federal Fiscal Year (FFY) 2026-2027, "Delaware Behavioral Health Assessment and Plan" aligns to key federal priorities and emphasizes the need for an effective, person-centered, system of integrated care and behavioral health resource development.

<u>Overview</u>
The mission of the DSAMH is to promote health and recovery by ensuring that Delawareans have access to quality prevention and treatment for mental health, substance use, and gambling conditions. To accomplish its mission, DSAMH aims to strengthen and broaden Delaware's behavioral health system through a comprehensive behavioral health resource development initiative. This initiative supports the priorities outlined in DSAMH's state plan and aligns with federal goals related to behavioral health system transformation, justice diversion, peer-led service integration, and community-based recovery supports. Behavioral health resource development involves building and enhancing the assets, funding mechanisms, and infrastructure necessary to promote the mental, emotional, and social well-being of a population. Through this initiative, DSAMH seeks to advance prevention efforts, expand access to recovery supports, build workforce capacity, strengthen cross-system collaboration,

and integrate family and natural support-focused strategies to improve overall behavioral health outcomes across diverse communities.

The initiative is structured around four interrelated components that work collectively to enhance the availability, quality, and sustainability of behavioral health resources statewide:

1. Component 1: Building and Refining Services for Targeted Subpopulations – Mental Health Court Peer Support. Focuses on strengthening peer support services within the judicial system to improve engagement, reduce recidivism, and promote recovery for individuals participating in the Mental Health Court.

2. Component 2: Workforce Development – Peer Workforce Development and Certification Training. Expands the capacity of Delaware's peer recovery workforce through certification training, competency development, and continuing education aligned with the Delaware Certification Board standards.

3. Component 3: Prevention-Based and Recovery Support Non-Direct System Development Strategies. Builds statewide prevention and recovery support capacity through community/partnership development activities (such as marketing and communication), planning and coordination of services and public education activities to create healthy and recovery-oriented communities.

4. Component 4: Partnership and System Integration – Crisis Intervention Team Training. Enhances collaboration between law enforcement and behavioral health systems by equipping officers with the skills and knowledge to safely de-escalate behavioral health crises and connect individuals to appropriate community resources.

5. Component 5: Service Delivery and Integration – The Community Reinforcement Approach and Family Training (CRAFT). Strengthens the capacity of family members, friends, and other natural supports to support individuals with substance use challenges through skill-building, education, and non-confrontational engagement strategies that promote positive change and wellbeing.

Together, these components support DSAMH's goal of building a coordinated and sustainable behavioral health system that increases access to recovery-oriented services, strengthens community readiness, and enhances outcomes for individuals and families across Delaware. By investing in service development, workforce training, community capacity-building, cross-system collaboration, and family and natural support-focused strategies, the initiative ensures a more resilient, person-centered, and effective behavioral health landscape statewide.

Name of VENDOR is a bidder for RFP HSS-26-079, Behavioral Health Resource Development to perform the service functions required to successfully implement and maintain Component 5: Service Delivery and Integration – The Community Reinforcement Approach and Family Training (CRAFT).

Family members, friends, and natural support networks are essential partners in promoting recovery and wellbeing for individuals experiencing substance use challenges. Component #5, which focuses on the Community Reinforcement Approach and Family Training (CRAFT), strengthens these supports through skill-building, education, and evidence-based engagement strategies. Effective service delivery and integration under this component ensure that CRAFT is embedded within the broader behavioral health system, connecting family and natural supports with clinical services, community resources, and ongoing recovery initiatives. By equipping loved ones with practical tools to encourage positive change in non-confrontational ways, this approach enhances treatment effectiveness, builds stronger support networks, and advances the State's behavioral health resource development goals by creating a more coordinated, resilient, and recovery-oriented system of care.

The Community Reinforcement Approach and Family Training (CRAFT) is an evidence-based, skills-focused model designed to help family members, friends, and other natural supports effectively assist individuals experiencing substance use challenges. CRAFT emphasizes non-confrontational strategies, behavioral reinforcement, and motivational principles to encourage positive change while promoting the wellbeing of the support network itself. The goals of the CRAFT initiative are to strengthen participants' skills in communication, relationship-building, and boundary-setting; enhance their ability to recognize substance use patterns and engage loved ones in treatment; and improve overall resilience and functioning within families and support networks.

BRIEF VENDOR DESCRIPTION

Directions: In the box below, Vendor shall provide the name of their organization, the organization mission, the address where the Vendor is administratively based, the location(s) of intended service delivery, how the vendor shall facilitate accommodation needs for the target population, and a description of operational hours and scheduling plan for the project.

Name of Vendor	
State Mission of Organization	
Address where Vendor Administrative Services is Based	
Address(es) where Vendor shall conduct Component #5 service function(s) and associated service activities.	
Describe operational hours and scheduling plan for proposed service activities within the proposed service function(s)	

*Vendor may add additional rows as needed.

Client Target Population

Name of VENDOR agrees to design, implement and maintain CRAFT services adult residents (18 years or older) of Delaware. The target population includes:

- Family members, friends, and other natural supports (i.e., spouses, parents, adult children, siblings, partners, caregivers) of individuals experiencing substance use challenges, regardless of whether the individual is currently engaged in treatment.
- Concerned Significant Others (CSOs) seeking skills-based, non-confrontational strategies to support a loved one with substance use challenges.
- Families and natural supports impacted by substance use who may be experiencing stress, conflict, emotional distress, or reduced functioning because of a loved one's substance use.

Service Functions

The vendor shall deliver CRAFT-based services that are structured, evidence-based, and responsive to the needs of families, friends, and other natural supports of individuals experiencing substance use challenges. The primary service functions of Component #5 for the target population include:

a. CRAFT Programming: The Vendor shall develop, implement and maintain in collaboration with DSAMH, CRAFT-based services that teach families how to support positive behavior change without confrontation in alignment with the CRAFT evidenced-based framework.
   - Provide a structured (DSAMH approved) CRAFT curriculum, typically delivered over a multi-session model (i.e., up to 12 sessions), using non-confrontational and motivational strategies.
   - Deliver services in group-based and/or individual formats, as appropriate to community needs and accessibility considerations.
   - Ensure services are trauma-informed, socially responsive, and inclusive of population-based approaches

b. Skills Development and Education: This function focuses on building practical skills that enable participants to communicate effectively, reinforce healthy behaviors, and set appropriate boundaries.
   - Train participants in effective communication strategies that promote collaboration, respect, and clarity.
   - Build participant capacity to recognize substance use patterns and related behavioral triggers.
   - Teach positive reinforcement techniques to encourage healthy, pro-social behaviors.
   - Support the development of healthy boundary-setting and self-care practices for family and natural supports.

c. Engagement and Service Integration: This function supports coordinated efforts to connect families, natural supports, and individuals with substance use challenges to appropriate treatment and recovery resources.
   - Support families and natural supports in engaging their loved ones in treatment and recovery-oriented services when appropriate.

- Coordinate with behavioral health providers, treatment programs, and community-based organizations to ensure alignment and continuity of care.
- Provide referrals and warm handoffs to additional behavioral health, recovery, or family support resources as needed. The vendor must use the Delaware Treatment and Referral Network (DTRN) E-referral module when making referrals to behavioral health treatment and other recovery support services as applicable. Vendors can refer to Appendix F of this RFP for information on the DTRN User Agreement and Provider Standards.

d. Participant Wellbeing and Resilience: This function promotes the emotional health, stability, and coping capacity of participants, independent of their loved one's treatment decisions.
   - Promote emotional wellbeing, stress reduction, and resilience among participants regardless of treatment engagement outcomes of the individual with substance use challenges.
   - Incorporate strategies that reduce family conflict, anxiety, and emotional distress while strengthening supportive relationships.

e. Training Accessibility: This function ensures statewide access to CRAFT services through flexible delivery formats that reduce geographic and logistical barriers.
   - Offer CRAFT programming through in-person, virtual, and hybrid delivery formats.
   - Schedule sessions at varied times, including evenings or weekends, as feasible, to accommodate participant availability.
   - Utilize virtual platforms that support confidentiality, ease of use, and consistent participant engagement across Delaware.

f. Documentation and Reporting-Accurate collection and maintenance of all required documentation, including:
   - Participant training and certification records
   - Attendance and competency evaluations
   - Compliance tracking and reporting to DSAMH

VENDOR RESPONSE TO SERVICE FUNCTIONS

Name of VENDOR agrees to conduct primary service functions for Behavioral Health Resource Development, Component #5, serving the target population as outlined. Name of VENDOR shall submit any policies, processes, marketing documentation, training curricula, etc. in place that support the operation of the service functions as requested by the Division as part of its contract monitoring process.

Directions: Vendor can add any additional content as needed, in the box below, that supports adherence to Service Functions:

Staffing Requirements

The vendor shall provide qualified personnel to design, coordinate, and deliver CRAFT programming in alignment with the CRAFT Framework and Delaware-specific requirements. Staffing shall, at minimum, include:

a. Program Leadership: The Vendor must designate a Program Manager responsible for overall oversight of CRAFT service delivery.
   - The Program Manager must have experience in behavioral health or family-focused interventions and demonstrated knowledge of evidence-based practices, preferably CRAFT.
   - Responsibilities include: overall implementation, supervising staff, ensuring program fidelity, monitoring outcomes, coordinating with DSAMH, and providing ongoing training and coaching.

b. Certified CRAFT Facilitators:
   - Facilitators trained in the Community Reinforcement Approach and Family Training model or commit to obtaining such training prior to service delivery.
   - Facilitators shall have relevant education and/or professional experience in behavioral health, substance use services, social work, counseling, or a related field.
   - Maintain ongoing professional development and fidelity to the CRAFT model.

All staff must complete ongoing professional development in the following areas:

- Trauma-informed pedagogy and instruction
- Ethical standards and boundaries
- Competency-based education methods and evaluation tools
- Socially responsive and population-based approaches

VENDOR RESPONSE TO STAFFING REQUIREMENTS

Name of VENDOR agrees to comply with the staffing requirements.

VENDOR IMPLEMENTATION PLAN

Directions: In the chart below, Vendor shall identify the intended Implementation Plan in chart format (shade the appropriate contract month (1-12) including:

- Milestones, Target Dates, and Expected Completion Dates: For each service function, identify key milestones, target dates, and expected completion dates for all planned activities.
- Activities from Start-Up through Full Implementation: Describe activities required for each service function, including start-up tasks, recruitment, hiring, onboarding, and orientation of key staff.
- Metrics for Tracking Progress and Outcomes: Include tracking of measurable indicators for each proposed service function and proposed associated service activities outlined in Component #5

Key Activities	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**11**	**12**

Recruitment and hiring												
Orientation of staff												
Implementation of project												
ENTER OTHER ACTIVITIES THAT SUPPORT COMPONENT #5 IMPLEMENTATION AND SERVICE FUNCTION COMPLETION												
Performance reports												
Monthly provider/DSAMH meetings												
Monthly invoices												

*Vendor may add additional rows as needed.

Directions: Vendor can add any additional content, in the box below, that supports the implementation of the project:

Adherence to Policies and Procedures

Vendors are required to adhere to all federal, state and DSAMH policies, processes, procedures, requirements, rules, laws, and regulations, including, but not limited to, those listed under RFP# HSS-26-079, Behavioral Health Resource Development for Component #5. In settings where these policies do not apply in part or full, the Vendor must detail this and obtain written approval from DSAMH. Such policies include but are not limited to:

- DSAMH007 – Contracted Religious Organizations
- DSAMH009 – Nicotine Policy
- DSAMH011 – Trauma Informed Care
- DSAMH012 – Provision of Culturally and Linguistically Appropriate Services
- Criminal Background Check
- Human Subjects Review Board
- Inclusion
- Title VI of the Civil Rights Act of1964, as amended (codified at 42 USC 2000d et seq.).
- The Drug-Free Workplace Act of 1988.
- The Americans with Disabilities Act (PL 101-336).
- State of Delaware, Office of Management and Budget, Budget and Accounting Manual. https://budget.delaware.gov/accounting-manual/index.shtml.

VENDOR RESPONSE TO ADHERENCE TO POLICIES AND PROCEDURES

Name of VENDOR agrees to adhere to the Policies and Procedures outlined. In settings where these policies do not apply in part or full, the Vendor can detail this in the box below. Name of VENDOR shall submit any policies in place that support the agreeance of identified policies, processes, and regulations as requested by the Division as part of its contract monitoring process.

Name of VENDOR acknowledges that the Division reserves the right to modify, replace, or add to these policies with 60 days' written notice to Name of VENDOR. In the event of a policy modification or addition of new policy, Name of VENDOR agrees to formulate a plan, in writing, regarding its compliance strategy with the modified or new policy.

Directions: Vendor can add any additional content as needed, in the box below, that supports adherence to Policies and Procedures:

Fiscal Requirements and Funding Restrictions

Selected vendor(s) will be paid on a cost reimbursement basis. Annual funding amount determination is contingent to availability of funds, funding source, and funding source priorities.

VENDOR RESPONSE TO ADHERENCE TO FISCAL REQUIREMENTS AND FUNDING RESTRICTIONS

Name of VENDOR shall submit any policies in place that support the agreeance of fiscal requirements and funding restrictions identified in the RFP Scope of Work for Component #5 and outlined in the contract as requested by the Division as part of its contract monitoring process.

Name of VENDOR shall prominently display on all materials related to and developed for this project:

"Funding for this project has been provided by Delaware Health and Social Services' Division of Substance Abuse and Mental Health through:

- *Grant number (to be provided in executed contract) from the State Opioid Response 4.0 grant administered by the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment.*
- *Grant number (to be provided in executed contract) from the Substance Use Prevention, Treatment, and Recovery Services Block Grant administered by the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment.*
- *Grant number (to be provided in executed contract) from the Block Grants for Community Mental Health Services grant administered by the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services, Division of State and Community Systems Development.*
- *Grant number (to be provided in executed contract) from the Strategic Prevention Framework Partnerships for Success grant administered by the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Prevention*

Contents are solely the responsibility of the authors and do not necessarily represent the official views of the Delaware Health and Social Services' Division of Substance Abuse and Mental Health or SAMHSA."

Name of VENDOR shall complete and submit the Federal Funding Accountability and Transparency Act (FFATA) Form referenced in the RFP, as required under the federal funding requirements outlined therein.

Evaluation and Performance Measures

The following content establishes sustainable systems to understand the program and its outcomes as simply as possible, integrating data collection into current systems wherever possible. DSAMH has the right to conduct any onsite evaluation and monitoring of the Vendor's activity at any time.

The extension of the service period of the contract is based on, but not limited to, the past performance of the Vendor. The determination shall be based on, but not limited to, considerations of the following factors:

Performance Objective	Method of Assessment
Provide services as identified in Scope of Services.	Monthly provider meeting participation, Review of program reports, third-party feedback, on-site monitoring, as applicable.
Compliance with all State and Federal statutes and regulations as applicable for the operation of services identified in this Scope of Work.	Review of program reports, third-party feedback, on-site monitoring, as applicable.
Adhere to requirements in Professional Service Agreement, Divisional Requirements, Scope of Services, and Contract Budget information.	Monthly provider meeting participation, Review of program reports, third-party feedback, Annual submission of policies, procedures, and plans outlined in scope of work, on-site monitoring as applicable.
Reconcile accounts before submitting invoices.	Review of Vendor invoices and back-ups to the invoices.
Submit required invoices on time.	Review of Invoices.
Deliver required reports.	Review of Reports and Deadlines.

VENDOR RESPONSE TO EVALUATION AND PERFORMANCE MEASURES

Name of VENDOR agrees to the following responsibilities as outlined for Evaluation and Performance Measures:

- Participate in all meetings, as scheduled, related to program/project management and contractual administrative functions.

- Coordinate and communicate all work product efforts in conjunction with the Division's designated Project Lead(s).
- Submit a Continuity of Operations (COOP) Plan annually as part of the Division's contract monitoring process. COOP Plans shall guide the Vendor in maintaining essential operations and restoring critical business functions during and after a disaster.
- Comply with all performance objectives for selected service functions and associated service activities, as well as all contractual requirements outlined in the executed contract.

Quality Improvement

Vendor shall implement a method for identifying, evaluating, and correcting deficiencies in the quality and quantity of services to be provided under any resulting contract arising out of the RFP. The quality assurance plan shall include the proposed indicators essential to assess the Vendor's performance and the overall adequacy of services being provided to individuals in the target population.

1. Vendor must comply with HIPAA and 42 CFR, Part 2.
2. Vendor must comply with regular program and service reporting.

VENDOR RESPONSE TO QUALITY IMPROVEMENT

Name of VENDOR agrees to submit an updated quality assurance plan annually as part of the Division's contract monitoring process.

This plan should include a description of how the fidelity of the services provided will be sustained (i.e. methodology, reporting mechanisms used, etc.). This plan shall include performance targets and how these will be evaluated, tracked, and reported. Additionally, this plan shall include how client satisfaction and stakeholder satisfaction will be assessed.

Measurement and Key Outcome Indicators

The Vendor shall implement a structured reporting cadence, established at contract initiation, to monitor progress toward project milestones, outputs, and outcomes. All indicators when describing participants must be disaggregated by gender, age group (18–24, 25–35, 36–60, 60+), race/ethnicity, and county of residence to support an inclusive analysis. DSAMH may request supplemental reporting as necessary. The provider report shall contain the following performance measures:

a. Program Access and Retention

Performance indicators:

- Number of CRAFT cohorts, groups, or sessions offered statewide
- Number of participants enrolled in CRAFT services
- Number of participants completing program

Targets consideration for indicators:

- ≥60% of enrolled participants complete the full CRAFT curriculum

- ≥60% average attendance across scheduled sessions
- Continuous statewide availability of CRAFT services
- Year-over-year increase in attendance and completion rates

b. Participant Skill Development and Wellbeing

Performance indicators:

- Percentage of participants demonstrating increased knowledge of CRAFT strategies based on pre- and post-assessments
- Percentage of participants reporting increased confidence in applying CRAFT skills (i.e., communication, boundary-setting, positive reinforcement)
- Percentage of participants reporting reduced stress or improved coping following program participation

Targets consideration for indicators:

- ≥60% of participants demonstrate increased knowledge of CRAFT strategies from pre- to post-assessment
- ≥60% of participants report increased confidence in applying CRAFT skills
- ≥60% of participants report improvement in at least one wellbeing measure
- Year-over-year increase in measures

c. Quality Improvement Review

As part of the quality improvement plan, reporting must also highlight issues raised either by the Vendor as continuous improvement objectives along with recommendations to address these objectives.

Presently, the Vendor shall submit program reports to DSAMH_peer@delaware.gov as agreed by the designated DSAMH lead. DSAMH shall establish the content and format structure of the report. As DSAMH reviews its various reporting mechanisms for the purpose of standardization across its behavioral health ecosystem, DSAMH reserves the right to shift the mechanism of how program information is submitted which may include submission via a state contracted cloud-based survey platform. DSAMH shall provide the Vendor 60 days' notice of any report submission changes in writing.

DSAMH reserves the right to claw back or hold funds for program reports not submitted.

VENDOR RESPONSE TO MEASUREMENT AND KEY OUTCOME INDICATORS

Name of VENDOR agrees to submit all required metrics as outlined for the selected service function(s) and associated service activities awarded. Name of VENDOR acknowledges that the Division reserves the right to shift the mechanism of how monthly program information is submitted provided Name of VENDOR receive 60 days' notice of any report submission changes in writing.