Scope of the Presentation

Purpose: updates and clarification on some application questions
- Simplification of process
- Walk through application portal

Submission Essentials

This application is for **current Safety Net and Children and Families grantees.** It is located on our billing portal. Use the Login button at the top of any page on our website. Usernames and passwords from last year are still active. To add a user, contact sejones@jacksoncountycares.org

- For information about billable services, use the August 2022 Service Unit Definitions on the _Existing Grantee Funding_ page of our website.

- Please spell out **all acronyms** - It helps the reviewer understand what you are writing about.

- Space for answers is limited. Please be concise. Using bullets to summarize is good.

- Questions that ask for "data" require _numbers_ - quantitative information.

Application Home Page

The application consists of the following sections:

- Grant Application Information

- Agency Information

- Application Information
  - Application Form
  - Additional Documents
  - Expenditure Plan
  - Staff and Board Demographics

Application Home Page

Grant Application Info

Grant Name:

Core Services

Grant Category:

Children and Family 2024

Contract Period:
01/01/2024 - 12/31/2024
Submission Period:
08/25/2023 - 10/06/2023

Amount Requested:

$ 0

Agency Info

Name:
Mental Health Levy

Agency Contact:

No Email Address On File

Update Agency Info

Primary Address:
1627 Main Street
Suite 500
Kansas City, MO 64108

Phone:

Application Info

Section	Last updated
Application Form	Susan Jones on 09/06/2023
Additional Documents	Susan Jones on 09/06/2023
Expenditure Plan	Susan Jones on 09/06/2023
Staff Demographics	Susan Jones on 09/06/2023

Send Message

Message:

You cannot send messages until the application has been submitted for review.

Send Message
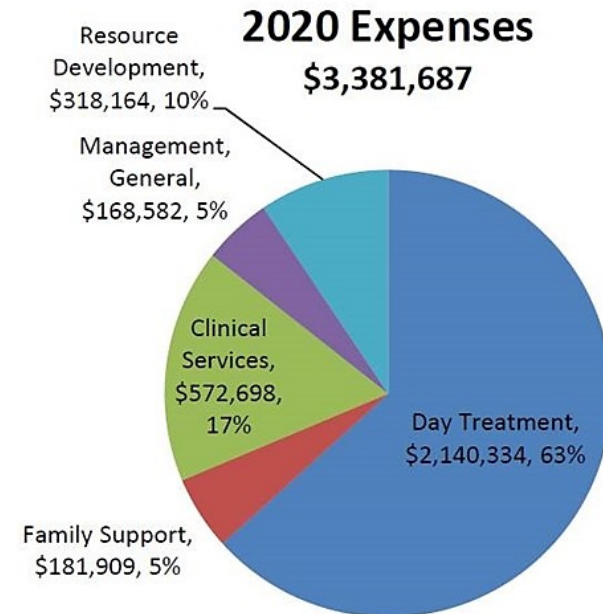
Agency Information

- This section is for forms.

- Please include most recent DEIB (Diversity, Equity, Inclusion) Belonging/Cultural Competency Plan in use by your agency.

- Documents in this section are pre-populated from last year's submission. Please Review and upload new document if there are changes.

Certificate of Good Standing from Secretary of State (PDF)

PAC Man Doc.docx   Download   Delete

Agency Revenue & Expense Pie Charts

PAC Man Doc.xlsx   Download   Delete

Agency Audit (PDF)

f1040ez--2017.pdf   Download   Delete

Board Roster (PDF)

PAC Man Doc.docx   Download   Delete

Upload Cultural Competence/DEIAB Plan or provide written explanation of status.

PAC Man Doc.docx   Download   Delete

Agency Information

Agency Revenue and Expenses: Pie Charts *only.* Convey major categories and include dollar amounts

2020 Revenues
$3,381,689

- Special Events, $350,000, 10%
- Contributions, $862,953, 26%
- Grants, Contributions (restricted), $770,000, 23%
- Fees, Government Grants, $1,395,586, 41%
- Client Fees, $3,150, 0%

2020 Expenses
$3,381,687

- Resource Development, $318,164, 10%
- Management, General, $168,582, 5%
- Clinical Services, $572,698, 17%
- Family Support, $181,909, 5%
- Day Treatment, $2,140,334, 63%
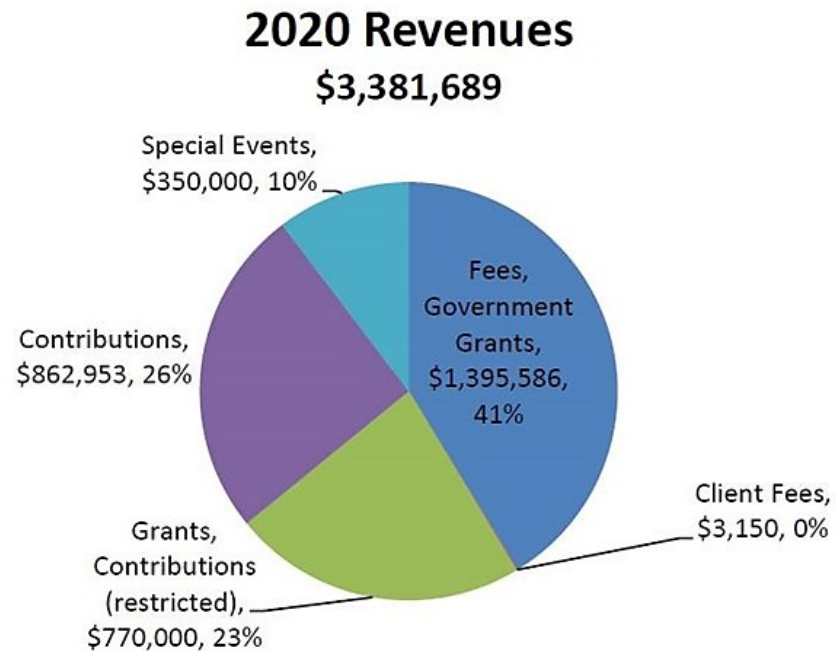
Application Portal Go Live

This section is for the Application Form (narrative), Additional (Project) Documents, Expenditure Plan, and Staff Demographics

Application Form Questions

1a. Explain your agency's overarching practice, model, or approach for services.

- Overarching means embracing everything else. What is the model or philosophy of care that is the foundation of your service delivery?
- Please do not list (EBP) Evidence-Based Practices. EBP compliments and supports the model, but are not the model or philosophy per se.
- If you do not identify an overarching practice or philosophy, please indicate.

1b,c. Explain the process to measure the fidelity of the model or approach (above)

◦ name and title of person responsible for oversight

2. Provide two examples how outcome data have been used to change or improved programs or services.

◦ This is also a good place to discuss goals and KPI's from your Value Based Project work.

Application Form Questions

3a,b. Diagnostic Table
- Explanation if agency does not diagnose

4. Major changes in conditions
- Staffing
- Participant demographics / acuity
- COVID impact
- Medicaid expansion
  - Numbers served/capacity
  - Financial Impact on use of CMHF funds

5. List the major non-CMHF sources of funding for Mental Health Services

Application Form Questions

6. List major partnerships for addressing participants' basic social determinant needs.

Social Determinant, Agency Name

Area of focus for CMHF Board

- Healthy People 2030.

- Report internal agency resources.

- Report external resources.

- We may ask for specifics later.

Social Determinants of Health - Healthy People 2030 | health.gov

Application Form Questions

7. Number of <u>new</u> CMHF funded participants enrolled last year.

8. How does your agency assist participants to enroll in MoHealthNet?

MoHealthNet is not a direct funding stream, this is about assuring checking eligibility, in house or out of house, applications, assuring enrollment when eligible.

9-11. No changes: translated documents, language assistance, school-based services

12. <mark>Explain the reasons for major changes to expenditure plan from last year (i.e. new service, shift in distribution of units, total cost)</mark>

- ◦ **This is the most important question!**
- • This is where reviewers look to understand increases, major allocation changes, new services that have not been billed before.

Additional Documents

Personnel Summary (Excel) – upload (template provided)

Line-Item Budget – upload – (template provided)

Cover Page – upload – (template provided)

PLEASE USE THE TEMPLATES PROVIDED, WHICH ARE ALSO LOCATED ON THE WEBSITE UNDER "REQUIRED DOCUMENTS"

Frequently Asked Questions (FAQs)

Can multiple people sign-in and work on the application with their own sign-in credentials? Yes. However, messaging or status updates go only to the *agency contact* identified in the Agency information section of the application.

Will the agency contact receive confirmation once the proposal is submitted? Yes. You will receive an email from the portal indicating the "status of your grant has changed" to "under review".

Is it possible to have more than one agency email contact? No. Only one email contact, identified in the Agency Information section of the application, can be used for the application.

Is there a downloadable application template so that we can work offline before uploading? No, but we have added a print feature.

What is the 'send message' box used for? It is enabled when you submit your application. Messaging will be used to request clarification, send follow-up information, or communicate on proposal revisions. Messages go to the Agency Contact.

FAQs

Are all services on the Service Unit Definitions available to us? Not necessarily. A few require prior approval- those are identified. Several have license and documentation requirements that are not a fit for all agencies. Remember, if you are proposing any *new* service (a service not in your current contract), the reasons should be explained using *data,* in Question 12.

How recent does our Certificate of Good Standing need to be? Current as of the date of application. This document certifies the agency is registered with the Secretary of State to do business in Missouri. Upload copy does not need to be certified.

What are the word limits for the narrative questions? None, unless otherwise noted. Brief responses are strongly preferred. Using bullets is encouraged.

Are there limits on how we allocate funding to personnel, fringe benefits, other, and indirect costs when creating the line-item budget? Yes. Total personnel cost (salary and fringe combined) should be at least 70% of your total project budget. If we have questions about this, we may request documentation, but that is not part of the application.

FAQs

How do we complete the *Expenditure Plan* when the Service Units Definition has no unit cost?

1. Make sure you are using the 2022 version of the Definitions. Almost all costs are now set.

2. If there still is no unit cost, Under *Funding Type* in the Expenditure Plan, click "partial" then enter the total dollar amount of the proposed service and the total number of units. If you still have questions, contact your Program Liaison.

The recording of this presentation will be posted on the website.

More suggestions:

Keep it simple. Keep answers simple, brief, and direct. Don't read anything else into the questions besides what is asked. If we need more information, we will ask for it at a later time.

Do your research. For example, people ask what we mean by *social determinants of health*. There is a lot of information on the internet about this topic and we encourage you to familiarize with the topic and how it relates to your program.

Internal communication. Seek input from all staff regarding your application. Check the facts and get a review of your application prior to submission. It is noticed when there is uncertainty from the writer and words become placeholders rather than meaningful information for the reviewer. Applications that are unclear to the reviewer typically require re-writes and more work for the writer and CMHF staff.

? Questions

More Questions?

We will accept written questions about <u>application instructions</u> until 5:00 PM September 13th, 2023.
Send to:
administration@jacksoncountycares.org

Responses posted within 24 hours on the website.

Website Portal Questions:

Send to: sejones@jacksoncountycares.org

Timeline

This presentation is on our RFP page

Written Questions Due

Sept 13, 2023

Application Due

October 6, 2023

Contract Reminder

If your proposal is approved,

- Contract is signed electronically

- Quarterly Billing is due 30 Days after the end of each quarter, and

- Annual Demographic Report is due 30 Days after the end of the contract year.

We send your first 2024 payment after we receive:

- Fourth quarter 2023 billing, and

- 2023 Annual Demographic report.

Thank You