HEALTH FIRST INDIANA



Lake County Health Department 2900 West 93rd Ave., Crown Point, IN 46307 | Phone: 219-755-3655

HEALTH FIRST INDIANA GRANT APPLICATION

Under Indiana law, the Lake County Health Department ("LCHD") is empowered to grant money from their allocated Health First Indiana ("HFI") funds to external organizations which agree to complete Core Public Health Services ("CPHS") and work toward completion of the required Key Performance Indicators ("KPIs").

Health First Indiana Website: https://www.in.gov/healthfirstindiana/

Public health services are most effective when provided by local health departments (LHDs) that are positioned to meet the needs of their communities. These core services outline the initiatives and activities at the heart of public health that are the critical framework of any local health department. Some are required by law, and some are offered by many health departments. Every Hoosier deserves access to these foundational public health services no matter where they live.

LHDs, with support from partners and community stakeholders, determine needs of the community, and implement accessibility strategies, including addressing social determinants of health, in all aspects of planning, operations, and core services. The Indiana Department of Health surveyed each local health department to determine how these core services are provided across Indiana. Click below to see a snapshot of each core service.

Please fill out the attached proposal in its entirety and include any necessary and appropriate documents.

- The KPI's listed throughout this proposal application are not comprehensive. They are current guidelines and metrics that have been enumerated by the Indiana Department of Health (IDOH), however, they are in flux.
- If your program fills the purpose as enumerated in the "Purpose" chart of Section 2 below, but the deliverables from Section 5 do not match up directly with your program metrics, list them separately under the "Deliverables" section of this application.

1. ORGANIZATION

1.1. Name of Organization: The Gatehouse Hammond

1.2. Contact Name and Title: Leslie McCormick, Executive Director

1.3. Address: 1215 N. Cline Ave., Griffith, IN 46319

1.4. Phone: (219) 671-9116

1.5. Fax: None

1.6. Email: office@thegatehousehammond.org

1.7. Name of Proposed Program: Sober Living for Women

1.8. Target Population (ex: at-risk population of Lake County, IN; high school students, teenagers): Women 18 and over with a desire to live a sober life.

1.9.

2. PROGRAM, PURPOSE, AND SCOPE

- 2.1. Name of Proposed Program: Sober Living for Women
- 2.2. <u>Program Purpose</u>. The purpose of this grant is to support the Grantee's Program, which aims to (ex: educate at-risk population of Lake County, IN on diabetes prevention):

The Sober Living for Women Program educates and engulfs women, through a residential 12 Step recovery program, who are searching for sobriety. Through the constancy of residency for SUD treatment, women are shown the significant functional impairment caused by SUD, clearly drawing a link between Substance Use Disorder as a major cause for physical and mental trauma and injury.

2.3. <u>Scope of Program Services</u>: Provide a 1 or 2-sentence summary of services that are within the scope the program and how the services will be provided within the scope of the project [ex: educating on obesity prevention through cooking demonstrations and meal planning.):

Through the residential recovery program, The Sober Living for Women program will educate and train women hungry for sobriety. Besides the current 24 beds, the addition of 26 more beds for women recovery through the 12 Steps, MRT and Recover Coaching. The attainment of general well-being follows sobriety, greatly reducing the risk of trauma and injuries suffered by residents as well as their communities.

FINANCIAL TERMS

- 2.4. <u>Consideration</u>. Total Program Amount Requested: \$_\$50,000
- 2.5. <u>Breakdown of Total Program Amount Requested.</u>

(Sample Chart: Program Cost Breakdown.)

| Item Description | Price | Quantity | Total |
|--|-------------|---------------------|-------------|
| Big Book | \$24 | 120 copies | \$2,880 |
| 12 and 12 Book | \$13 | 120 copies | \$1,560 |
| 12 Step Workbook | \$20 | 120 copies | \$2,400 |
| Moral Reconation Therapy | \$140 | | \$140 |
| (MRT) Instruction Kit | | | |
| MRT Facilitator "Parenting | \$100/week | Two 8 weeks, | \$1,600 |
| And Family Values" | | 20 residents | |
| MRT Materials "Parenting | \$800 | Pack of 50 | \$800 |
| and Family Values" | | | |
| MRT Facilitator "Untangling | \$100/week | Two 8 weeks | \$1,600 |
| Relationships" | | 20 residents | |
| MRE Materials "Untangling Relationships" | \$550 | Pack of 50 | \$550 |
| MRT Facilitator "Staying Quit" | \$100/week | Two 8 weeks | \$1600 |
| , , | | 20 residents | |
| MRT Material "Staying Quit" | \$550 | Pack of 50 | \$550 |
| MRT Facilitator "Coping with Anger" | \$100/week | Two 8 weeks, | \$1,600 |
| 1 6 | | 20 residents | |
| MRT Materials "Coping with Anger" | \$550 | Pack of 50 | \$550 |
| MRT Tax on materials | \$280 | | \$280 |
| Breathalyzers | \$85 | 8 per year | \$680 |
| Breathalyzer mouthpiece | \$50/week | 50 residents per | \$2,600 |
| • | | week | |
| Drug Tests | \$290/month | 36 residents tested | \$10,440 |
| | | per month | |
| Bedding sets: sheets sets, pillows, mattress | \$210 | 26 residents' | \$5,460 |
| covers, blanket | | bedding | |
| Bath kit: towels, washcloths, hand towels, | \$70 | 26 residents | \$1,820 |
| bath mats | | | |
| Echo alarm clock | \$70 | 26 Residents | \$1,820 |
| Phone/Internet | \$690/mo | 12 months 26 | \$8,280 |
| | | residents | |
| Grocery bill increase by 40% to include | \$232.5/mo | 12 months 26 | \$2790 |
| whole foods and vegetables | | residents | |
| | | | |
| | | Total Amount | \$50,000.00 |

| Payment # | Due Date | Description | Amount |
|-----------|------------|---|----------|
| 1 | 10/01/2025 | Payment for the first quarter of programming | \$12,500 |
| 2 | 01/01/2026 | Payment for the second quarter of programming | \$12,500 |
| 3 | 04/01/2026 | Payment for the third quarter of programming | \$12,500 |
| 4 | 07/01/2026 | Payment for the fourth quarter of programming | \$12,500 |

2.6. Payments.

2.6.1. Payment Information:

- 2.6.1.1. Any payment-related questions or concerns should be directed to Leslie McCormick, (219) 671-9116, leslie.m@aanwi.org
- 2.6.1.2. The check or wire memorandum section must specify <u>(for example:</u> the invoice number or award number) .
- 2.6.2. Payments by Check. Payments will be made to

The Gatehouse Hammond

and mailed to: 1215 N. Cline Avenue, Griffith, IN 46319.

3. TERMS AND TERMINATION

3.1. <u>Term.</u> This Agreement shall be effective for a period not to exceed one year. It shall commence on this October 1, 2025_____ and shall remain in effect through September 30, 2026.

4. PROGRAM WORK PLAN.

- 4.1. Program Work Plan.
 - 4.1.1. <u>Program Objective</u>. [For example: A prevention and control program with a strategic plan for tobacco and vaping prevention and cessation in order to prevent and eliminate the risk of disease due to tobacco use in vaping.]

A significant decrease in the likelihood of a woman, upon completing 12 Step residency treatment, causing trauma or injury to herself or others.

4.1.2. <u>Program Goal(s)</u>. [List each goal with the corresponding strategy and activities.]

| Item | Goal | Strategy | Activities |
|------|---|---|--|
| 1 | Increase awareness of substance use disorder in relation to accidents and injuries | Implement 12 Step Alcoholics Anonymous Program Build relationship with sponsors | Every resident Attendance at 12 Step meeting daily Every resident meets with her sponsor every 3 days |
| 2 | Increased probability of continued sobriety after | Offer in-house MRT Classes with materials and instructor. | • 20 residents attend classes |

| | residency Through Moral Reconation Therapy (MRT) | | Residents report increased ability to appropriately communicate with fellow residents and family members |
|---|---|--|---|
| 3 | Increase personalized treatment through Recovery Coach appointments | Offer in-house recovery coach appointments | 30 minute meeting for residents with recovery coach |
| 2 | Promote healthy lifestyle through SUD residential treatment | Increase whole food and vegetable choices in grocery store Implement daily walking or yoga | Sponsor or Director offers educational trip to grocery store weekly Provide schedule for walking group or streamed yoga call |
| 3 | Increase awareness of dual diagnosis | Increase number of residents screened for mental health issues Increase number of residents receiving treatment for mental health | Transport new residents to psychiatrist for evaluation. Provide access to mental health treatment and medication |

4.2. <u>Scalability</u>. Grantee will expand or restrict the Program Work Plan to further efforts that will result in fulfilling the Purpose and Scope of the Program before modifying Performance.

5. PERFORMANCE: DELIVERABLES, METRICS AND REPORTING.

5.1. <u>Key Performance Indicators</u> ("KPIs"). The Program will provide services that specifically address the KPIs for Core Public Health Services outlined in the Health First Indiana initiative. Program and Scope for Selected Core Service – select at least one KPI that pertains to the program objective in the first column:

| | # | Name | Scope | |
|----------------------------|---|---------------------------------|---|--|
| | Tobacco and Vaping Prevention and Cessation | | Preventing and eliminating risk of disease due to tobacco use and vaping. | |
| | | Trauma and Injury Prevention | Preventing harm due to injury and substance use and facilitating access to trauma care. | |
| Chronic Disease Prevention | | Chronic Disease Prevention | Preventing and reducing chronic diseases such as obesity, diabetes, cardiovascular disease, and cancer. | |

| Maternal and Child Health | Services focused on the health and well-being of mothers, children, and families, including prenatal care. |
|---|---|
| Fatality Review | Analysis of data and potential causes of child deaths, fetal and infant mortality, and suicide/overdose fatality. |
| Lead Case Management and Risk Assessment | Ensuring all children have access to blood lead level testing and appropriate clinical and environmental services if necessary. |
| School Health Liaison | Assisting schools with resources to promote whole student health. |
| Access and Linkage to Clinical Care | Facilitating access to essential healthcare services for all members of the community. |
| Infectious Disease Prevention and Control | Monitoring and managing the spread of diseases within a community. |
| TB Prevention and Case Management | Preventing the spread of tuberculosis and ensuring appropriate access to care and resources for those who have TB. |
| Immunizations | Providing vaccinations to children and adults to prevent the spread of infectious diseases. |
| Health-Related Areas during Emergencies or Disasters | Planning and coordination for responding to public health emergencies and disasters. |
| Vital Records | Providing accurate documentation of births, deaths, stillbirths, fetal deaths, adoptions, and biological parentage. |
| Food Protection | Ensuring safety of food at the grower, wholesale, and retail levels. |
| Environmental Health | Ensuring the safety of the physical environment to protect public health. |

5.2. Metrics and Reporting

5.2.1. Definitions.

- 5.2.1.1. <u>Deliverable</u>: the quantifiable services to be provided at various steps in the Program to keep it on course. The deliverable provides a metric whose value can be tracked for state-level reporting.
- 5.2.1.2. Metric: a standard for measuring the value of the deliverable.
- 5.2.1.3. <u>Value</u>: the number or percentage of the metric that is being measured.

5.2.2. Reporting.¹

5.2.2.1. Reporting Frequency: [For example: weekly] Bi weekly

CREATING A REPORT WITH METRICS

Based on which Core Service(s)/KPIs selected in Section 6.1 above, please review the sections in <u>Appendix A</u> and add all the metrics that apply in the report below. If you have a deliverable and a corresponding metric that is not listed, please add your own, if it aligns with the scope of the KPI.

¹ Reports are to be sent directly to Michelle Arnold at arnolml@lakecountyin.org.

FOR EXAMPLE:

- 1. If the KPI selected in Section 6.1 is: <u>Tobacco and Vaping Prevention and Cessation</u>, choose that KPI from the dropdown under the KPI Column
- 2. Then, review the corresponding Metrics from $\underline{\mathbf{Appendix}}\ \mathbf{A}$ (below) and add that to the Metric column.
- 3. Continue to fill in the Deliverable and Value columns.
- *Add as many items as necessary for your program.

| Item | KPI | Metrics | Deliverable | Value |
|------|------------|-----------------------|-------------------------|-------------------|
| 1 | Trauma and | Number of residents | Observation and | # of residents |
| | Injury | living in compliance | assessment of residents | living within |
| | Prevention | with Gatehouse's | | Gatehouse |
| | | requirements for | | parameters |
| | T 1 | maintaining residence | D:1 10 | U C 11 |
| 2 | Trauma and | Number of residents | Ride to 12 step meeting | # of residents |
| | Injury | attending daily 12 | | attending daily |
| | Prevention | step meetings | B 11 11 1 11 | meeting |
| 3 | Trauma and | Number of residents | Provide time in daily | % of residents |
| | Injury | who have a sponsor | schedule for meeting | meeting with |
| | Prevention | N. 1 0 11 . | with sponsor | sponsors |
| 4 | Trauma and | Number of residents | Recovery coach on site | % of residents |
| | Injury | meeting with | | keeping |
| | Prevention | Recovery Coach | | appointments |
| | | | | with Recovery |
| | | | | coach |
| 5 | Trauma and | Number of residents | In-house MRT topic | % of residents |
| | Injury | learning MRT from | classes | attending 80% |
| | Prevention | facilitator | | of classes |
| 6 | Trauma and | Number of residents | Guided grocery store | # of residents |
| | Injury | attending weekly | visit | engaging in |
| | Prevention | guided, healthy | | educational |
| | | grocery store visit | | grocery store |
| | | | | trip |
| 5 | Trauma and | Number of residents | Walking schedule or | # of people in |
| | Injury | who exercise 3x per | streaming yoga class | attendance |
| | Prevention | week | | |
| 7 | Trauma and | Number of residents | Appointment and Ride to | # of residents |
| | Injury | screened for mental | psychiatrist office | needing |
| | Prevention | health issues | | transportation to |
| | | | | office |
| | Trauma and | Number of residents | Ride to pick up | % of residents |
| | Injury | treated for mental | medication | following |
| | Prevention | health issues | | treatment with |
| | | | | medication |