

EXHIBIT K-3
YOUTH PREVENTION SERVICES
STATEMENT OF WORK

I. PURPOSE

The purpose of the Youth Prevention (YP) Programs is to provide direct service to youth, families, and communities using HHSC approved Education/Skills Training programs. Strategies shall address underlying factors that lead to substance use and behavioral health challenges, including adverse childhood experiences, social determinants of health, or other youth, family and community risk and protective factors. YP Programs follow a comprehensive program design that includes the [National Academies of Sciences, Engineering, and Medicine’s universal, selective, and indicated prevention classifications](#). These programs provide direct service to youth, families, and communities using HHSC approved Education/Skills Training programs. Strategies shall address underlying factors that lead to substance use and behavioral health challenges, including adverse childhood experiences, social determinants of health, or other youth, family and community risk and protective factors. Strategies shall address underlying factors that lead to substance use and behavioral health challenges, including adverse childhood experiences, social determinants of health, or other youth, family and community risk and protective factors.

II. GOALS

- A. Address health and wellness for youth, families, and communities by enhancing protective factors while reducing risk factors through promising, emerging, and/or evidence-based education and skills training.
- B. Enhance community awareness and mobilization around behavioral health.

III. SERVICE AREA

- A. Grantee shall provide services in the counties (service area) listed below, as approved by HHSC:
Region:
Counties:
- B. Grantee may request to add and/or delete counties referenced in Section III (A); however, all requests for additional counties must be within the same region. The counties per HHS region are documented at the following link:
<https://hhs.texas.gov/sites/default/files/documents/about-hhs/hhs-regional-map.pdf>
- C. Grantee’s request to revise the service shall comply with the following requirements:
 - 1. Submit email requests to the assigned contract manager and the SA Mailbox, SUD.Contracts@hhs.texas.gov.

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2. The requests must include the following information:
 - i. Legal Entity Name;
 - ii. Contract number;
 - iii. Program ID;
 - iv. Current service area;
 - v. Revised service area;
 - vi. Justification for service area change.

- D. HHSC may revise the Service area in accordance with **Exhibit C, HHS Additional Provisions**, Section 4. Miscellaneous Provisions, A. Minor Administrative Changes. All revisions to the service area are considered a minor administrative change and do not require an amendment. HHSC shall provide a written notification to document revisions to the service area.

IV. POPULATION OF FOCUS

- A. Grantee shall serve the population awarded in the original solicitation and documented in the HHSC approved Implementation Plan, which includes:
 1. The primary population, youth in Pre-Kindergarten to 12th grade and their families.
 2. The secondary population(s) include:
 - a. Community members in the funded service area.
 - b. Other priority populations as determined by the grantee and HHSC.

V. GRANTEE RESPONSIBILITIES

Grantee shall:

- A. Implement the Center for Substance Abuse Prevention (CSAP) strategies:
 1. Education;
 2. Information Dissemination;
 3. Alternatives; and
 4. Problem Identification and Referral.

- B. Implement an evidence-based curriculum from the HHSC-approved list, unless otherwise approved by HHSC. Any proposed changes to curricula must be submitted to and approved by HHSC. The grantee is responsible for purchasing and utilizing the most up-to-date curricula materials required by the program model developer and should adhere to all copyright laws. See **Exhibit O, Approved Curriculum List** for approved curriculum list.

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- C. Participate in, and collaborate with, HHSC-funded coalitions in order to develop and strengthen environmental prevention and behavioral health promotion strategies. If a HHSC-funded coalition is not located within the Grantee's service area, the Grantee will then collaborate with a non-HHSC-funded coalition. If the provider is unable to identify a coalition, provider shall contact HHSC for guidance. Provider shall document coalition participation and activities using the approved HHSC required tool and in quarterly reports, as outlined in Section III A in the General Statement of Work.
- D. Coordinate with other HHSC funded Providers and community stakeholders to facilitate tobacco compliance activities. This is to be reported in **Exhibit N, Prevention Activity Tracking Tool (PATT)**, as outlined in the General Statement of Work.
- E. Document distribution and verbal communication of participant rights to program participants prior to delivery of HHSC approved Education/Skills Training programs. Providers shall post or make available, in English and Spanish, the HHSC-developed prevention Participant Rights Form during the delivery of educational sessions. Additional languages, appropriate to the population served, may be requested, and developed by HHSC for use by the Provider. Postings must be conveyed in an appropriate manner to participants who have impairments of vision, hearing, or cognition. The Participants' Rights Form is located on the [HHSC website: https://www.hhs.texas.gov/regulations/forms/5000-5999/form-5100-participant-rights](https://www.hhs.texas.gov/regulations/forms/5000-5999/form-5100-participant-rights)

VI. YOUTH PREVENTION PROGRAM STAFFING AND TRAINING REQUIREMENTS

- A. In addition to adhering to the requirements outlined in **General Statement of Work**, Youth Prevention Programs must:
 - 1. Hire a Prevention Program Director at a minimum of .25 (one-quarter) Full-Time Equivalent (FTE) per YP program funded. For example, if an agency has two YPU programs and a YPS program, a minimum of .75 FTE is required (this role may be filled by one or multiple people).
 - 2. Hire a minimum of one (1) FTE Prevention Specialist per YP program funded. For example, if an agency has two YPU programs and a YPS program, a minimum of three (3) FTEs are required.
- B. YP program staff shall receive training listed below and maintain documentation for HHSC review upon request:

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1. Complete program-specific trainings and maintain appropriate documentation of certifications as required by the program developers before delivery of service and make available for review by HHSC upon request.
 2. If the person responsible for delivering curriculum is unable to complete formal curriculum training through an HHSC-funded training entity prior to service delivery, the Provider must identify a qualified in-house curriculum trainer to provide the training. Provider staff completing the in-house curriculum will complete formal curriculum training through an HHSC-funded training entity no more than six months following original training due date unless written approval is granted by HHSC. Providers must maintain documentation of the completion of this training for review by HHSC upon request.
- C. YP Program staff shall attend required meetings held by HHSC and maintain documentation for HHSC review upon request, including:
1. Annual Prevention Providers Meeting: Program Director and at a minimum one Prevention Specialist per YP program type must attend.
 2. Annual Directors' Meeting: Program Directors for prevention programs are required to attend, unless otherwise approved by HHSC.
 3. Provider must participate in technical assistance calls or program-specific meetings as requested by HHSC.

IV. PERFORMANCE MEASURES

The following Performance Measures will be used to assess in part, Grantee's effectiveness in conducting the activities described in Contract. Grantee shall submit reports via CMBHS as outlined in the General Statement of Work. Grantee shall ensure all performance measures are submitted monthly by the due date. [The proposed target levels of performance will be negotiated and agreed upon by the Applicant and HHSC.](#)

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YOUTH PREVENTION	
Number of unduplicated youth receiving prevention education (approved evidence-based curriculum)	
Number of unduplicated adults receiving prevention education (for programs implementing approved evidence-based <i>family-focused</i> curriculum only)	
Number of alternatives conducted	
Number of youth participating in alternatives	
Number of adults participating in alternatives	
Number of prevention /behavioral health promotion presentations conducted	
Number of youth attending prevention/behavioral health promotion presentations	
Number of adults attending prevention/behavioral health promotion presentations	
Number of social media messages focused on prevention and behavioral health promotion and the statewide media campaign	
Number of voluntary compliance checks successfully conducted on-site with tobacco retailers	

V. DELIVERABLE AND REPORTING REQUIREMENTS

- A. Grantee shall submit all the YP reports/deliverable by the due dates.
- B. Grantee shall report in CMBHS information related to the Curriculum Outcome Measures for each group cycle provided throughout the fiscal year. Outcome measures will be reported no later than 20 business days after the end date of the cycle. Curriculum Outcome Measures will include the following information:
 - i. Group Number
 - ii. Cycle Begin and End Date
 - iii. Number of sessions (education classes) implemented during the group cycle
 - iv. Length (in minutes) of each curriculum session
 - v. Number of youth and adults (if applicable) enrolled in the program
 - vi. Number of youth and adults (if applicable) completing the program
 - vii. Number of youth and adults (if applicable) completing pre and post tests
 - viii. Number of youth and adults (if applicable) completing the program successfully

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- C. Once the above information has been entered in CMBHS, the report will automatically calculate the following:
1. Percentage of youth and adults (if applicable) completing the program
 2. Percentage of youth and adults (if applicable) completing the program successfully
 3. Overall success rate (based on the number of youth enrolled in the program)
- D. The number of youth and adults successfully completing the program is determined from the number of youth (and adults where applicable) who completed the program and if applicable, made a positive change between the pre- and post-test.
- E. Grantee shall utilize the **Exhibit N, Prevention Activity Tracking Tool (PATT)**, or other electronic systems as required by HHSC, to document problem identification and referral. Grantee will include the following information:
1. Name of person making referral or identifying problem;
 2. Participant Service Category – Youth or Adult;
 3. Action Taken.
- F. **Final Report:** Using a HHSC Approved template, Grantee will submit a final report describing the impact, successes, and challenges of the YP program(s) due 10/15 with close-out documents at the end of the year cycle.

Deliverable	Description	Due Date
Final Report	Grantee will use an approved HHSC template to describe the impact, successes, and challenges of the YP program(s).	October 15 with close-out documents at the of the grant cycle