

Jail and Prison Reentry COVID-19 Impact Enhancements

RFP for Coronavirus State and Local Fiscal Recovery Funds

Buncombe County Government

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Application Form

Question Group

Buncombe County requests proposals for projects to help the community recover from and respond to COVID-19 and its negative economic impacts.

Buncombe County has been awarded \$50,733,290 in Coronavirus State and Local Fiscal Recovery Funds (Recovery Funding), as part of the American Rescue Plan Act. This infusion of federal resources is intended to help turn the tide on the pandemic, address its economic fallout, and lay the foundation for a strong and equitable recovery.

Buncombe County is committed to investing these funds in projects that:

- Align to county strategic plan and community priorities
- Support equitable outcomes for most impacted populations
- Leverage and align with other governmental funding sources
- Make best use of this one-time infusion of resources
- Have a lasting impact

Proposals shall be submitted in accordance with the terms and conditions of this RFP and any addenda issued hereto.

[Click here for the full terms and conditions of the RFP](#)

Coronavirus State and Local Fiscal Recovery Funds*

Name of Project.

Jail and Prison Reentry COVID-19 Impact Enhancements

Amount of Funds Requested*

\$399,000.00

Recovery Fund Eligible Category*

Please select one:

Address disparities in public health outcomes

Brief Project Description*

Provide a short summary of your proposed project.

Given the disproportionate impacts of COVID 19 on the justice-involved population, Buncombe County's Justice Services Department's Prison and Jail Reentry programs have seen an increase in both the amount of individuals seeking reentry supports and the severity of their needs. Further, while this population is at higher risk for both exposure to, and complications from COVID 19, they lag behind the general population in

vaccination rates, access to healthcare services, and general education about pandemic risks and protection. Our proposal seeks to address both the timely increase in reentry needs due to COVID 19, and the vaccination and preventative care disparities in justice involved individuals.

Project Plan*

Explain how the project will be structured and implemented, including timeframe.

We're seeking a three year staffing and budgetary enhancement to our existing services, with a focus on community health engagement, and addressing the social determinants of health. Primarily, our enhancement would consist of the addition of two community health workers to our reentry teams. A community health worker is a frontline public health worker who is a trusted member and/or has a close understanding and competency of the community served – in our case, individuals who have experienced incarceration. This close relationship enables them to serve as an intermediary between health services and the community, to facilitate improved program access, treatment adherence, and culturally competent service delivery. Additionally, we propose a three year enhancement of our support service budget of \$50,000 per year, in order to address the social determinants concretely support our clients with medication assistance, transitional housing, transportation, and other basic needs.

Statement of Need*

Describe the need that this project will address. Include data to demonstrate the need, and cite the source of the data.

Buncombe County's Prison and Jail Reentry programs screen more than 500 individuals per year, identifying and meeting needs such as case management; peer support; housing; linkage to medical, substance use, and behavioral health treatment; employment; transportation; linkage public benefits; and other basic needs. Almost 9 out of 10 program participants meet criteria for a substance use disorder, and the majority of participants present with co-occurring substance use and mental health disorders.

According to provisional CDC data, November 2019 to October 2020 saw the highest number of drug overdose deaths ever recorded in a 12 month period. Additionally, the pandemic, and its mitigation response, have been associated with increased mental health challenges. Per the CDC, compared to the previous year, 2020 saw increases in symptoms of anxiety and depressive disorder, suicidal ideation, trauma and stressor related disorders, and new or increased substance use to cope with stress or emotions related to the pandemic.

Given these broad and disparate impacts on the populations our programs serve, we anticipate to see a medium term increase in both the numbers of individuals seeking support services, and the severity of their needs. Individuals reentering the community from jail and prison will return with a lower baseline of functioning and resources due to limited service offering during their incarcerations, and will have returned to a community experiencing a dramatic acceleration in substance use and mental health symptoms, along with restricted access to treatment. Further, our population will be at increased risk for complications (including hospitalization and death) from COVID-19. Enhancing our existing programming with community health workers will increase our participants' access to vaccinations, medical care for underlying conditions, and linkage to treatment and housing.

Link to COVID-19*

Identify a health or economic harm resulting from or exacerbated by the public health emergency, describe the nature and extent of that harm, and explain how the use of this funding would address such harm.

Individuals incarcerated during the COVID-19 pandemic faced increased risk of exposure and death, according to data from the Equal Justice Initiative. Per research done by the Marshall Project, 1 in every 5 incarcerated individuals has had the virus. Further, the pandemic reduced the number of correctional staff which, along with safety protocols limiting groups and visitors, restricted the services available to incarcerated individuals, including medical, mental health, substance use, education, vocational, and other support services. For justice-involved individuals, or those at risk for justice-involvement, inequities in access to technology meant that the sudden move from in-person to virtual treatment likely reduced access to care, leading to an acceleration in symptoms.

Per the CDC, substance use disorders are an underlying medical condition associated with high for severe COVID-19 illness. People with a substance use disorder were 1.5 more likely to have COVID-19 than the general population, and were more likely to experience hospitalization (41% versus 30%) and death (9.6% versus 6.6%). Beyond this increased susceptibility to and severity resulting from the virus, the overall impact of the pandemic has been detrimental to individuals with substance use and mental health disorders.

Further, the overall impact of the pandemic and its mitigation has resulted in conditions that have exacerbated the conditions that most chronically impact our population (mental health, substance use, trauma, bereavement, etc) while also reducing access to services but within and outside of detention. Our programs will need to be prepared to serve a growing population, with increased severity of need, while also addressing a new need for vaccination and access to both preventative and responsive medical care related to COVID 19, including the possibility of future spikes or variants.

Population Served*

Define the population to be served by this project, including volume and demographic characteristics of those served.

The Buncombe County Justice Service Department, together with RHA, currently operates Prison and Jail Community Reentry Programs. These programs work with motivated individuals to reduce barriers to recovery and role-fulfillment upon their return to the community following jail or prison incarceration, respectively. Primarily, the programs seeks to link individuals to community resources and services to address needs related to mental health and substance treatment, housing, employment, transportation, medical, and other basic needs. Together, these programs typically screen and serve over 500 individuals per year. As described in our statement of need, our reentry programs serve a population disproportionately impacted by the pandemic. These impacts include a higher likelihood of exposure, contraction, and complication from the virus itself.

Results*

Describe the proposed impact of the project. List at least 3 performance measures that will be tracked and reported. If possible, include baselines and goals for each performance measure.

The proposed impact of our project is 20% increase in the overall number of individuals served, along with improvements in several key performance measures. These measures include the percentage of our participants who are fully vaccinated (a new measure), the percentage of individuals who are engaged in primary medical care (a new measure), and the percentage of individuals reporting in improvement in symptoms related to substance use and mental health disorders (an existing measure form which we seek a 10% improvement.) Further, these results will be broken down by demographics, including sex and race.

Goals	Year 1	Year 2	Year 3
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Total Participants Screened (baseline 500)	600	600	600	
% of participants fully vaccinated	55%	65%	75%	
% of participants engaged in primary care	50%	60%	70%	
% of participants reporting reduction in MH/SA symptoms (baseline 70%)	75%	82.5%	91%	

Evaluation*

Describe the data collection, analysis, and quality assurance measures you will use to assure ongoing, effective tracking of contract requirements and outcomes.

Data will be collected at screening and updated at each regular contact (weekly) by program case managers and community health workers. Further, outcome-specific goals will be updated quarterly. This data will be captured, tracked, and reported using Buncombe County’s Justice Service Department’s Management Information System APRICOT. Self-reported changes in symptoms of substance use and mental health will be tracked using the GAIN (Global Appraisal of Individual Needs) screener, as series of measures with established psychometrics for justice involved individuals, which is already built in to the county’s existing MIS.

Equity Impact*

How will this effort help build toward a just, equitable, and sustainable COVID-19 recovery? How are the root causes and/or disproportionate impacts of inequities addressed?

Both COVID 19 and our criminal justice system have a disproportionate impact on marginalized populations. For example, per the American Bar Association, African-Americans are incarcerated in state prisons at five times the rate of whites, and Latinos are imprisoned at a rate that 1.4 times the rate of whites. These disparities are reflected in the demographics of the participants our programs serve. Per the CDC, people from racial and ethnic minority groups were more likely to have increased COVID 19 disease severity upon admission compared with non-Hispanic white people. The same disparities were observed increased likelihood of needing intubation, ICU admittance, and death.

Per the CDC, the mechanisms that likely explain disparities in the transmission and severity of COVID 19 include discrimination, restricted healthcare access, employment in essential settings, education and wealth gaps, and lack of safe stable housing. Our proposal seeks to directly address the mechanisms. By employing community health workers with a close understanding and competency of the community served, we’ll be able to advocate for our clients to overcome discrimination, as well as serve as direct link to healthcare access. Through our supportive services, we’ll seek to place participants in safe stable housing, and make links to employment and education opportunities.

A snapshot of the population demographics for the Buncombe County Detention Facility on 7/10/21 included the following: Of the 400 total inmates being housed, 288 (72%) were identified as White, 106 (26.50%) were identified as Black, 4 (1%) were identified as American Indian, and 2 (0.50%) were identified as Asian/Pacific. In order to ensure service delivery is aligned with jail population we will strive to ensure our demographics is reflective of the jail population and by continued use of a racial equity tool ensure services are accessible and equitable.

Project Partners*

Identify any subcontractors you intend to use for the proposed scope of work. For each subcontractor listed, indicate:

- 1.) What products and/or services are to be supplied by that subcontractor and;

2.) What percentage of the overall scope of work that subcontractor will perform.

Also, list non-funded key partners critical to project.

Buncombe Count Justice Services currently contracts with RHA Health Services to provide diversion and re-entry support. The County launched an RFP last spring and RHA successfully won this contract. This grant would provide linkage to medical care and improve social determinants of health. Our project will seek to build on existing relationships that provide linkage to medical care, housing, mental health/substance use treatment, employment, and educational/vocational services. Our existing partnerships include Western North Carolina Health Services (WNCHS), Dale Fell, RHA, October Road, Family Preservation Services, Homeward Bound, Asheville Housing Association, AB Tech, YMI, and others. The primary relationship will be one of referral and linkage, as opposed to contracted support.

Capacity*

Describe the background, experience, and capabilities of your organization or department as it relates to capacity for delivering the proposed project and managing federal funds.

Buncombe County's existing Prison and Jail Reentry Programs have a proven background and capacity to deliver support to our population. Our current team consists of 6 professionals employed full time in delivering community based services. A dedicated program manager, Licensed Clinical Social Worker/Licensed Clinical Addictions Specialist, 2 case managers, a Registered Nurse, and a Certified Peer Support Specialist.

Budget*

Provide a detailed project budget including all proposed project revenues and expenditures, including explanations and methodology. For all revenue sources, list the funder and denote whether funds are confirmed or pending. For project expenses, denote all capital vs. operating costs, and reflect which specific expenses are proposed to be funded with one-time Buncombe County Recovery Funds.

Download a copy of the budget form [HERE](#). Complete the form, and upload it using the button below.

Recovery-Funds-budget-Reentry.xlsx

Special Considerations*

Provide any other information that might assist the County in its selection.

none at this time.

File Attachment Summary

Applicant File Uploads

- Recovery-Funds-budget-Reentry.xlsx

Coronavirus State and Local Fiscal Recovery Funds Proposed Project Budget

Organization Name:	Justice Services Department
Project Name:	COVID 19 Community Health Reentry Enhancement
Amount Requested:	\$399,000

Proposed Project Revenue Funder	Amount	Confirmed or Pending?	Notes
Proposed Buncombe COVID Recovery Funds	\$399,000	Pending	
List other sources here			
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Total	\$ 399,000.00		

Proposed Project Expenses	Proposed Recovery Funds	Other Funds	Total	Capital or Operating Expense?	Notes
Community Health Worker Full Time Year 1	\$ 60,000.00		\$ 60,000.00	Operating	
Community Health Worker Part Time Year 1	\$ 30,000.00		\$ 30,000.00	Operating	
Community Health Worker Full Time Year 2	\$ 60,000.00		\$ 60,000.00	Operating	
Community Health Worker Half Part Year 2	\$ 30,000.00		\$ 30,000.00	Operating	
Community Health Worker Full Time Year 3	\$ 60,000.00		\$ 60,000.00	Operating	
Community Health Worker Half Part Year 3	\$ 30,000.00		\$ 30,000.00	Operating	
Supportive Services Housing Year 1	\$ 30,000.00		\$ 30,000.00	Operating	
Supportive Services Housing Year 2	\$ 30,000.00		\$ 30,000.00	Operating	
Supportive Services Housing Year 3	\$ 30,000.00		\$ 30,000.00	Operating	
Supportive Services Basic Needs Year 1	\$ 3,000.00		\$ 3,000.00	Operating	
Supportive Services Basic Needs Year 2	\$ 3,000.00		\$ 3,000.00	Operating	
Supportive Services Basic Needs Year 3	\$ 3,000.00		\$ 3,000.00	Operating	
Supportive Services Medical Year 1	\$ 8,000.00		\$ 8,000.00	Operating	
Supportive Services Medical Year 2	\$ 8,000.00		\$ 8,000.00	Operating	
Supportive Services Medical Year 3	\$ 8,000.00		\$ 8,000.00	Operating	
Supportive Services Travel/Transportation Year 1	\$ 2,000.00		\$ 2,000.00	Operating	
Supportive Services Travel/Transportation Year 2	\$ 2,000.00		\$ 2,000.00	Operating	
Supportive Services Travel/Transportation Year 3	\$ 2,000.00		\$ 2,000.00	Operating	
			\$ -		
			\$ -		
			\$ -		
List expenses here			\$ -		
List expenses here			\$ -		
List expenses here			\$ -		
List expenses here			\$ -		
Total			\$ 399,000.00		