



Illinois Children's  
Healthcare Foundation

**ILLINOIS CHILDREN'S HEALTHCARE FOUNDATION**

**RFP GUIDELINES AND INSTRUCTIONS**

**2016 CHILDREN'S MENTAL HEALTH ACCESS EXPANSION GRANTS**

**Due Date: Friday, June 17, 2016 by 5:00 pm CST**

**INTRODUCTION**

Illinois Children's Healthcare Foundation (ILCHF) has issued a request for proposals (RFP) as the second stage the *2016 Children's Mental Health Access Expansion Grants* opportunity. ILCHF received 143 responses to its invitation to submit a Letter of Intent (LOI) totaling more than \$44 million in requested funding. Congratulations on advancing to the RFP phase of the initiative.

Grants of \$50,000 to \$600,000 over two years will be awarded in October 2016. ILCHF will fund up to \$4 million in grants through this funding opportunity.

**ILCHF FUNDING HISTORY – CHILDREN'S MENTAL HEALTH**

ILCHF was created in December 2002 through an action of then Attorney General Jim Ryan and an Illinois insurance carrier. This action and a settlement of approximately \$125 million established the only private foundation focused solely on the health needs of children in Illinois. Since the Foundation's inception through February 2016, more than \$70 million in grants have been committed to programs aimed at improving children's health in Illinois, with a particular focus on children's oral health and mental health.

Since 2009, ILCHF has invested more than \$15 million in projects enhancing, coordinating, and expanding mental health services to children and families. Funded initiatives include the *Children's Mental Health Initiative*, *Building Systems of Care*, *Community by Community (CMHI)* and *Healthy Minds, Healthy Children, Healthy Chicago (H3)* which integrates primary and mental health care through mental health screening, social emotional education, prevention, early intervention and care coordination. The *2016 Children's Mental Health Access Expansion Grants (2016 CMAG)* will fund projects across the state that expand children's access to mental health services.

**ILCHF VISION AND GOALS**

The Foundation's vision is that every child in Illinois grows up healthy.

In order to strategically move toward achieving its vision, the ILCHF Board of Directors recently adopted the following *Healthy Children 2025* Goals through which ILCHF, in collaboration with committed partners, will work to implement the following components of a comprehensive, holistic system of children's health care:

- 1) Universal access to evidence-based primary, oral, and mental healthcare for children with an emphasis on fully integrated care.
- 2) Universal evidence-based screenings for oral and mental health for children.
- 3) The alleviation of children's healthcare disparities.
- 4) Life-cycle health and wellness education for all children and caregivers.
- 5) Cross-disciplinary education of all healthcare providers.

The ILCHF Board of Directors also adopted 2016-2018 goals which include increasing access to evidence-based mental healthcare for children with a focus on integrating care. This goal can only be fulfilled by working collaboratively with partners across the state. The Foundation's *2016 Children's Mental Health* funding opportunity calls for an investment in expanding access to children's mental health services.

#### **CHILDREN'S MENTAL HEALTH**

The mental health of children is as important to their overall well-being as their physical health. Research demonstrates that children's healthy social and emotional development is a critical foundation for learning, school success, healthy relationships, and general well-being, and that these foundations are built prior to school entry.<sup>i</sup> Yet, national estimates suggest that fewer than 1 in 8 children with identified mental health problems actually receive any treatment, and only 50% of children with behavioral problems are actually identified.<sup>ii</sup> Children and youth at high risk for developing mental illness are often unable to receive needed support and treatment, despite significant evidence that early intervention improves their academic, economic, health, and mental health outcomes.<sup>iii</sup>

For these reasons, ILCHF will continue to invest in children's mental health care. ILCHF views children's mental health broadly and values programs with the following characteristics:

- Unfolds within the context of a parent (guardian)/child relationship;
- Is based on the understanding that children do not exist in isolation, but rather develop and experience the world through their community;
- Encompasses a broad spectrum of prevention, early intervention, and treatment through screening and evaluation as necessary for age appropriate developmental skills: cognitive, motor, behavioral, social, emotional, learning, speech and language;
- Includes interventions and/or treatment for mental illness and developmental issues; and
- Is applicable to children age 0-18.

#### **PROJECT DESCRIPTION AND CRITERIA**

ILCHF has invited RFP's following the receipt of LOI's proposing the implementation or expansion children's mental health services which included co-located or integrated children's mental health services in a variety of settings, including but not limited to clinics, hospitals, schools, early childhood centers, and after school programs.

As with the LOI's, in reviewing the RFP's, ILCHF will consider the following criteria:

- Degree of mental health service integration/co-location
- Building upon existing systems and relationships

- Family focused, community based services that are offered in natural settings to work with children and families where they are
- Provision of evidence based/informed screening protocols and/or interventions
- Capacity to refer/connect children to appropriate services
- Cultural competency
- Collaboration
- Evaluation
- Sustainability
- Replicability

#### **Project Timeline**

- **LOI Release:** December 15, 2015 at [www.ilchf.org](http://www.ilchf.org)
- **LOI Due Date:** January 29, 2016
- **RFP Invitation:** March 1, 2016
- **RFP Due Date:** June 17, 2016 by 5:00 pm CST
- **Funding Announced:** October 31, 2016
- **Project Timeframe:** Starting between December 1, 2016 and July 1, 2017 and funded for 24 months from the start date.

#### **APPLICATION PROCESS**

This two stage application process (LOI followed by the RFP) will continue via ILCHF's GIFTS On-Line portal. Each invited applicant will receive an e-mail with a link to GIFTS On-Line which will return the applicant to its unique file where the applicant will have access to the RFP. The following general rules apply to the RFP process:

- Applicants can begin the RFP response on-line, save the application and return on subsequent occasions to do further work. If applicants encounter issues accessing an in-process application, do not start another application, rather please contact Nedranae Hunt, ILCHF Administrative Manager at [nhunt@ilchf.org](mailto:nhunt@ilchf.org) or 630-571-2555.
- Each text field requiring a narrative response has a word count limit and a work counter which keeps track of the word count. Word counts constitute a maximum number of words to be used. Maximum word counts are not required. Additionally, applicants will not be penalized for using maximum word counts. Efficient, concise responses are encouraged.
- Required responses are marked with a red asterisk (\*). If you do not have responsive information, respond N/A. For example, if you have not been funded by ILCHF in the past, your response to Question 25 will be N/A.
- When the completed application has been successfully submitted, applicants will receive an e-mail confirming the submission. If you do not receive the confirmation e-mail, please first check the application and if needed, submit. If the application appears to have been submitted, please contact Nedranae Hunt, ILCHF Administrative Manager at [nhunt@ilchf.org](mailto:nhunt@ilchf.org) or 630-571-2555. ILCHF

encourages applicants not to wait until the 5 pm CST deadline to submit applications, in order to afford time to address unanticipated technical difficulties.

- Reporting requirements for funded grants will be as follows:

- Mid-Year Progress Report – reporting on the first 6 months; due at the end of month 7
- 1<sup>st</sup> Year Progress Report – reporting on the first years; due at the end of month 13
- Mid-Year Progress Report – reporting on 18 months; due at the end of month 19
- 2<sup>nd</sup> Year Progress Report – reporting on 2 years; due at the end of month 25
- Final Report – reporting on status one year post funding; due at the end of month 37

The following information addresses specific aspects of the RFP application.

#### Organization Information

- Standard organization fields will be filled in when the applicant opens the RFP, having drawn that information from the response to the LOI. Please check this information carefully and correct any information that has changed since submission of the LOI.
- Request Primary Contact: this is the person ILCHF should contact with any questions about the application. The RFP will contain the data submitted for the LOI. If the “Request Primary Contact” at is different for the RFP, please edit the information.
- New information: the application seeks extensions associated with phone numbers. Please provide if applicable.

#### Project Overview

- The Total Project Budget Amount and the Grant Request will be the same, if ILCHF is the only potential funder or source of revenue. If there are other sources of funding/revenue, the Total Budget Amount will be the sum of the Grant Request (potential ILCHF funding) and all other sources of funding.
- Project Timeline: Funding will be announced on Monday, October 31, 2016. Initial funds will be distributed in late December 2016 or January 2017. Projects will be 24 months in length, with a report due at the end of months 7, 13, 19, and 25 and a final report due at the end of month 37 (one year following the completion of the project).
- Applicants can initiate or expand current projects as early as December 2016 (though initial checks may not be received until January 2017) or initiate or expand current projects as late as July 1, 2017. If, for example, the proposed project works better on a school year calendar rather than a calendar year, such a timeline can be accommodated. Choose a timeline which works best for the proposed project within the delineated parameters.
- The earliest Proposed Project Start Date is December 1, 2016 and the latest Proposed Project Start Date is July 1, 2017. Proposed Project End Dates should be 24 months after the Proposed Project Start Date.

### Statement of Need

- This section is key to a successful RFP. A well-written RFP will address each of the bulleted concepts contained in Question 8 both thoroughly and concisely.
- Specificity and detail are key elements of responses to Questions 9 and 10.
- Please provide supporting evidence and data that is specific and relevant to your proposed project. Broad statements citing national or statewide studies are not necessary.

### Project Demographics

- If the proposed project is an expansion of an existing program, ILCHF is seeking to understand how many new children are projected to enter the program in years 1 and 2. This information is reflected in Questions 11 and 12. Thus the application seeks to distinguish new children from the total number of children projected to be served each year.
- Question 13 is seeking actual data if it exists for 2015, and projected data for Years 1 and 2 of the proposed projects.
- **In this section enter the numeral 0, rather than N/A for any field that is not applicable.**

### Project Assessment and Evaluation

- ILCHF is committed to data collection for the purpose of meaningful evaluation. In order to work toward standardization of data across our grants, we seek to understand applicants' capacity to provide data as requested in this section of the RFP. An inability to provide the information requested will not necessarily exclude the applicant from receiving funding.
- Enter the numeral 0 for any data which is not available or the question does not apply to your project.
- The Evaluation/Outcomes Template is a flexible form which can be adjusted to fit the applicable content. Goals should be listed numerically and if appropriate, in the same order as the Goals delineated in the Project Logic Model. *Each project must include at least one evaluation/outcome indicator that relates to child or family level functioning.*

### Attachments

- The list of attachments is found on the last page of the RFP application. Please note the acceptable format(s) for each attachment is/are delineated. If for some reason an applicant cannot provide a required format please contact Nedranae Hunt, ILCHF Administrative Manager via the previously provided contact information.

- Specific details related to the Project Budget, Budget Narrative and the Project Staffing Chart follow this section of the Guidelines.

#### **BUDGET DOCUMENTS**

The Project Budget, Budget Narrative and Project Staffing Chart are inter-related forms seeking detailed budgetary information. Specific information regarding each form is set forth below.

##### *Project Budget Workbook*

- The Project Budget Workbook has three pages – Implementation Year 1, Implementation Year 2 and Financial Projection Summary. Fill out the first two worksheets. The Financial Projection Summary is formula driven and will fill itself out. Please do not modify or change in any way the formulas contained in the Project Budget Workbook.
- If you are seeking funding to expand an existing program please note the following:
  - The “Total Program Budget” reflected in the Project Budget Workbook for Year 1 and for Year 2 should list the costs and revenue associated **with the expansion**; and
  - In the budget narrative delineate the total operational cost for the program for each of Year 1 and Year 2 (existing costs + expansion costs).
- Do not add any new lines or columns to the Project Budget Workbook. Doing so will cause the formulas to malfunction.
- ILCHF seeks to understand all actual or potential sources of funding other than ILCHF grant funds. In Row 7, insert the name of the source of funding. If the funding is “actual” leave the font color blue. If the funding is potential change the font color to red.
- If additional columns are needed for other Sources of Funding, unhide available columns between Column O and Column AH.
- The budget worksheets have four numbered functional categories (i.e. Program Staff) which are described in greater detail in the Budget Narrative.
  - If there are insufficient lines under Program Staff, use “Other Project Staff – Type 5” as a catch all and detail its components in the Budget Narrative.
  - If there are insufficient lines under Other Direct Costs, use “Other Expenses” as a catch all and detail its components in the Budget Narrative.
  - If there are insufficient lines under Purchased Services, use “Other” as a catch all and detail its components in the Budget Narrative.
  - If there are insufficient lines under Overhead Costs (not otherwise accounted for), first unhide additional lines between line 45 and line 53. If additional lines are needed after that use line 52 as “Other” as the catch all and detail its components in the Budget Narrative.
- ILCHF does not use an indirect cost based upon a percentage of the project as the means to pay indirect costs. However, ILCHF will consider covering specifically delineated overhead or indirect costs not otherwise accounted for.

### Budget Narrative

- The Budget Narrative provides applicants an opportunity to delineate details associated with the Project Budget and clarify the calculations leading to the budget numbers.

### Project Staffing Chart

- The Project Staffing Chart (PSC) seeks the delineation of the role/contribution of personnel, both employed and contracted, associated with the proposed project.
- While limits in the Project Budget worksheet may require the grouping of team members (i.e. therapists, or teachers) the PSC seeks information associated with each budgeted team member. The “Project Positions” in Column B are suggestions/place holders. Provide the position titles associated with the proposal and add as many lines as needed. Confirm that the formula totaling the Project Salary and Project Fringe Benefits continues to function following the addition of any lines.
- Project Salary is that portion of the person’s salary attributable to the proposed project.
- Project Fringe Benefit Cost is that portion of the fringe benefits paid by the applicant attributable to the proposed project.
- Proposed Contracted Professionals should be listed individually in the Contracted Professionals section of the PSC.

### **OTHER ATTACHMENTS**

Please submit all requested applicable Attachments delineated on the last page of the application in one of the formats listed on the application.

### Project Timeline

- Each applicant should select a Project Timeline format that is useful for the applicant. Formats that are easily understood and clear are preferred.

### Project Logic Model

- The Logic Model Template is a guide/example. Applicants can work in Excel or Word but should maintain the overall layout of the template and the categories provided. The number of boxes and the linkages from category to category will be unique to each application. Modify the boxes and linkages as needed. Be sure to provide the following information:
  - Name of the Project

- Problem Statement – this content should describe the problem you are working to address or solve; it is possible there will be more than one Problem Statement
- Goals – describe what you are trying to achieve; goals should be numbered and each set forth in a separate box
- Inputs – this content should describe what is needed to engage in the proposed activities
- Outputs – describes the activities and participants moving the project forward toward the planned outcomes
- Outcomes – what you anticipate the short term (6 – 12 months) and 2 year Impact of the work to be
- Assumptions – the assumptions upon which your project is premised
- External Factors – factors beyond your control which may impact the project

#### **ELIGIBILITY**

In general, an organization is eligible for ILCHF funding if it is a 501(c)(3) organization determined to be a public charity under section 509(a)(1), (2) or (3) of the Internal Revenue Code, or a governmental entity described in Code section 170(c)(1) or 511(a)(2)(B).

Examples of eligible organizations include Federally Qualified Health Centers (FQHC), FQHC look-alikes, school-based health centers, schools, clinics, public health departments, hospitals, and other community health centers.

If an invited applicant does NOT meet the eligibility requirements, please contact ILCHF immediately.

#### **Questions/Technical Assistance**

Questions should be directed to Nedranae Hunt, Administrative Manager at [nhunt@ilch.org](mailto:nhunt@ilch.org) or at 630.571.2555.

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<sup>i</sup> Illinois Children's Mental Health Task Force. *Children's Mental Health: an Urgent Priority for Illinois*. Final Report. April 2003.

<sup>ii</sup> Carol Weitzman; Lynn Wegner, "Promoting Optimal Development: Screening for Behavioral and Emotional Problems," American Academy of Pediatrics. *Pediatrics* (February 2015). 135(2).

<sup>iii</sup> RAND Corporation, *Proven Benefits of Early Childhood Interventions*. (2005). Accessed [http://www.rand.org/content/dam/rand/pubs/research\\_briefs/2005/RAND\\_RB9145.pdf](http://www.rand.org/content/dam/rand/pubs/research_briefs/2005/RAND_RB9145.pdf)