The Center for Children, Families, and Workforce Development at the University of Montana (Center) is committed to improving the lives of Montana’s children and families through professional training, research and evaluation, and improved policies. The Center is partnering with the Montana Children’s Mental Health Bureau (CMHB) to accept grant applications that support innovations in children’s services.

$1 Million for Innovation Grants

The Center will oversee innovation grants in two areas critical to supporting children’s mental health. Up to 15 grantees will be selected for a combined funding of $1 million. Grant awards are anticipated to range between $50,000 and $125,000. We encourage a cross sector of applicants with a focus on delivering services to rural and native populations, as well as Montana’s urban communities.

The innovation grants will fund well-developed projects that demonstrate a high potential to be effective at meeting targeted benchmarks, are able to be replicated in similar communities, and adopt evidence-based strategies in the following two programmatic areas.

1. Supporting Strong Transitions into Adulthood
   Goal: To identify effective and replicable strategies to support youth transitioning out of state Medicaid children’s mental health services into adulthood, with the intent of helping these youth achieve and maintain mental health, economic self-support, and self-sufficiency.

   Youth age out of Montana Medicaid mental health services at age 18 or 19, and they need help preparing for this transition. Youth who leave care without a strong support system in place can struggle to navigate applying for health care coverage, continuing their mental health services, finding a job, and securing housing. Youth transitioning out of care without support systems are more likely to experience homelessness, run-ins with the criminal justice system, and sex trafficking at much higher rates that other youth. Applicants must identify ways they will help youth to avoid these risks and set them up to thrive.

2. Enhancing Family Engagement
   Goal: To create effective and replicable strategies to engage family members of youth who are served through the state children’s mental health system and who are at risk of or have been placed outside of the family home due to abuse, neglect, exploitation, and behavioral health challenges. Successful proposals will focus on one or both of the following areas:
   - Improving the engagement, involvement and capacity of families to provide for the care and support of their child following any out-of-home placement.
   - Improving ways to engage family members in community- and home-based care that prevents the need for out-of-home placement.

   Engaging family members improves outcomes for children. Communication and collaboration with families and making sure family members remain in contact with their children is vital for children’s well-being. For children whose biological families are not a viable permanent option, creating a “web of belonging” (family search) and permanency planning are essential program components and should be included as part of the family engagement goal. Family-focused and family-driven care requires that, instead of narrowly focusing on the services each individual provider delivers, providers must find ways to focus on the coordination of services meeting the needs of the whole family.

Innovation Grant Objectives

Through these grants, the Center and CMHB encourage organizations who work in any capacity with children receiving Montana Medicaid mental health services to implement strategies designed to facilitate more effective
engagement with families and/or programs to assist youth transitioning into adulthood. The Center will implement a rigorous evaluation process and use the results to draft standards, policies, protocols, and practice recommendations that better define key elements for effective transition planning and effective family engagement.

Learning Collaboratives

Successful applicants must commit to participate in a learning collaborative led by the Center. Sessions will include training, technical assistance, and disseminating new knowledge with peer organizations. The learning collaborative will support Center and CMHB innovations grant objectives as described above.

Six learning collaborative meetings will occur between April 1, 2021, and September 30, 2021. Meetings will range from one to three hours. Dates will be determined once grantees are selected. Organizations must commit to full participation and identify staff members who will attend. Participants will be expected to share information and data about their grant projects. In addition, grantees will be expected to complete brief reading and writing assignments in preparation for learning collaborative meetings.

Eligibility

Eligible applicants are Montana organizations working with any children who receive mental health services through Montana Medicaid. An eligible applicant is not required to be a direct provider of Medicaid mental health services; however, funded proposals will specifically benefit those children who receive Medicaid mental health services. Child service providers from across Montana are encouraged to apply.

Eligible family engagement strategies include programs for:

- Children in out-of-home placement.
- Children in community and home-based care, with the goal of preventing the need for out-of-home placement.
- Creating a “web of belonging” (family search) and permanency planning for children whose biological families are not a viable permanent option.
- Facilitating the development of standards and protocols defining what constitutes effective family engagement.

Eligible transitioning youth proposals include programs to:

- Define standards, protocols, and delivery systems to help youth gain the necessary knowledge and skills to successfully navigate their transition to adulthood.
- Address one or more issues faced by youth transitioning to adulthood, including homelessness, access to health care (including behavioral health care), food security, employment, and safety.
- Address or develop policy and strategies to support improved linkages between child-serving systems and adult systems (for instance, to assess needs and possibilities to improve funding to support youth aging out).

**INTENT TO RESPOND DUE:** November 30, 2020 by 6:00 PM

Potential applicants must send an email message to the address below stating their intent to apply. Applicants can also submit questions to this address. The submitted questions and responses will be distributed to all potential applicants.

**APPLICATION DUE:** December 18, 2020 by 6:00 PM

Submit to: innovations.grants@gmail.com

Contact Us

For more information, please contact Susan Dawson, innovations.grants@gmail.com
Proposal Components & Requirements

A maximum of 100 points can be awarded to proposals that address each of the sections below. Note that some sections are not scored, but still required for the grant to be eligible for review. Unscored sections include:

- Cover Page
- Commitments to Participation
- Clients Served

Tips for writing the proposal are included in Addendum 1.

Formatting requirements:

- Length: 10 pages maximum. The 10 pages must include all submitted materials except the cover page, the budget in an Excel spreadsheet, and the subrecipient form, which do not count toward the 10-page limit.
- Formatting: 11-point font, 1.5 line spacing, 1-inch margins, all pages numbered
- File type: All proposals must be submitted in both Word and pdf formats; budgets must be presented in Excel.

Cover Page

Include organization name, contact name and role, date, and the focus of your project, for example, Enhancing Family Engagement, Supporting Stronger Adult Transitions, or both.

Organizational Capacity (10 points)

Confirm your organization’s capacity to administer and manage the proposed grant. This must include the ability to meet all requirements of being a sub-recipient entity as defined in Addendum 2.

Commitments to Participation in Learning Collaborative

Confirm your commitment to participate in:

- The learning collaborative – identify the staff member(s) who will participate, and commit to coming prepared, including reporting on key indicators and completing monthly reports.
- Monitoring and evaluation plan activities – confirm that you will collaborate and share data with other grantees with the goal of developing collective standards and to meet the evaluation and monitoring goals for your project.

Target Population

Define the population(s) served through this grant proposal.

Problem Statement (10 points)

Explain your organization’s assessment of the problem(s) your proposal addresses, with emphasis on the perspective of the client population. Grantees may choose to address more than one activity or strategy. Grantee may propose to address both issues (transitioning youth and family engagement) if they can demonstrate the capacity to do so.

Program Plans & Methodology (30 points)

Describe your plan. Questions to consider include: What activities will you undertake? What is your goal? How did you identify your goal? How will you implement your program or system? How will you recruit and retain participants? Will you collaborate with other organizations in your community? Why do you think your plan will work? What excites you about it? What potential barriers or problems do you anticipate? This list is not intended to be an outline or to limit your thinking. Please include any relevant information about your plan.

Grantees are encouraged to propose and test multiple strategies to address the identified problem. For example, a congregate care facility (shelter care, Qualified Residential Treatment Programs, etc.) might propose a package of several strategies for family engagement, including introducing new intake procedures, testing new policies on visitation and family contact, employing families in staff training and in the hiring process, and establishing alumni family as mentors.
**Project Objectives (10 points)**
Define how you will measure the project’s impact. Please describe objectives that are measurable and reasonable to accomplish by September 30, 2021. All grantees will be required to identify and share key data points that will be collected across all projects. (See Monitoring & Evaluation section below) The Objectives section should describe how you will measure whether the method(s) you implement produced the specific outcomes you intend to achieve. Not all projects will succeed and what is learned from a new approach is important to document so that future projects can build on the successes and setbacks identified through the local projects.

**Monitoring & Evaluation Plan (25 points)**
Information will be collected to better understand what types of services and programs are succeeding and what resources might be needed to help ensure that positive outcomes are achieved across organizations. In your proposal, please note which staff will be responsible for collecting data and the systems they will use to track and record data. (Note that all grantees will use the Center’s Qualtrics platform) Also confirm your commitment to submitting monthly reports on time. Collecting data on key indicators is a critical piece of this grant. The Center will provide technical assistance for monitoring and evaluation. Be sure to allocate appropriate staffing and equipment and request funds for collecting and sharing data.

**Required monitoring and evaluation activities:**
- Monthly reports will be required during the grant period. They will track indicators including number of participants, characteristics of participants’ support network, communication with support networks, policies and procedures implemented, tools developed, and barriers identified. Progress reports will be completed online using a secure data collection system (Qualtrics). Summary reports will be shared in learning collaborative meetings as a learning tool, to help organizations problem solve and support each other.
- Evaluation –The Center’s evaluation team will conduct a formative evaluation to determine what factors contribute to or hinder program effectiveness. The evaluation will include surveys and interviews and will occur in the summer and fall of 2021. Organizations that accept this funding will be required to participate. The primary task will be to assist the evaluation team in recruiting participants, including staff, participants, family members, and other community stakeholders. Client participation in evaluation activities will be voluntary and their consent to participate can be withdrawn at any time.

All data collection activities will be conducted in compliance with the protocols approved by the Institutional Review Board (IRB) at the University of Montana to ensure the protection of human subjects, including the confidentiality of responses.

**Budget (5 points)**
Present the budget on a formula-driven Excel spreadsheet (Note: A basic version – such as a Word table – of the budget should be included as part of the 10-page proposal. A detailed Excel spreadsheet included as an appendix will not counted in the page total). Include key budget items:
- Staff salary and benefits
- Travel support (for staff and/or family support system)
- Program expenses (supplies, technology, etc.)
- Indirect expenses (limited to 8%)
- See Addendum 3 for expenses that are not allowed

**Budget Justification (10 points)**
Explain your budget:
- Describe calculation of costs
- Explain the supplies needed to conduct your project
- Include a description of staffing structure (program director, recruit participants, monitor outcomes, track and report evaluation data)
- Keep the budget within the proposal timeline. Funds must be expended by September 30, 2021. The budget justification should make clear that this timeline is understood.
### Proposal Review, Selection and Process Timeline

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
</tr>
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<tbody>
<tr>
<td>November 16, 2020</td>
<td>Request for Proposals released</td>
</tr>
<tr>
<td>November 16–30, 2020</td>
<td>Grantee questions and answers via <a href="mailto:innovations.grants@gmail.com">innovations.grants@gmail.com</a></td>
</tr>
<tr>
<td>November 30, 2020</td>
<td>Notice of intent to respond to <a href="mailto:innovations.grants@gmail.com">innovations.grants@gmail.com</a></td>
</tr>
<tr>
<td>December 5, 2020</td>
<td>Questions and answers distributed to those with intent to respond</td>
</tr>
<tr>
<td>December 18, 2020</td>
<td>Proposals must be received at <a href="mailto:innovations.grants@gmail.com">innovations.grants@gmail.com</a></td>
</tr>
<tr>
<td>January 2021</td>
<td>Grant announcement, contracts negotiated and executed</td>
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<tr>
<td>February 2, 2021</td>
<td>Project implementation begins: kick-off meeting with all grantees</td>
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<tr>
<td>March 1, 2021</td>
<td>First monthly report form sent to grantees</td>
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<tr>
<td>March 15, 2021</td>
<td>First monthly report due</td>
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<tr>
<td>April 2021</td>
<td>First learning collaborative meeting</td>
</tr>
<tr>
<td>September 30, 2021</td>
<td>Project implementation ends (all funding expended)</td>
</tr>
<tr>
<td>October 15, 2021</td>
<td>Last monthly report due</td>
</tr>
<tr>
<td>December 31, 2021</td>
<td>Final evaluation reports shared with grantees</td>
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Addendum 1
Tips for a Strong Proposal

**Family Voice:** Research strongly links the success of services to having families served also represented in the governance and management of the organization. The most successful organizations leverage their clients’ personal knowledge and embed it in their programs and ongoing evaluation of outcomes. Family voice and experience can be used to develop policies and procedures for training, hiring, onboarding, performance reviews, program development, program evaluation, family mentoring, family orientation, and other parts of the operation.

**Youth Voice:** Successful programs to support youth aging out of care embed youth voice in their services. Youth feedback suggests that understanding benefits available to them, community and peer mentorships, and support in establishing independence are all critical. The youth your organization serves might have different or additional needs. Strong proposals will provide clear opportunities for youth to participate and express their opinions and ideas.

**Systems of Care:** Systems of Care approaches apply core values and principles to any population of children, youth and families. The following principles and values are key to effective children’s mental health programs.

- Family-driven
- Home- and community-based
- Strengths-based
- Data-driven and outcome-oriented
- Culturally competent
- Coordinated across service systems
- Include family’s natural supports

**Understanding Rationale for Focus Areas**
A strong proposal will help guide the implementation of new state and federal policies designed to strengthen family engagement and to deliver trauma-informed services.

- New administrative rules require targeted case management and home support services to better engage families in treatment planning and service delivery.
- The Family First Prevention Services Act requires that therapeutic groups homes meet standards to become Qualified Residential Treatment Programs (QRTPs). QRTPs must focus on family engagement, both during and after care, and on planning for youth aging out of congregate care.
- The [Vision 21: Linking Systems of Care](http://health.umt.edu/ccfwd/) (LSOC) team working group released findings that called for improved screenings for trauma and the implementation of trauma-focused care. LSOC specifically called for practices of:
  - Collaboration and Mutuality: Victimization and trauma can cause individuals to feel that they have no choice or control. Opportunities for choice and control should be extended to youth and families whenever possible.
  - Empowerment, Voice, and Choice: Victimization and trauma cause individuals to feel disempowered. For this reason, empowerment, voice, and choice constitute central components of a trauma-informed approach.

**The Center for Children, Families, and Workforce Development**
The two grant areas – enhancing family engagement and building strong transitions into adulthood – correspond to Center efforts. Visit the Center’s website to learn more: [http://health.umt.edu/ccfwd/](http://health.umt.edu/ccfwd/).
Addendum 2
Subrecipient Entity Requirements

Innovation grants will be awarded as subgrants through the University of Montana. Grantees are considered a Subrecipient Entity. As such, all University policy and procedures guiding subgranting must be met. Subgranting requirements are described below. In addition, at the end of this addendum is a link to an online Subrecipient Commitment Form that all successful grantees must complete. Important note: The process to register in SAM.gov and secure a DUNS number can take up to two months. Please begin this process immediately. No grant funds can be dispersed until all subrecipient requirements are met.

Subrecipient Requirements

1. The Subrecipient Entity has a DUNS number and has provided it.
2. Verify that the Subrecipient Entity is currently registered in SAM and has no active exclusions.
   a. Open a web browser and navigate to SAM.gov
   b. Press the Search Records button
   c. Enter the Subrecipient entity’s DUNS number in the DUNS Number Search box (no dashes or spaces).
   d. Press Search
   e. Verify that the search result includes the following:
      i. The correct name of the Subrecipient Entity
      ii. Status: Active
      iii. Has Active Exclusions? No
      iv. Expiration Date: Future Date (If this date is in the near future, the subrecipient should be alerted that they will need to renew their registration soon.)

Note 1: If the Subrecipient is not yet registered in SAM they should begin the process immediately. The process can be time consuming, but it is free. Registration must be completed and verified prior to issuance of subaward.

Note 2: Subrecipient entities occasionally opt for their SAM record not to be available to public search. Instructions can be provided in this case for the subrecipient to provide a screen shot from within SAM containing the necessary information. (You will recognize this situation when your SAM search returns the following message: “Access to this entity registration is restricted. It cannot be displayed through public search.”)

3. Verify that Subrecipient Entity is also not listed on the state Debarred & Suspended Vendors page: https://spb.mt.gov/Agency-Resources/DebarredSuspendedVendors

4. Ensure that subrecipient understands the following requirements:
   a. Prior to issuance of subaward all subrecipients must provide a copy of their most recent audit or taxes for UM’s review and will be required to do so each year for the life of the subaward plus one year (to ensure that UM reviews all tax years pertaining to the entire life of the subaward).
   b. All subrecipients must complete all sections of the Subrecipient Commitment Form and verify that all checkboxes and radio buttons have the correct selection. (Some options may be pre-filled/selected due to form behavior and should be verified/corrected.)

Subrecipient Commitment Form Link:
http://www.umt.edu/research/ORSP/forms/Subrecipient%20Commitment%20Form.pdf

For questions or assistance, contact Joni Waldrup, Subaward Services (joni.waldrup@umontana.edu).
Addendum 3
Funding Exclusions

Innovations grant funding is provided through Title XX of the Social Security Act. Under Title XX, funding the following activities is prohibited.

See Title XX, Sec. 2005. [42 U.S.C. 1397d]

(1) the purchase or improvement of land, or the purchase, construction, or permanent improvement (other than minor remodeling) of any building or other facility;

(2) the provision of cash payments for costs of subsistence or for the provision of room and board (other than costs of subsistence during rehabilitation, room and board provided for a short term as an integral but subordinate part of a social service, or temporary emergency shelter provided as a protective service);

(3) the payment of the wages of any individual as a social service (other than payment of the wages of welfare recipients employed in the provision of child day care services);

(4) the provision of medical care (other than family planning services, rehabilitation services, or initial detoxification of an alcoholic or drug dependent individual) unless it is an integral but subordinate part of a social service for which grants may be used under this subtitle;

(5) social services (except services to an alcoholic or drug dependent individual or rehabilitation services) provided in and by employees of any hospital, skilled nursing facility, intermediate care facility, or prison, to any individual living in such institution;

(6) the provision of any educational service which the State makes generally available to its residents without cost and without regard to their income;

(7) for any child day care services unless such services meet applicable standards of State and local law;

(8) the provision of cash payments as a service (except as otherwise provided in this section);

(9) payment for any item or service (other than an emergency item or service) furnished—
   (A) by an individual or entity during the period when such individual or entity is excluded under this subtitle or title V, XVIII, or XIX pursuant to section 1128, 1128A, 1156, or 1842(j)(2), or
   (B) at the medical direction or on the prescription of a physician during the period when the physician is excluded under this subtitle or title V, XVIII, or XIX pursuant to section 1128, 1128A, 1156, or 1842(j)(2) and when the person furnishing such item or service knew or had reason to know of the exclusion (after a reasonable time period after reasonable notice has been furnished to the person); or

(10) in a manner inconsistent with the Assisted Suicide Funding Restriction Act of 1997[6]