CALIFORNIA DEPARTMENT OF
Mental Health
1600 9th Street, Room 100, Sacramento, CA 95814
(916) 654-2996

August 5, 2004

TO: COUNTY OFFICES OF EDUCATION
SCHOOL DISTRICT SUPERINTENDENTS
STATE SPECIAL SCHOOLS
COUNTY MENTAL HEALTH CHILDREN'S COORDINATORS
OTHER INTERESTED PARTIES

SUBJECT: EARLY MENTAL HEALTH INITIATIVE: EMHI-2004

REFERENCE: Welfare and Institutions Code, Division 4, Part 4 (commencing with Section 4370)

The California Department of Mental Health (DMH) invites Local Education Agencies (LEAs) to apply for funding through the Early Mental Health Initiative (EMHI). The requirements of EMHI are outlined in Chapter 757, Statutes of 1991 (Assembly Bill 1650), the School-Based Early Mental Health Intervention and Prevention Services for Children Act. Funding is available through the EMHI Request for Application (RFA) process to implement early mental health intervention and prevention services that target students in kindergarten through third grade who attend a publicly funded elementary school or state special school.

Approximately $5.0 million will be available to fund new programs during Fiscal Year 2004-2005. Eligible applicants are LEAs, which are defined as publicly funded county offices of education (COE), school districts, and state special schools. LEAs are required to develop applications and provide services in cooperation with the local mental health programs and/or private non-profit mental health agencies.

The EMHI provides for a three-year grant with the state share of funding not to exceed 50 percent (50%) of the total program cost. LEAs and/or local non-profit mental health agencies are required to match the state funding by providing at least 50 percent (50%) of the total program cost.

No more than five new school sites may be funded per school district except in large districts that have been regionalized administratively. Regionalized districts may apply for up to five school sites per region, up to 20 school sites per school district.

Small school districts in the same counties are encouraged to pool resources and expertise to promote economy of scale and avoid duplication of efforts. Up to three school districts may submit a joint application that includes no more than five school sites. The COE may submit a consortium application that is limited to no more than five school districts and seven school sites. The consortium grant recipient will be the COE who may designate one of the participating school districts to assume fiscal and administrative responsibility for the consortium. The maximum amount of state funding available each fiscal year is $40,000 for each school site.

Priority will be given to applications that best meet the requirements of the RFA at the lowest cost per student to receive services. All applications must demonstrate that the proposed services are research-based and must be based on adoption of models that have been shown to be effective and that meet the needs of culturally and ethnically diverse communities.

The deadline for submission of applications is 5:00 p.m., Wednesday, September 15, 2004. The enclosed RFA includes an estimated time schedule for awarding grants.

If you have any questions regarding the RFA or need additional information about EMHI, please contact the DMH, EMHI staff at (916) 654-2996.

FRAN COLETTI
Acting Deputy Director
Administrative Services

Enclosures

cc: Superintendent of Public Instruction

INSTRUCTIONS TO APPLICANTS

You are invited to submit an application to the California Department of Mental Health (DMH) for the project numbered and titled:

EMHI-2004
Department of Mental Health - EARLY MENTAL HEALTH INITIATIVE

This Request for Application (RFA) is being issued in accordance with the provisions of Section 4380 of the Welfare and Institutions Code. All applicants are expected to comply with the following requirements:

A. Applications must be submitted in a sealed envelope/box. The sealed envelope/box must be clearly marked with the applicant's name and return address, clearly labeled EMHI-2004 Department of Mental Health – Early Mental Health Initiative, and mailed or delivered to:

California Department of Mental Health
Contracts Unit
1600 9th Street, Room 150
Sacramento, CA 95814

B. The original and four (4) additional copies of the following documents must be submitted. All necessary forms are included with this RFA.

Grant Request Form
Program Summary Form
Budget Form
Budget Narrative
Key Staff Summary Chart
School Enrollment and Student Demographics Chart
Part 1: Applying for Same Program Service at a Previously Funded EMHI Site (if applicable)
Part 2: Characteristics of Applicant
Year-Round Multi-Track Calendar(s) (if applicable)
A list of each region and the school sites in each region (if applicable)
Part 3: Application Narrative (for meeting the requirements set forth in the Program Statement of the RFA)
Part 4: Description of Supporting Research
Part 5: Grant Development and Support
Letters of Support
Vitae (for all key professional staff)
Certifications of Assurance of Compliance (2)

C. Applications must be <u>received</u>, not postmarked, by 5:00 p.m. at the address indicated above on or before Wednesday, **September 15, 2004**. Applications may not be faxed or sent electronically because DMH requires that an application with an original signature be received on or before the due date and time.

D. The Grant Request Form must be completed, signed, and dated by the Local Education Agency (LEA) superintendent or his/her designee. This form, when submitted in conjunction with the other requirements specified in the preceding Section B, constitutes the application.

E. TIME SCHEDULE

NOTE: This schedule is contingent upon a number of factors, including the availability of funds. Should any significant date be modified, applicants will be notified by the DMH.

All applicants are hereby advised of the following schedule and will be expected to adhere to the specified performance requirements.

1.	RFA package mailed to prospective applicants	August 2004
2.	RFA Information Meetings	August 2004
3.	Notice of Intent to Apply submitted to DMH	September 1, 2004
4.	Applications must be received by 5:00 p.m.	September 15, 2004
5.	Evaluation and scoring of applications	October 18-22, 2004
6.	Posting of Notice of Intent to Award (Projected Date)	November 1, 2004
7.	Notice of Intent to Award Letter mailed (Projected Date)	November 1, 2004
8.	Mandatory orientation meeting for Project Coordinators and School Based Mental Health Professionals	December 2004
9.	Mandatory Training Conference	January 2005
10.	Term of Agreement:	November 1, 2004 – June 30, 2007

The term of the annual allocation will be for a period of no greater than one year, each year of the three-year grant period and is contingent upon the availability of funding through the Budget Act.

F. CONTACTS BETWEEN APPLICANTS AND STATE

Applicants may contact State Program Analysts at DMH, Early Mental Health Initiative, for information regarding the RFA process or budget requirements. The general office phone number is (916) 654-2680.

For questions concerning program models or implementation issues, applicants may contact an EMHI Technical Assistance Consultant. All staff and consultant phone numbers and regions are listed on the organization chart on page 19 of the RFA.

Any question that may materially alter the RFA requirements must be submitted in writing to the DMH Contracts Unit by August 19, 2004. DMH will provide the answers to these questions in writing to all applicants.

G. SUBMISSION OF APPLICATIONS

1. Applicants must respond to all items specified as required in the RFA EMHI-2004. It is sometimes necessary to amend information or requirements after the release of an RFA. Please periodically check the DMH website, www.dmh.ca.gov/emhi, for updates regarding the RFA EMHI 2004.

2. No applications, modifications and/or corrections to applications will be allowed after the submission due date and time specified in this RFA.

3. APPLICATIONS MUST CONTAIN THE COMPLETED GRANT REQUEST FORM FURNISHED BY DMH. The Grant Request Form must contain an ORIGINAL signature. The information requested on the form must be printed in ink or typewritten. No erasures are permitted. Errors may be crossed out, corrections printed in ink or typewritten adjacent to the error, and the person signing the application must initial the correction in ink. The maximum amount of funding awarded for one fiscal year will be the amount entered on the Grant Request Form.

4. Applications must include all of the required forms as identified in RFA EMHI-2004, and listed on page i, Section B.

5. Applications must include the two Certification of Assurance of Compliance forms (Supplant and Applying for Same Program Service at a Previously Funded EMHI Site) that are dated and signed with original signatures.

6. Applicants may not substitute any of the forms provided in the RFA EMHI-2004. The forms may be accessed at www.dmh.ca.gov/emhi through the DMH EMHI website.

7. An application may be rejected if DMH determines that irregularities warrant a finding of substantial noncompliance with the RFA requirements.

8. The state may waive any immaterial defect in an application (see definition on page v, Section I). The state's waiver of an immaterial defect shall in no way excuse the applicant from full compliance with the RFA if awarded the grant.

9. All applicants must submit a detailed budget and budget narrative. The budget information will become a part of the allocation document. Following the announcement of awards, the state reserves the right to negotiate with successful applicants any aspect of the application deemed necessary by the state to better achieve program goals. An unwillingness to negotiate any aspect of the application shall be considered grounds for rejection of the application and cancellation of the award.

10. The original application must be clearly labeled “original,” and each of the four copies must be clearly labeled “copy.” The original and each of the four required copies of the application must be securely bound and enclosed in front and back covers. The front cover must clearly identify the applicant’s name and the applicant’s county.

11. All application narrative portions (Part 1, Part 2, Part 3, and Part 4) must be **double-spaced** (approximately three typed lines per inch). In addition to the automatic deduction of five points, the reviewers will only read one-half of the pertinent application section if single-spacing (six lines or more per inch) is used, or two-thirds of the pertinent application section if 1.5 (4 lines per inch) spacing is used.

12. The number of pages for each part of the application narrative may not exceed the maximum number of pages allowed per the instructions for each part. Pages must be numbered according to the page numbering instructions for each part of the application narrative. Forms do not need to be numbered. Pages not used in one part of the application may not be used in another part of the application.

13. All parts of the application must present the information in the sequence requested, including the sections and subsection headings that are used in the narrative instructions for each part. The application narratives are comprised of Part 1: Applying for Same Program Service at a Previously Funded EMHI Site; Part 2: Characteristics of Applicant; Part 3: Application Narrative; and Part 4: Description of Supporting Research.

14. A plain style font that is easy to read must be used for all portions of the application. The font and size used in this RFA is Arial 12 (IBM, Microsoft Word). A comparable font and size using Microsoft Word on an Apple is Geneva 12. The type size should be no smaller or narrower than the type used in this portion of the RFA. The margins must be at least one inch at the top and bottom of each page, one inch left margin (to allow for binding), and ½-inch right margin.

Failure to adhere to the Submission Requirements will result in a deduction of points or the rejection of the application. Refer to page 4, Automatic Deductions, for further information.

H. REJECTION/DISQUALIFICATION

The following shall cause the immediate rejection or disqualification of an application or sites listed in the application:

1. Any application not received at the location and the time specified in the RFA (refer to page i).

2. Any application not submitted in a sealed envelope/box, plainly marked with the applicant's name and return address, and clearly labeled EMHI-2004, when such an omission results in a delayed opening of the application and compromises the integrity of the competitive process.

3. School sites that have previously been funded through EMHI for the same services proposed in this application that are not included in Part 1: Applying for Same Program Service at a Previously Funded EMHI Site (if applicable) will be disqualified from the application.

4. Any school site listed in the application that has previously been funded twice by EMHI for the same program model or service(s) will be disqualified. If an application lists multiple school sites, only the sites that have been funded twice for the same services will be disqualified. EMHI began funding grants in July 1992.

5. Substantial nonresponsiveness to programmatic requirements.

6. An unwillingness to negotiate any aspect of the application deemed necessary by the state to enhance the quality of services proposed in the application.

7. Any application deemed not to be an original work product.

8. Any application that is submitted by an entity other than a Local Education Agency.

9. Any school site listed in the application will be disqualified if it is determined that the services proposed to be funded through EMHI would supplant existing services.

10. Any school site that will receive EMHI grant funds for a continuing program in Fiscal Year 2004-2005 will be disqualified.

I. IMMATERIAL DEFECT

An immaterial defect is a flaw, incompletion, defect, or condition in an application that may not warrant disqualification of the application. However, if an application is found to contain a substantial number of immaterial defects, it may be determined to be substantially noncompliant and will be rejected.

J. AWARD PROCESS

All applications will be reviewed by EMHI staff to determine if the requirements specified in the RFA were met.

All applications meeting the requirements will be submitted to an evaluation committee, which will evaluate and score the applications using the criteria specified in the RFA. In scoring an application, each individual component in the evaluation criteria will be weighed in the context of its contribution to the end product. All applications and all evaluation and scoring sheets will be available for public inspection at the conclusion of the committee scoring process and after the Notice of Intent to Award is posted.

Grants will be awarded to applicants whose applications are given the highest scores by the evaluation committee in accordance with legislative requirements, DMH policies and the availability of funds.

On the date that awards are announced, a Notice of Intent to Award list of all participating applicants and their scores will be posted in the office of the Early Mental Health Initiative, Department of Mental Health, 1600 9th Street, Room 100, Sacramento, California. On the same date, a "Notice of Intent to Award" letter will be mailed to all the superintendents of LEAs that submitted an application, and a copy

will be mailed to the designated project coordinator at the mailing address specified in the application. The posting of the Notice of Intent to Award will also be announced on the DMH website at www.dmh.ca.gov/emhi.

K. PROTEST PROCEDURES

This application is being solicited in accordance with Section 4380 of the Welfare and Institutions Code. Accordingly, the protest provisions of the Public Contract Code will not apply to the award of grants under this RFA. The protest provisions for this RFA are as follows:

1. A letter of protest with an original signature must be submitted by the LEA superintendent or his/her designee and **received** by DMH, not postmarked, no later than five (5) working days (excluding the first day and including the last day) from the date on the Notice of Intent to Award letter. The only acceptable delivery method for a letter of protest is by a postal service (United States Post Office, Federal Express, etc.). **The letter of protest cannot be hand-delivered by the applicant, faxed, or sent by electronic mail. Any letter of protest received without an original signature and/or by any delivery method other than a postal service will not be considered.**

   The letter of protest must be addressed and sent to the following address:

   California Department of Mental Health
   Contracts Office – EMHI-2004 Protest
   Attention: Christina Bednarczyk
   1600 9th Street, Room 150
   Sacramento, CA 95814

2. The letter of protest must describe the factors which caused the applicant to conclude that the reviewers did not follow the prescribed rating standards, explain why the score is in conflict with the rating standards or the grant award process described in the RFA, and identify specific information in the application that the applicant believes was overlooked or misinterpreted. The letter of protest may not provide additional information that should have been included in the original application.

3. Upon receipt, the protest will be evaluated for substantial merit.

4. Based upon the evaluation of the protest, the applicant's original score may be increased or decreased.

5. DMH will make a decision within ten (10) working days of the receipt of the letter of protest. All decisions are final.

The awards are pending until the conclusion of the protest period. Please contact the regional State Program Analyst listed on page 19 prior to hiring staff or implementing program.

TABLE OF CONTENTS

PAGE

I. Introduction and Purpose of Program 1

A. Background 1
B. Goals 2
C. Key Elements 2
D. Application Review and Scoring 3

II. Program Requirements 4

A. Program Services and Models 5
B. Expansion and Augmentation of Existing Services 8
C. Eligibility 8
D. Cooperating Mental Health Entity 11
E. Cultural Competency 11
F. Funding 12
G. Data Collection and Program Reporting Requirements 15
H. Notice of Intent to Apply 16
I. Steps in Preparing This Application 17
J. Program Implementation 18
K. Technical Assistance to Applicants 18

III. Application Requirements 20

A. General Guidelines 20
B. Part 1: Applying for Same Program Service at a Previously Funded EMHI Site 20
C. Part 2: Characteristics of Applicant 22
D. Part 3: Application Narrative 23

1. Program Services 23
2. Program Staffing 29
3. Program Evaluation 32

E. Part 4: Description of Supporting Research 33
F. Part 5: Grant Development and Support 33
G. Fiscal Match and Budget Preparation 35
H. Application Checklist 39

IV. Appendix 40

EMHI-2004

REQUEST FOR APPLICATION
EARLY MENTAL HEALTH INITIATIVE

August 2004

PROGRAM STATEMENT

I. INTRODUCTION AND PURPOSE OF PROGRAM

Chapter 757, Statutes of 1991, Assembly Bill (AB) 1650 (Hansen) authorized the School-Based Early Mental Health Intervention and Prevention Services for Children Act. This legislation permits the California Department of Mental Health (DMH) to award Early Mental Health Initiative (EMHI) matching grants to Local Education Agencies (LEAs) to implement mental health intervention and prevention programs. The target population of EMHI funded programs are students in kindergarten through third grades who have been identified as experiencing mild to moderate school adjustment difficulties. An LEA is defined as any publicly funded school district, county office of education, or state special school. Matching grants are provided to LEAs to implement programs located in publicly funded elementary schools for a three-year funding cycle. LEAs are required to provide at least 50 percent (50%) of the total cost of the proposed program costs.

During Fiscal Year 2003-2004, DMH supported programs based at 329 school sites in 86 school districts located in 30 counties.

The California Department of Education also has a school-linked service program called Healthy Start. It represents an opportunity for K-12 schools to involve themselves in a comprehensive partnership to reform the current delivery of support services to students and their families. This is achieved by the formation of new partnerships between schools and health and human services agencies. Additional information can be obtained from the California Department of Education at (916) 319-0914. An LEA may apply for and receive funding for both EMHI and Healthy Start programs.

A. BACKGROUND

Surveys nationwide have documented that at least 30 percent of all elementary school students experience moderate to severe school adjustment difficulties. Research has shown that the behavior of children experiencing school adjustment difficulties is often detectable at an early age. A positive correlation exists between the following behaviors/attributes and later difficulties: lack of commitment to school; poor attendance; poor academic achievement; acting-out behavior; inability to make friends; excessively shy and/or withdrawn behavior; inability to cope with structure; and poor school bonding. As these children become older, they may receive services from public agencies because of substance abuse difficulties, teenage pregnancy, school dropout, delinquent behavior, and/or major mental health problems.

In recent years, it has been demonstrated that programs based on systematic early identification, backed by prompt and effective intervention, can prevent later adjustment difficulties at great savings to individuals, schools, mental health programs, and society at large.

The California DMH is committed to early mental health prevention and intervention and has funded and supported such programs since 1982.

B. GOALS

The goals of the Initiative and subsequent legislation are to enhance the social and emotional development of young students; increase the likelihood that students experiencing mild to moderate school adjustment difficulties will succeed in school; increase personal competencies related to life success; and minimize the need for more intensive and costly services as they grow older. A number of early mental health intervention and prevention programs have proven to be successful. Two models, the San Diego Unified Elementary Counseling Program and the Primary Intervention Program (PIP), are examples of programs funded through EMHI and were cited in Chapter 757, Statutes of 1991 (AB 1650).

By allocating matching fiscal support for the first three years, EMHI provides an opportunity for LEAs to collaborate with cooperating mental health entities, such as local mental health programs or private nonprofit agencies. The intent of this collaboration is to implement, expand, or modify school-based programs that enhance school adjustment, mental health, and social/emotional development of students and to integrate such services into the local school program schedule after the three-year funding cycle.

C. KEY ELEMENTS

EMHI emphasizes several **key elements** related to the implementation of school-based early mental health prevention and intervention programs. Programs funded through EMHI should*:*

- Serve students in kindergarten through third grade experiencing mild to moderate school adjustment difficulties.
- Provide services that are school-based and low cost.
- Provide services in a culturally competent manner.
- Provide services to appropriate students in the target population from low-income families.
- Provide services to appropriate students in the target population who are in out-of-home placement or are at-risk of out-of-home placement.
- Encourage the involvement of parents/guardians and teaching staff to build alliances to promote student's mental health and social and emotional development.

- Provide services in collaboration with a cooperating mental health entity such as a County Mental Health Department or a private non-profit agency.
- Use a systematic selection process of students most likely to benefit from program participation.
- Use alternative personnel, such as child aides, to provide direct services to students.
- Change the traditional roles of mental health professionals.
- Provide ongoing supervision and training of child aides by credentialed school psychologists, school social workers, or school counselors in collaboration with professional staff of the cooperating mental health entities.
- Provide ongoing monitoring and evaluation of program services.
- Ensure implementation of programs that are based on adoption or modification, or both, of existing program models that have been shown to be effective and which are based on sound research.

D. APPLICATION REVIEW AND SCORING

Applications will be evaluated by a team comprised of children's services specialists within DMH and program professionals in the field. A minimum score of 70 out of 100 is required for consideration of funding.

1. All applications will be reviewed and scored for the following:

    a. Documentation of the need for prevention and intervention services and a description of the program goals.

    b. A viable plan to implement programs and services that are based on adoption, expansion, or modification of existing programs that have been shown to be effective, based on documented research.

    c. Description of how the LEA will ensure services will be provided to students who qualify for EMHI funded services and who are from low-income families.

    d. A clear plan describing how the applicant will identify and consider for program services those students who are, or who are at risk of being, in out-of-home placement.

    e. A clear description of supportive services in collaboration with one or more cooperating mental health entities.

    f. A parent/guardian involvement component. An acceptable level of parent/guardian involvement is conducting a conference with the parent/guardian prior to, during, or upon a student's exit from participation in the program.

    g. Services that are culturally competent.

h. Services that are provided at a low cost per child.

i. An evaluation plan that includes quantitative and qualitative measures of school and pupil characteristics.

j. A plan describing how the proposed services will be continued after the funding period.

2. Automatic Deductions

"Adherence to RFA Instructions," item 7 on the score sheet, is worth a maximum of 10 points. Five points will be automatically deducted for each of the following reasons. The maximum deduction in this category is ten points.

a. Application is not securely bound and/or does not have a front cover.

b. Application is not double-spaced.

c. Application is not assembled in the correct order (see Application Checklist, page 39).

d. Application does not contain required headings in the narrative and/or does not respond to criteria in the proper sequence.

e. Margins, spacing, and/or type size are not in accordance with specifications on page iv.

f. Failure to respond to Part 1 for any site(s) listed in the application that were previously funded through EMHI for the same services proposed in the application.

g. Omission or failure to complete and/or sign any required forms.

3. Scoring for Part 1: Applying for Same Program Service at a Previously Funded EMHI Site

Part 1 pertains only to LEAs applying for funding at a school site that previously received EMHI funding for the same program service(s) (refer to pages 20 and 21 for detailed information). LEA's that do not adequately address each item on the Part 1 requirements (page 21) will have a maximum of 10 points deducted from the total score of the application. The Part 1 Rating Criteria is on page 56.

Failure to respond to Part 1, if applicable, will result in the immediate rejection/disqualification of the school site(s) that should have been addressed in Part 1 and an automatic deduction of points (refer to Section 2, Automatic Deductions) will be applied to the total application score.

II. PROGRAM REQUIREMENTS

An LEA may implement, modify, or expand an early mental health prevention or intervention model. Based upon documented research, the model must have been demonstrated to be effective. Research must be described per the instructions in Part 4: Description of Supporting Research on page 33. The application must propose to implement the same services at each site listed in the application, whether they are grant funded or locally funded.

The proposed services must target kindergarten through third grade students who are exhibiting mild to moderate school adjustment difficulties. These difficulties may be displayed in behaviors such as shyness, withdrawal, aggressiveness, acting-out, poor school attendance, poor school achievement, or poor social bonding. Students who are currently experiencing situational stressors which are known to be closely related to future school adjustment difficulties may also be considered for program participation.

IMPORTANT! EMHI is not intended to meet the needs of "high risk" students who require professional or ongoing intervention from school support staff or administrators. This Request for Application (RFA) is not to be considered for implementation of a therapy or treatment program, remedial education, or after-school care.

The primary recipient of services must be the student identified through a systematic selection process. The selection process should include a "team approach" and not rely solely on teacher classroom surveys. Services may be provided to an individual, in a small group, or a combination of the two services (depending upon the program model). Direct services to students are usually offered during normal instructional hours.

A. PROGRAM SERVICES AND MODELS

1. Direct Services

Direct services are delivered in either a one-to-one setting or in a small group format (two to four students) to selected students in the target population for a short, specified amount of time (usually twelve to fifteen weeks). If the application is proposing to implement only direct services to the target population, it must be classified as PIP, Other Model, or Other Model and PIP on the Early Mental Health Initiative Program Summary.

PIP is an example of a direct service model that uses a one-to-one nondirective play format exclusively throughout the duration of the services to students.

An application that proposes to implement direct services that are not PIP would be identified as an Other Model. An example of an Other Model would be services delivered in a small group format that might include curriculums that address social skills, anger management, friendship groups, or topic specific adjustment groups such as divorce or grief. Another example of an Other Model would be two different types of direct services such as small groups and one-to-one services that are not PIP services.

An application could propose to implement two direct services with grant funding such as PIP and small group services. This application would be classified as an Other Model and PIP.

Locally funded direct services that were previously funded through EMHI and that are used as LEA match combined with the proposed direct services comprise the “model”. An example of this is an application that proposes to implement small group services with EMHI funding and also uses the locally funded PIP services as match funding. This application would be classified as an Other Model and PIP.

Each school site listed in the application must deliver the same type of services, whether they are grant funded or locally funded. For example, an application proposes to implement small group services that address social skills development at four sites. The LEA proposes to use locally funded PIP services at three of the four sites as match to the grant funded group services. This is not acceptable. The application would need to also propose to fund PIP at the other site to result in all four sites implementing the same program model.

The research to support the grant funded direct services **other than PIP** must be included in Part 4: Description of Supporting Research (see page 33).

Please contact an EMHI Technical Assistance Consultant or EMHI staff at DMH if you have questions regarding the type of services that can be funded through EMHI.

2. Indirect (Enhancement) Services

A program **enhancement** is a supportive service which is indirect, secondary in nature, and complements the direct service to selected students from the target population (identified K-3 students). Indirect services are typically provided to school staff, parent/guardians, and/or classrooms. An enhancement application may include more than one type of indirect service; however, the same services, whether they are grant funded or locally funded, must be delivered at all sites listed in the application. Following are some examples of indirect service components:

a. Services to parents/guardians of the target population might include parent education and/or support services, a parent resource center, parent outreach and/or family play nights.

b. Services to school staff of the target population might include in-services and/or workshops on such topics as addressing the needs of students experiencing mild to moderate school adjustment difficulties; managing classroom behavior; teaching social skills; establishing positive relationships with parents/guardians, and consultation with a mental health professional regarding the needs of students.

c. Services to students in kindergarten through third grade classrooms might include topic specific curriculums, such as social skills, anger management, and/or violence prevention. These services must complement the direct services delivered to selected students in the target population.

An application that includes any indirect service to a direct service program, whether the indirect service is funded through EMHI or provided as the local share of the matching grant, is considered to be an enhancement. An applicant may apply for funding for a direct service and an indirect service in the same application. If the applicant is applying for indirect services only, the indirect service cannot be funded through EMHI if the LEA does not maintain the locally funded direct service for the three-year funding cycle.

Locally funded indirect services used as the local share of the matching grant must have previously been funded through EMHI or PIP and must be maintained at the level described in the application for the three-year funding cycle of the grant. An application for enhancement services must be identified as "Enhanced PIP, Enhanced Other Model, or Enhanced Other Model and PIP" on the Early Mental Health Initiative Program Summary Form and the research to support the indirect services must be included in Part 4: Description of Supporting Research.

Example 1: An application proposes to implement a Primary Intervention Program (PIP) and an education and support group for the parents/guardians of the students served in PIP. This application must be identified as an "Enhanced PIP," and the research to support the parent education and support groups must be included in the application.

Example 2: An application proposes to implement a social skills curriculum to be delivered by the classroom teacher. EMHI will provide funding to train the classroom teachers regarding how to conduct the social skills curriculum. The LEA is proposing to use their locally funded PIP as a match. This application must be identified as an "Enhanced PIP" because the classroom services are considered an indirect service to the locally funded direct services program (PIP). The research to support classroom curriculum for social skills must be included in the application.

Small group services (2-4 students) are considered to be direct services (refer to page 5) and are not enhancement services to another direct services component.

3. Program Models

There are many research-based curriculums that can be implemented with EMHI funding. The models funded through EMHI are broadly classified based upon the general services to be provided to the target population. The Early Mental Health Initiative Program Summary Form (page 49) requires that the application be identified as either Primary Intervention Program (PIP), Other Model, Other Model and PIP, Enhanced PIP, Enhanced Other Model, or Enhanced Other Model and PIP. The program model described in the application must meet all the requirements set forth in the legislation and this RFA.

Applicants are encouraged to contact a Technical Assistance Consultant or a Program Analyst (refer to page 19) if assistance is needed in classifying the type of program model proposed for implementation.

Welfare and Institutions Code (WIC) Section 4380 (h) (5) states "A minimum of 80 percent (80%) of the grants awarded by the director shall include the basic components of the Primary Intervention Program" (refer to page 41).

Applications for funding for Other Model direct services that include PIP services as the local share of the matching grant in the program budget will meet the 80 percent (80%) requirement and should be classified as Other Model and PIP. Applications that include locally funded PIP services as the local share of the matching grant to proposed other direct services must clearly demonstrate how the PIP services will integrate with the other direct services in every aspect (students needs, student selection process, program staffing, supervision and training, etc.).

Locally funded direct services that were previously funded through EMHI and that are used as LEA match combined with the proposed direct services comprise the program "model".

B. EXPANSION AND AUGMENTATION OF EXISTING SERVICES

An LEA may increase EMHI funded services to other school sites within the LEA or increase the level of locally funded services at a school site that was previously funded through EMHI or PIP. There are two ways to increase services that are currently being maintained by the LEA:

1. Expansion of Services

   The expansion of services is defined as the implementation of a program model currently being operated within the LEA, which has been or is currently funded through EMHI or PIP, to other sites within the LEA.

2. Augmentation of Services

   The augmentation of services is defined as increasing the level of services (staff/hours) of a model at a school site, which was formerly funded through either EMHI or PIP, and is currently being maintained with local funding. If the augmented services are not maintained at the level proposed in the application for the duration of the grant, the requested services will be considered a supplant.

   Note: The expansion and augmentation of services are **NOT** program models.

C. ELIGIBILITY

An eligible applicant is an LEA, which is defined as a publicly funded school district, county office of education, or state special school. All programs supported under the terms of this RFA must be based at a public school site and must focus on services to students in kindergarten through third grade in the target population who attend publicly funded elementary schools.

Once the grant is awarded, the school sites specified in the application may not be changed for any reason. The approved program model or support services may not be changed or modified without prior approval from DMH.

School sites that will receive EMHI grant funds for continuing programs in Fiscal Year 2004-2005 are not eligible to receive additional funds and cannot be included as a proposed site in the application.

After a three-year funding cycle, LEAs are expected to maintain the program services on local funding. LEAs may NOT receive EMHI funding for the same program model/service at the same site(s) more than two times. This applies to all applicants who have received funding through EMHI beginning July 1, 1992 and thereafter. This includes applicants who received EMHI funding through the submission and approval of an application in response to the Request for Proposals CMU 92-01, CMU 92-03, CMU 93-01, and/or Request for Applications EMHI-94, EMHI-95, EMHI-96, EMHI-97, EMHI-98, EMHI-99, EMHI-2000, and EMHI-2001.

1. **School Districts**

   No more than five school sites per school district will be funded each year.

2. **School Districts Regionalized Administratively**

   No more than five new school sites per region will be funded each year. Regional applications must not exceed a combination of 20 school sites per school district. The school sites in each application cannot cross regions. (Example: Region I submits an application for five school sites but has another site that is interested. Region II submits an application for four sites. Region II may not include a site from Region I in its application.)

   NOTE: Applications from regionalized districts must include a list of each region in the district and the school sites in each region. Applicants must also enter the specific region identifier (number, name, letter, etc.) next to each school site listed on the Early Mental Health Initiative Program Summary form.

3. **Joint Applications**

   A joint application may be submitted by a maximum of three school districts. A joint application may not exceed a combination of five school sites (e.g. three sites from one district and two from another). It is required that one district assume all responsibility for fiscal and administrative matters. The project coordinator must be employed by the designated district.

   School districts that are regionalized administratively may submit a Joint Application combining sites from up to three regions into one application. A joint application from a regionalized district may not exceed a total of five school sites. There must be one designated project coordinator from one of the regions listed in the application.

4. **County Office of Education (COE) Consortium Applications**

   DMH encourages school districts in the same county, with the coordination and assistance of the county office of education, to form a consortium to apply for grants. Establishing a consortium promotes economy of scale and avoids duplication of effort. It also allows districts to pool expertise and resources. A consortium application is limited to five school districts and a maximum of seven school sites. The COE must submit the grant application on behalf of a consortium, become the grant recipient, and ordinarily assume the fiscal and administrative responsibilities, including the function of program coordination.

One of the participating school districts may be designated as the fiscal/administrative unit for the entire consortium. In such event, the project coordinator must be an employee of the designated school district.

A COE may submit multiple applications for the same program services provided the districts in each application are unique and, if the districts are regionalized administratively, each application does not include school sites from the same region(s) as the other applications. Refer to the section titled School Districts Regionalized Administratively. School districts that are included in consortium applications submitted by the COE are precluded from submitting an application for the same program services independently from the COE, except in the case of districts that are regionalized administratively. Refer to the following Example 3 for clarification of this exception.

5. **Eligibility Requirements**

   a. An LEA may not submit more than one of **each** type of application (PIP, Other Model, Other Model and PIP, Enhanced PIP, Enhanced Other Model, Enhanced Other Model and PIP) per school district/region. If more than one application is submitted, a particular school site may only be proposed one time, in one application. No more than a total of five school sites per school district/region **(not per application)** will be funded.

      Example 1: An LEA submits an Enhanced PIP application for two sites and another Enhanced PIP application for three additional sites within the same district or cluster and proposes to provide different enhancement services in each application. This is not acceptable. An LEA MAY only submit one Enhanced PIP application that proposes to provide the same services at all five sites.

      This requirement includes applications submitted by school districts and COEs in the same county.

      Example 2: A COE submits a PIP application on behalf of five school districts at seven sites. One of the school districts listed in the COE application also submits a PIP application for a different site than those listed in the COE application. This is not acceptable. However, if the school district submits an application for any other type of model, this would be acceptable.

      Example 3: A COE submits a PIP application on behalf of five school districts and seven sites. One school district in the COE application is regionalized administratively, and one of the seven school sites is in Region 1 in that district. The regionalized school district also submits a PIP application for a different school site that is also in Region 1. This is not acceptable. If the school site is in another region, or is included in a different type of application (Other Model, Other Model and PIP, Enhanced PIP, Enhanced Other Model, or Enhanced Other Model and PIP), then this is acceptable.

b. An LEA may apply for grant funding for only one type of program model per application.

Example: An application proposes to implement PIP at two school sites listed in the application. The application also proposes to implement PIP and parent education services (enhancement services) at a third school site listed in the application. This would not be acceptable. All three school sites must implement the same services, including any services used as local match.

c. An LEA may submit more than one type of application (PIP, Other Model, Other Model and PIP, Enhanced PIP, Enhanced Other Model, or Enhanced Other Model and PIP) for program models at different sites. If more than one application is submitted, a particular school site may only be proposed one time, in one application. No more than five school sites per school district/region (not per application) will be funded.

Example: An LEA may submit a PIP application for two school sites and a separate Enhancement (Enhanced PIP, Enhanced Other Model, or Enhanced Other Model and PIP) application for three different school sites to implement indirect support services that enhance a locally funded direct service model.

D. COOPERATING MENTAL HEALTH ENTITY

A cooperating mental health entity is any federal, state, county, or private nonprofit agency which collaborates with the LEA in providing ongoing services. The application must clearly describe the cooperating entity's active role in the implementation of the program. Mental health services may be obtained from a cooperating entity through an interagency agreement or a subcontract between the applicant and the cooperating entity. Applicants may collaborate with more than one cooperating entity.

A cooperating entity must provide a letter for inclusion in the application confirming its participation in, and support of, the provision of collaborative services. Also, a letter from at least one cooperating entity must confirm its agreement to screen referrals of low-income students determined to be in need of mental health treatment services that are beyond the scope of the EMHI funded program. In this letter, the cooperating entity must also agree to facilitate linkages to resources for these students. Services provided to students whose needs are beyond the scope of EMHI may not be included in the application or program budget (grant request or match).

E. CULTURAL COMPETENCY

Culture is recognized as a predominant force in shaping behaviors, values, and decision making. DMH requires that EMHI applicants provide evidence of cultural competency **throughout** their applications. Cultural competency is defined as a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals, which enable them to work effectively in cross-cultural situations.

A culturally competent system of care acknowledges and incorporates on all levels the importance of culture, the assessment of cross-cultural relations, vigilance towards the dynamics that result from cultural differences, the expansion of cultural knowledge, and the adaptation of services to meet the needs of the culturally and linguistically diverse community. Cultural competency is not solely the recognition and understanding of race, language, and ethnicity but of thoughts, communications, customs, beliefs, values, socioeconomics, and acculturation of racial, ethnic, religious, or social groups.

Applications will be scored on this criterion based upon how well cultural competency is addressed **throughout** the application.

F. FUNDING

In Fiscal Year 2003-2004, DMH funded $10.0 million in grants for EMHI programs. The average grant per school site during Fiscal Year 2003-2004 was $30,395. Grant amounts will vary depending on the program and population of the school site where the services are provided. The fiscal year maximum funding available each year per school site is $40,000.

The state share of matching grant funds may be up to a maximum of 50 percent (50%) of the total program cost for each of the three years during the funding cycle. The local share of matching grant funds must be at least 50 percent (50%) of total program cost from a combination of school district and cooperating entity cash and in-kind services. Applications that exceed the 50 percent (50%) grant request limitation will receive a deduction in points.

The state reserves the right to negotiate the redistribution of costs within the budget to better achieve program goals. An unwillingness to negotiate any aspect of the application shall be considered grounds for rejection of the application.

It is recommended that LEAs consider developing programs that are based on an average yearly grant cost of approximately $656 per student served. This figure is based on the actual cost of programs that have been proven effective.

1. How Funding May Be Used

EMHI funding may be used to support the cost of staff, including professionals and child aides directly involved in the program and for various operating expenses and equipment as detailed in Fiscal Match and Budget Preparation, page 35. <u>Funding may not be utilized for major capital expenditures or to purchase electronic equipment, such as, TVs, VCRs, fax machines or computers without a justification and prior written permission from DMH</u>.

For example, a grantee may use grant funds to:

- Hire a new professional staff person or reallocate time of an existing professional staff person to coordinate and supervise the program.
- Hire child aides to work individually or in small groups with students who have been identified as having school adjustment difficulties.
- Contract with a cooperating entity. The applicant must provide a vitae for all

participating professional staff of the cooperating entity.

- Provide specific in-depth training and support to teachers, school staff, and parents/guardians related to the goals of the program.
- Provide teacher release time for activities specifically related to meeting the program goals.
- Provide supplies and materials needed to support program implementation and services.
- Provide training and reimbursement of travel expenses as appropriate. EMHI funds cannot be used for reimbursement of out-of-state travel expenses.

The statewide data collection costs, as defined on page 15, Data Collection, must be included in the grant request. Other local program evaluation costs, as described in the Program Reporting Requirements on page 15, may be funded with EMHI grant dollars. If the applicant proposes to conduct a local program evaluation with either grant or matching funds, DMH will require a copy of the local program evaluation.

Administrative overhead costs (indirect costs related to the implementation and operation of the program) may be funded for up to five percent of the grant request. (See page 44, Budget Preparation Instructions, for more information.)

NOTE: GRANT FUNDS MAY NOT BE USED TO SUPPLANT EXISTING SERVICES. AN EXISTING SERVICE IS ANY SERVICE BEING PROVIDED AT THE TIME THE APPLICATION IS WRITTEN AND SUBMITTED TO DMH BY THE APPLICANT. AN AUTHORIZED REPRESENTATIVE OF THE LEA MUST CERTIFY THAT EMHI FUNDS WILL NOT SUPPLANT EXISTING SERVICES OR FUNDS. A CERTIFICATION FORM FOR THIS PURPOSE IS INCLUDED IN THIS PACKAGE ON PAGE 57. THE CERTIFICATION MUST DATED AND SIGNED WITH AN ORIGINAL SIGNATURE.

NOTE: A CERTIFICATION OF ASSURANCE OF COMPLIANCE WITH EMHI-2004 PART 1 APPLYING FOR SAME PROGRAM SERVICE AT A PREVIOUSLY FUNDED EMHI SITE IS INCLUDED ON PAGE 58 AND MUST BE COMPLETED, SIGNED WITH AN ORIGINAL SIGNATURE, DATED AND INCLUDED IN THE APPLICATION.

Any cost incurred by the applicant related to the development of the application MAY NOT be included in the program budget, either as the local share of the matching grant or in the grant request. Such costs may include, but are not limited to, travel costs incurred by attending the RFA Information Meeting and/or personnel costs (including the cost of grant writers) incurred in the planning and development of the application.

DMH will consider the grantee (LEA) to be the sole point of contact with regard to all fiscal matters related to the grant award, unless a designee has been named in accordance with provisions described on page ii.

2. Local Match Requirements

All EMHI grantees must match the state funding in accordance with guidelines of the EMHI legislation. The local share of match may be in-kind services or cash. An in-kind match of services or resources can be in the form of salaries, equipment, space, or property. An appropriate contribution of services would be the rededication of a portion of the workweek of a school psychologist or school counselor to the EMHI program. That person's salary and/or benefits portion would constitute the local share of match. The cost of space claimed as in-kind for this program may not exceed 25 percent (25.00%) of the grant request.

All matches of in-kind services and/or resources must directly support the proposed model and target population and be clearly described in both the application narrative and budget narrative.

An application that proposes an **augmentation** of locally funded PIP services at a school site must include the locally funded PIP services at the same school site as match, even if the services were never previously funded through EMHI or PIP. Other services must have previously been funded through EMHI in order to be used as the local share of the matching grant in an application for the augmentation of locally funded services.

Locally funded indirect service programs proposed to be used as the local share of the matching grant in **enhancement** applications must have previously been funded through EMHI. For example, if an LEA wishes to use a locally funded parent education service as the local share of match to a grant funded PIP, the parent education service must have previously been funded through EMHI at that school site in order to be used as match for the grant funded PIP enhancement application.

Private funds or contributions from other agencies may also be included as match.

3. Future State and Local Funding Prospects

It is anticipated that sufficient state funding levels for the program will be provided in subsequent fiscal years. However, as with any state funded program, future funding will be determined by the level of funding dedicated to the program in the state budget.

Development of permanent local funding sources must be a primary goal of the LEA regardless of the availability of state revenue. Applicants must submit a plan proposing how they will assume the total costs to continue the program beyond the three-year grant period. LEAs may not receive EMHI funding more than two times for the same program service at any school site. Applicants requesting EMHI funding to restore or augment previously funded program services at the sites listed in this application are required to complete Part 1: Applying for Same Program Service at a Previously Funded EMHI Site (refer to Pages 20 and 21).

G. DATA COLLECTION AND PROGRAM REPORTING REQUIREMENTS

Statute requires an overall statewide evaluation that includes requirements for local data collection.

1. Data Collection

Grantees are required to keep records that will provide information necessary to evaluate the effectiveness of the program.

All LEAs must participate in the statewide data collection system, regardless of the program model being implemented. A fee is paid by DMH on behalf of the LEA to cover the cost of program evaluation instruments, scoring, and reporting of results back to the LEA. **The fee for Fiscal Year 2004-2005 is <u>estimated</u> to be $450 per school site and must be included in the application budget as part of the grant request.** DMH reserves the right to negotiate the applicant's budget to cover the actual cost of data collection.

2. Program Reporting Requirements

EMHI also requires grantees to submit periodic reports to the DMH that may include the following:

a. An evaluation of the effectiveness of the LEA in achieving stated goals.

b. A description of the problems encountered in the design and operation of the program including, but not limited to, identification of any government regulations that impeded program implementation.

c. The number of eligible pupils served by the program.

d. The number of eligible pupils who have not been served.

e. An evaluation of the impact of the program on the LEA and the students completing the program in the following areas:
   - Learning behaviors
   - Attendance
   - School adjustment
   - School related competencies

f. An accounting of local budget savings resulting from implementation of the program, either current or anticipated.

g. A plan for continuing services after state matching funds cease. This plan should specify potential cooperating mental health entities that will assist in providing the necessary funds and/or services.

H. NOTICE OF INTENT TO APPLY

Please complete and either mail or FAX the Notice of Intent to Apply form, included on the LAST page in this package, to the Early Mental Health Initiative office by September 1, 2004. This form is for planning purposes only and is not considered part of the application. Completion of the Notice of Intent to Apply is NOT a requirement of eligibility to apply for EMHI funding.

I. STEPS IN PREPARING THIS APPLICATION

Step 1 Complete and either mail or FAX the Notice of Intent to Apply form included in this application by September 1, 2004.

Step 2 Complete Part 1: Applying for Same Program Service at a Previously Funded EMHI Site (if applicable). Refer to the instructions on pages 20 and 21.

Step 3 Complete Part 2: Characteristics of Applicant in accordance with instructions beginning on page 22.

Step 4 Complete Part 3: Application Narrative in accordance with instructions beginning on page 23.

Step 5 Complete Part 4: Description of Supporting Research in accordance with the instructions on page 33.

Step 6 Complete Part 5: Grant Development and Support in accordance with instructions beginning on page 33.

Step 7 Complete the required forms: Grant Request Form, Budget Form and budget narrative, Early Mental Health Program Summary Form, Key Staff Summary Chart, School Enrollment Information and Student Demographics Chart, and the two Certifications of Assurance of Compliance.

Step 8 Review the entire application to ensure that the Grant Request Form is signed, all required information is present, and that all data and figures are consistent throughout the application.

Step 9 Using the Application Checklist, page 39, make sure that all documents are enclosed and collated in the order specified.

Step 10 Make copies and securely bind the application with front and back covers. The original application must be clearly labeled “Original” and the copies labeled “Copy.” The front cover must identify the applicant, the county in which applicant is located, and titled: EMHI-2004, Department of Mental Health - Early Mental Health Initiative.

Step 11 Submit the original and four additional copies to the DMH prior to 5:00 p.m. on September 15, 2004. Applications received after 5:00 p.m. on this date will be automatically disqualified. Applications may not be faxed or sent electronically to DMH.

J. PROGRAM IMPLEMENTATION

Programs are advised to contact the State Program Analyst prior to hiring staff or implementing program services (refer to page 19).

K. TECHNICAL ASSISTANCE TO APPLICANTS

DMH will, to the extent possible with available resources, make technical assistance available to applicants who request help with eligibility determination, budget preparation, and clarification of provisions in this RFA. It is sometimes necessary to amend information or requirements after the release of an RFA. Please periodically check the DMH website, www.dmh.ca.gov/emhi, for possible updates regarding the RFA EMHI-2004.

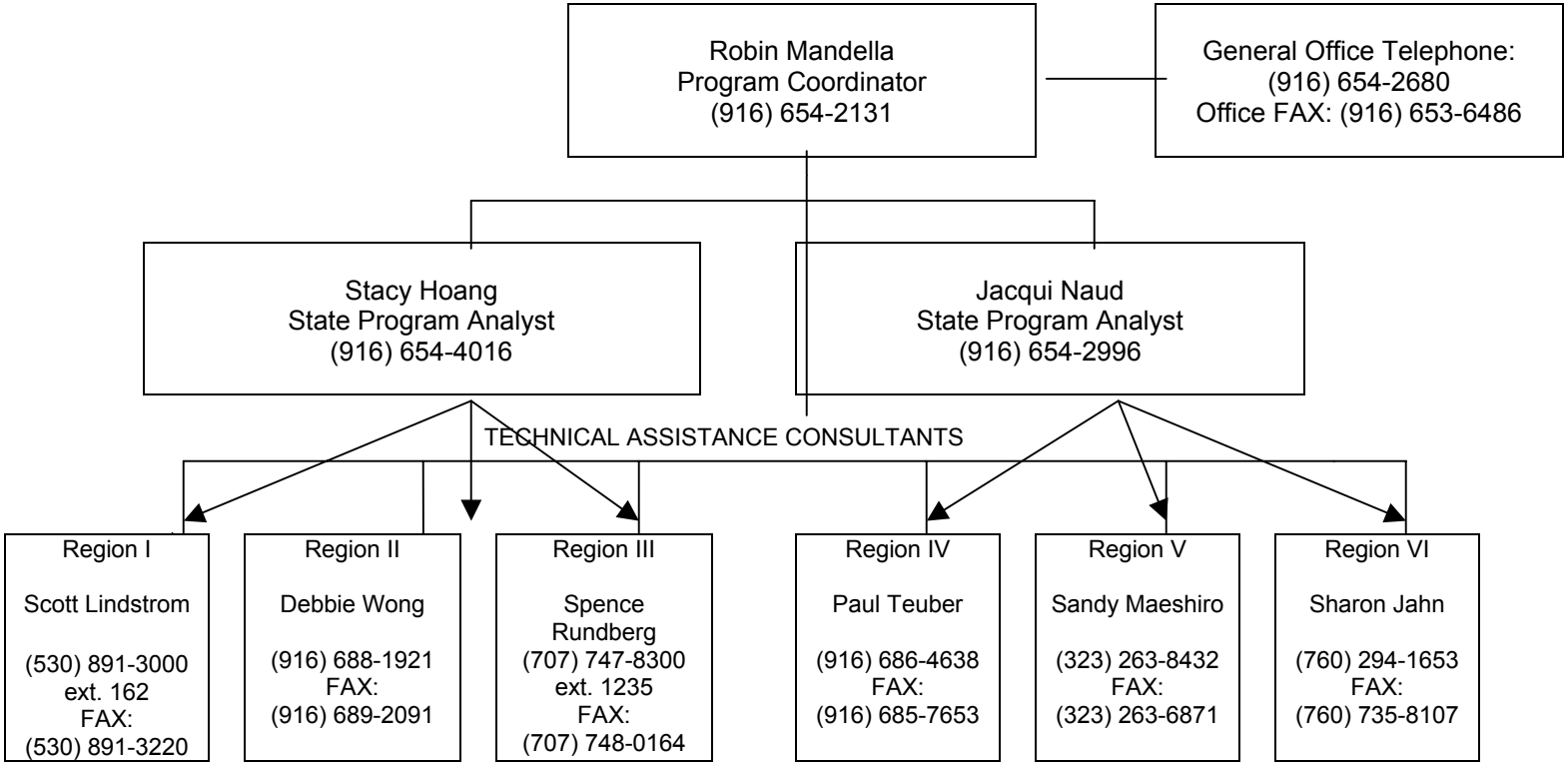
The DMH will conduct two Information Meetings to provide information on the requirements of the RFA and application development. The meeting dates and locations are as follows. If you are interested in attending one of these meetings, call an EMHI Program Analyst at (916) 654-2996. The specific meeting information will be posted on the DMH website as the details are determined.

MEETING DATE	LOCATION
August 16	*Sacramento*
August 19	*Irvine*

Both regional Technical Assistance Consultants and State Program Analysts will provide technical assistance. The Technical Assistance Consultants should be contacted regarding program models, program development, and implementation issues. The State Program Analysts should be contacted regarding the RFA process and budget preparation.

All staff telephone and fax numbers and regions of responsibility are listed on the following organization chart. State Program Analysts are identified in the middle tier and Technical Assistance Consultants in the bottom tier.

Early Mental Health Initiative
2004-2005 Program Chart



Region I

Butte
Colusa
Del Norte
Glenn
Humboldt
Lake
Lassen
Mendocino
Modoc
Napa
Nevada
Plumas
Shasta
Sierra
Siskiyou
Sutter
Sonoma
Tehama
Trinity
Yuba

Region II

Alpine
Amador
Calaveras
El Dorado
Fresno
Inyo
Kings
Madera
Mariposa
Merced
Mono
Placer
Sacramento
San Joaquin
Stanislaus
Tulare
Tuolumne
Yolo

Region III

Alameda
Contra Costa
Marin
San Francisco
San Mateo
Santa Clara
Santa Cruz
Solano

Region IV

Kern
Monterey
Orange
San Benito
San Bernardino
San Luis Obispo
Santa Barbara
Ventura

Region V

Los Angeles

Region VI

Imperial
Riverside
San Diego

III. APPLICATION REQUIREMENTS

A. General Guidelines

Substance and clarity of presentation will add to the strength of the application and are more important than length.

Programs funded through the EMHI must implement, expand, or modify research-based program models that enhance school adjustment, mental health, and social/emotional development of students in the target population. Cultural competency, as defined on page 11, must be woven throughout the proposed services and staffing described in the application narrative.

NOTE: AN LEA MAY APPLY FOR ONLY ONE PROGRAM MODEL PER APPLICATION (REFER TO PAGE 10 FOR MORE INFORMATION).

The application (with the exception of all required forms, budget and budget narrative, letters of support, and vitae) consists of five parts as follows:

Part 1: Applying for Same Program Service at a Previously Funded EMHI Site
Part 2: Characteristics of Applicant
Part 3: Application Narrative
Part 4: Description of Supporting Research
Part 5: Grant Development and Support

The page limitations and pagination requirements are explained in the instructions for each of the parts. Applicants must respond to all sections and subsections, using the specific section (bold type) and subsection (underlined) headings for each part of the application in the presented order. If a section or subsection does not apply, the heading must still be included in the application with the notation "does not apply" immediately following.

Refer to the Application Checklist on page 39 for placement of each part and all documents in the application.

B. Part 1: Applying for Same Program Service at a Previously Funded EMHI Site

This part of the application **applies only to LEAs applying for funding at a school site that has received prior EMHI funding for the same program service(s)**. If this application is for services not previously funded by EMHI, this part does not need to be completed. **However, all LEA's must complete the Certification of Compliance form pertaining to Part 1 on page 58 of the RFA**. If this application proposes to implement or increase services at a school site that has received previous EMHI funding for the same program service, this section must be completed. This requirement applies to all applicants who have received funding through EMHI beginning July 1, 1992 and thereafter. This includes applicants who received EMHI funding through the submission and approval of an application in response to the Request for Proposals CMU 92-01, CMU 92-03, CMU 93-01, and/or Request for Applications EMHI-94, EMHI-95, EMHI-96, EMHI-97, EMHI-98, EMHI-99, EMHI-2000, and EMHI-2001. Part 1 is limited to a total of three (3) double-spaced pages, excluding supporting documentation; and these pages should contain information for all sites listed in the application for which Part 1 applies. Pages do not need to be numbered. Pages not used in this part may not be used for any other part of the application.

This section will be reviewed and scored prior to the scoring of the remainder of the application (refer to the rating criteria for this part on page 56). Points will be deducted from applications that do not adequately address this part. School sites that were previously funded through EMHI for the same services that are not included in Part 1 will be disqualified from the application (see REJECTION/DISQUALIFICATION, beginning on page iv). **Failure to complete Part 1 will result in an automatic deduction of points (see Section 2, Automatic Deductions on page 4).**

NOTE: A CERTIFICATION OF ASSURANCE OF COMPLIANCE WITH EMHI-2004 PART 1 APPLYING FOR SAME PROGRAM SERVICE AT A PREVIOUSLY FUNDED EMHI SITE IS INCLUDED ON PAGE 58 AND MUST BE SIGNED, DATED AND INCLUDED IN THE APPLICATION.

On a separate page, using the heading "Applying for Same Program Service at a Previously Funded EMHI Site" and using the underlined section headings, respond to the following criteria to justify an additional funding cycle for school sites listed in the application:

1. Previously Funded Program Services

   List the school site(s) previously funded through EMHI. Briefly describe the model, the type of services, and the curriculum used (if applicable) in the previously funded program. Describe the level of program services (number of staff, hours per week, students served, etc.) Indicate the years that the services were funded through EMHI and the years that the services were or were not maintained with local funding. This information may be provided in a chart or matrix format.

2. Reduction/Discontinuation of Services

   Describe the circumstances that resulted in the reduction or discontinuation of program services following the end of the previous three-year EMHI funding cycle (i.e.; budget, personnel, program support, space issues, reduced need for services). If the program services were continued at a reduced level with local funding, describe the level of services (number of staff, hours per week, number of students served) and provide the funding sources used to support these services.

3. Changes that Support Program Continuation

   Describe the changes in circumstances described previously in Section 2. Reduction/Discontinuation of Services, that would increase the likelihood that the program services proposed in this application will continue after the three-year funding cycle.

4. Plan for Continued Program Support

   Provide a sequential, detailed three-year plan for building program support for the continuation of the services proposed in this application.

5. Plan for Securing Local Funding

   Describe the plan for securing local funding and list all anticipated funding sources to be used to continue program services.

C. **Part 2: Characteristics of Applicant**

Part 2 is limited to no more than ten (10) numbered, double-spaced pages. Pages not utilized in Part 2 MAY NOT be used for Part 1, Part 3, or Part 4. Beginning on a separate page titled "Part 2: Characteristics of Applicant" and using the underlined section headings, respond to the following criteria:

1. Community Level

   Briefly describe the unique culture and characteristics of the community in which the school sites are located. Include relevant community profiles that would help describe your unique community challenges.

2. District Level

   Describe the school district(s) including size, location, number, and type of schools, and any significant changes recently occurring or anticipated that have impacted or will impact the participating school sites (such as class size reduction). Consortiums must include a description of all school districts listed in the application.

3. Site Level - For each site listed in this application:

   a. Describe the unique characteristics, including socioeconomic factors, of the student population and challenges they may face. Indicate the percentage of pupils from low-income families.

   b. List specialized services available on site for students, including those students who have school adjustment difficulties and any anticipated changes in the level of such services. This information may be provided in chart or matrix format.

   c. Identify the sites listed in the application that are currently or were previously funded through EMHI or PIP, the years the sites were funded through EMHI or PIP, and the years the services were maintained with local funding. Briefly describe the program model, the curriculum (if appropriate), the level of services (number of staff and hours per week) when the services were supported through EMHI or PIP funding, and what the level of services is at the time this application is submitted to DMH. This information may be provided in chart or matrix format as part of the 10 pages allowed for this part.

   d. Indicate whether the proposed sites are on a traditional, modified traditional, or year-round schedule. Describe the year-round schedule or modified traditional schedule including the number of tracks and number of weeks each track is in session. Include a copy of the year-round multiple track or modified traditional calendar(s) immediately after Part 2: Characteristics of Applicant. The calendar(s) are not counted in the 10-page limit.

e. Applications from regionalized districts must include a list showing each region and the school sites within each region in the district. These lists are not counted in the 10-page limit.

NOTE: Information presented in matrix or chart format in response to items c., d. and e. may be single-spaced. This is the only place in the application narrative that may be single-spaced. The type must not be smaller than the type size in the application narrative.

Complete the School Enrollment Information and Student Demographics Chart and include it in the application directly after the Key Staff Summary form (refer to page 53 for the placement of all forms in the application.) The chart is located in the Appendix and is a helpful visual reference point for the RFA reviewers. This chart is not counted in the 10-page limit.

D. **Part 3: Application Narrative**

To complete Part 3: Application Narrative, respond to Sections 1 through 3. Please take into consideration that some sections may request overlapping information. **Applicants must respond to ALL sections and use the specific section and subsection headings in the order given.** If a section and/or subsection is not applicable, the section and/or subsection heading must be included in the application with a notation that indicates the section does not apply.

The Application Narrative is limited to no more than twenty-five (25) double-spaced pages. Pages not used in any other section may not be used for this section. **Refer to page iv for spacing, margin, and format requirements**. Each page of the narrative portion must be numbered starting with number one (1) on the first page. The budget, forms, and other attachments are not required to be numbered.

Appendices may not be used to provide information that is required to be in the application narrative. Appendices may be used to support information that has been provided in the application.

Using the following **bold** headings and underlined subheadings, respond in detail to the following criterion.

1. **Program Services**

a. Description of Proposed Model, Program Services, and Student Needs

(1) Indicate the type of application (PIP, Other Model, Other Model and PIP, Enhanced PIP, Enhanced Other Model, or Enhanced Other Model and PIP). Provide the name of the model (i.e., PIP, Second Step, Children of Divorce, etc.) and describe the goals and requirements of the model, as understood by the applicant.

(2) Provide an overview of the proposed program services that will be provided at the school sites listed in this application

(3) Describe in detail the specific needs/problems of the students in the target population at the sites listed in this application, how these were identified, and how the proposed services will address these needs.

b. Direct Services

All applicants must respond to the Direct Services criteria. This includes applicants that have locally funded direct services at the school sites listed in the application. If the applicant is proposing to implement a core PIP program, the only services delivered to students will be one-to-one, nondirective play.

All descriptions of services must show how they are culturally and linguistically appropriate for students in the target population.

Note: Direct services **other than PIP** must be supported by research and that research must be described in Part 4: Description of Supporting Research, page 33.

Grant Funded Services

(1) Describe in detail the direct services to be delivered to selected students (individual and/or group).

(2) Describe who will deliver the services (level of staffing), the frequency of services (days per week and hours per day), and where the services will occur.

(3) Describe how the proposed services will integrate with any locally funded services described in the following section. If this application proposes to implement two direct services with grant funds, describe how they will integrate with each other.

Locally Funded Direct Services

Please respond to this section if locally funded direct services at the school sites listed in this application will be used as the local share of the matching grant. Locally funded direct services must have previously been funded through EMHI, except for PIP services, to be used as match in the program budget.

(1) Describe in detail the direct services currently being delivered to selected students.

(2) Describe who is delivering the services (level of staffing), the frequency of services (days per week and hours per day) and where the services occur.

(3) If the level of locally funded services will be reduced in the next school year, please indicate what the proposed level of services (staffing and frequency) will be and the reason(s) for the reduction.

c. Indirect Services

This part must be completed if the application is for grant funded indirect services that will complement either locally funded or grant funded direct services to identified students. **All indirect services** must be supported by research and that research must be described in Part 4: Description of Supporting Research.

All descriptions of indirect services must show how they are culturally and linguistically appropriate for students in the target population, parents/guardians, and/or teachers.

Please note that the locally funded direct services program (other than PIP) must have previously been funded through PIP or EMHI in order to be used as the local share of match in an enhancement application for grant funded services, and must be maintained for the three-year grant period.

(1) Describe in detail the specific proposed indirect services that will support the direct services that were described in the previous section, Direct Services.

(2) Describe who will provide the services, where the services will be offered, and the frequency of the services.

(3) Describe in detail how the indirect services program will complement and integrate with the direct service program described in the previous section, Direct Services.

(4) Describe the proposed level of staffing for the indirect service component (number of staff and hours per week each staff devotes to the program).

(5) If applicable, describe any locally funded indirect services (previously funded through EMHI) that will be used as the local share of the matching grant application. Indicate how these services will integrate with the grant funded indirect services.

d. Expansion Services

If this application is for expansion of EMHI funded services or locally funded services previously funded through EMHI or PIP to other sites within the LEA, respond to the following criteria.

(1) List the school sites currently implementing the services and include the funding sources (locally funded or EMHI).

(2) Describe how the proposed expansion services will integrate with the existing program currently being operated by the LEA.

e. Augmentation of Previously Funded Services

If this application proposes to increase the level of locally funded services previously funded through either EMHI or PIP, or locally funded PIP services that were never funded by either EMHI or PIP, at the school sites listed in this application, respond to the following criteria.

(1) Describe the current level and the proposed level of staffing at the school site(s) named in the application (number of staff and hours per week each staff devotes to the program).

(2) If there was a reduction in the level of staffing after the previous three-year EMHI grant ended, explain the amount of the reduction, the reason(s) for the reduction, how long the reduction has been in place, and how the proposed augmentation of services is not supplanting locally funded services. Refer to the "Note" on page 13.

NOTE: Locally funded direct services to students described in the application for enhancement or augmentation services must be maintained at the level described in this application for the entire three-year grant period and provided as match in the program budget.

f. Systematic Selection Process

The selection process should include a "team approach" led by the credentialed EMHI professional staff and should not rely solely on teacher classroom surveys. If the application proposes to operate more than one type of direct service, even if one of the direct services is locally funded, the method and criteria that will be used to determine which type of service the student will receive must be described in this section.

(1) Describe the method used to select students for participation in **all** program services.

(2) Indicate the approximate number of students who will be served during the school year and provide the formula showing how the number of students was determined. Refer to pages 31 and 52 for information on how to determine the number of students to be served.

For **augmentation** and/or **enhancement** (indirect) services at a locally funded school site:

(3) Provide the number of students currently being served by the locally funded site(s) and the approximate number of students that will be served through the augmented and/or enhancement services.

(4) Provide the formula showing how the number of students was determined.

(5) If this application is for enhancement services to parents/guardians and/or teachers, provide the number of parents/teachers that will receive the enhancement services and the formula used to determine this number.

g. Out-of-Home Placement

When a student is not living with at least one biological or adoptive parent, it is considered an out-of-home placement. The following information is important, since out-of-home placement has been identified as one risk factor for future adjustment difficulties.

(1) Describe what efforts will be made to identify students who are in out-of-home placement or who are at risk of being in out-of-home placement.

(2) Describe how the LEA will ensure that these students are considered for EMHI funded program services.

h. Parent Notification and Approval

Describe methods by which parents/guardians will be informed of the program and how written permission will be secured prior to the student's participation in program services. Explain how language and ethnic/cultural challenges with multi-cultural parents/guardians will be overcome.

i. Parent Involvement

Describe how parents/guardians will be involved in the program. An acceptable level of involvement is a parent conference conducted by EMHI professional staff prior to, during, or upon a student exiting from participation in the program services.

If this application includes indirect services to parents/guardians, describe how parents/guardians will be encouraged to participate in the proposed services. Describe how the indirect services will be culturally and linguistically appropriate for the parents/guardians targeted for the services.

j. Training and Supervision

Ongoing supervision of child aide staff must be provided by a credentialed school psychologist, school counselor, or school social worker. A minimum of two hours per week of training and supervision (individual and group) per site is required for the successful operation of program services. Training may also be provided by the cooperating entity.

Describe the plan for training ("teaching" skills and concepts) and supervision (overseeing the performance and reviewing student progress) of child aides. Describe how the training topics will be culturally relevant for the target population to be served. If some training and/or supervision will be in conjunction with other EMHI funded or locally funded sites, include this information in the description of the supervision and training plan. The plan should identify which program staff will conduct the training and supervision, the frequency, and hours per week of the training and supervision.

k. Cooperating Mental Health Entity

Identify the cooperating mental health entity. Describe the process to be used by the LEA and the cooperating entity for referring the student and family to the appropriate public and/or private community services when the student's needs are beyond the scope and purpose of the program. Indicate how the need for such referrals will be determined.

l. Space

It is suggested that the space designated for the activity room be no smaller than eighty (80) square feet. The designated confidential space must ensure that students and staff can meet without the concern of being overheard and must provide a sense of privacy from constant visual observation by other students and staff. Designated space must be appropriate for the program services described in the application including such considerations as meeting areas, desk space for staff, locking files, and telephone access for personnel. Respond to the following criteria:

(1) Describe in detail the specific space to be utilized for the program. Include information about the location on each school campus, room dimensions, and square footage.

(2) Address such issues as security, safety, confidentiality, and the extent to which this space is dedicated for use by the program.

(3) If the proposed space will be shared with another program/activity, indicate who will be sharing the space and how the scheduling of EMHI funded services will be addressed to ensure confidentiality of services.

(4) If two (2) or more child aides are to share one activity room, describe how they will be scheduled to ensure that only one child aide is occupying the activity room at any time during program activities.

(5) Describe how the supplies for the EMHI funded services will be secured on a daily basis and who will be responsible for their security.

Simultaneous program activities in the same room (space) are discouraged.

NOTE: Once activity room space is approved by the State DMH, any change during the grant period must be requested in writing and approved by DMH prior to the change. Under no circumstances may EMHI funded program services be relocated to school sites other than the school sites named in the application.

m. Healthy Start

If an LEA is applying for, or currently receiving, a Healthy Start operational grant at the school site(s) named in this application, describe how the EMHI funded program will coordinate and interface with the Healthy Start program to avoid duplication of services.

n. Program Continuation

Describe plans for the development of permanent local funding sources following termination of the three-year state grant.

2. **Program Staffing**

An updated vitae for each **key** professional staff person (e.g. Project Coordinator, School-Based Mental Health Professional, Mental Health Consultant) must be included as an attachment to the application. The vitae should clearly identify each person's role in the program. Vitae are not required for site principals and teachers unless they also have key responsibilities directly related to the EMHI funded programs and are responsible for the delivery of services.

If professional staff will be redirecting a portion of their current scheduled time to serve the proposed EMHI funded program, an explanation must be included of how the redirection will be accomplished and who will assume the duties formerly fulfilled by the professional staff.

Changes in key professional staff involved in program services must be approved in advance by the DMH. Written notification of the proposed change, along with the current vitae of the new staff, must be submitted to DMH.

a. Project Coordinator

Identify and describe the role of the project coordinator. Duties include administrative oversight of the program as well as direct involvement in implementing the program. The project coordinator must be a credentialed employee of the LEA (e.g. Administration, Pupil Personnel Services, Teacher).

Indicate the average hours per week and weeks per year that the Project Coordinator will devote to the program. A range of two to six hours per week is recommended depending upon the number of sites implementing services and the program model. A detailed description of all duties that are directly related to the implementation and operation of the proposed model must justify the total hours per week for the Project Coordinator.

b. School-Based Mental Health Professional (SBMHP)

Experience has shown that in successful programs, the SBMHPs typically devote an average of four hours per week, per site. Of the four hours, a minimum of two hours per week is required for training and supervision of child aides. Varying factors affect this time commitment, such as the proposed program model, combined training/supervision at multiple school sites, and/or a Mental Health Consultant who is actively involved in the training/supervision process.

Identify and describe the role of the person(s) who will be the SBMHP(s). Such person(s) must be credentialed school psychologists, school counselors, or school social workers. Duties should include primary responsibility for supervision and training of the child aides and the selection of students for program services. Indicate the average hours per week and weeks per year that each SBMHP will devote to the program.

c. Cooperating Mental Health Entity (Staff)

Describe the services to be provided by the cooperating mental health entity staff. Services to students who have needs beyond the scope of the EMHI target population served may not be included in this application. Describe the cooperating entity's active ongoing role in supervision, training, and program implementation, if applicable. Indicate the average number of hours per week that each cooperating entity staff will devote to the program. All professional staff from the cooperating entity that will be devoting time to the proposed model must be included on the Early Mental Health Initiative Program Summary Form and the Key Staff Summary Chart, as well as the program budget and budget narrative.

Describe what efforts the cooperating entity will make to ensure that staff are representative of the program population and are culturally and linguistically competent.

The updated vitae enclosed in the attachments for cooperating entity staff should clearly indicate at the top the person's role in the program (e.g. "Cooperating Mental Health Entity: [training] [supervision] [consultation]").

d. Principals and Teachers

Describe how principals and teachers will be involved in the program. Include the number of hours per week and weeks per year, which will be devoted to the proposed services. The amount of time devoted to the program services may be included in the program budget as LEA match. A formula must be provided for each classification showing how this amount was calculated.

e. Other Staff (Professional and Classified)

Other professional and/or classified staff may be directly involved in the program services, depending upon the program model. Identify and describe the role of any other staff who will be directly involved in the proposed program services. The time for other staff will vary among programs. Describe the duties and the average number of hours per week and weeks per year that will be devoted to the program by each staff. Staff described in this section should also be included in the program budget and budget narrative.

f. Child Aides

A newly hired child aide working directly with students can typically serve approximately 12 students individually for each 15 hours of time. The same ratio applies for fractions of time beyond 15 hours. It is recommended that experienced child aides see no more than 12 to 16 students individually per week.

When child aides work with small groups of students, approximately seven to nine 45-minute sessions can be scheduled for 15 hours of child aide time. The same ratio applies for fractions of time beyond 15 hours. It is recommended that groups be limited to two to four students.

(1) Identify the number of child aide staff who will be working in the program. Describe their roles and responsibilities and provide the number of hours per week that each child aide will work.

(2) If the application is for an augmentation or enhancement of locally funded services at the sites listed in the application, provide the number of hours per week that the child aide staff currently provide services at the listed sites (at the time the application is submitted to DMH). The salaries and benefits of child aide staff currently providing services at the listed sites must also be included in the budget and budget narrative as match and should reflect the level of service in the grant year. Any proposed reductions in the current staff and/or current level of services must be explained.

Staffing of child aides must be consistent with the proposed number of identified students to be served and the amount of space dedicated to the program.

g. Recruitment and Selection of Staff

Describe the plan for recruitment and selection of all staff. Specify what effort will be made to hire professional and child aide staff who are representative of the program population and are culturally and linguistically competent.

h. Key Staff Summary Chart

Complete the Key Staff Summary Chart, including the Anticipated Conference Attendance portion at the bottom of the form contained in the Appendix. The Anticipated Conference Attendance portion of this form provides important information that is used in planning for the annual training conferences. Only include staff who have not previously been reported to the DMH in any surveys or reports concerning conference attendance. Information provided on this form should be consistent with information provided in the entire application, including the program budget narrative. (This chart is not counted in the 25-page limit.)

3. **Program Evaluation**

All grantees are required to participate in the statewide evaluation. Applications must reflect an understanding of the student selection process and the pre and post evaluation of student progress as a result of the program services.

Local Program Evaluation

A local program evaluation is optional. The focus of a local evaluation must be the school adjustment of students who receive program services. If the LEA proposes to conduct a local program evaluation, the evaluation results must be submitted to DMH. Please respond to the following items if the application proposes a local evaluation:

a. Describe proposed methods for evaluating effectiveness of the program other than reports required by the DMH and/or participation in the statewide data collection system (see page 15, Data Collection and Program Reporting Requirements). Identify any indicators that will be utilized.

b. Identify who will do the local evaluation and the steps involved in accomplishing this task.

c. Describe how the local program evaluation will address local issues and concerns that the program services were designed to alleviate and how the results of a local program evaluation will be used.

E. **Part 4: Description of Supporting Research**

If this application is requesting grant funding for a PIP model, a description of supporting research is not required because DMH is familiar with the PIP research. This section must be completed for all other models/services. A maximum of four (4) double-spaced pages is allowed for this part. The pages do not need to be numbered. Pages not used in this part may not be used for any other part of the application. On a separate page, using the heading, “Part 4: Description of Supporting Research” respond to the following criteria:

1. Provide the name and type of program model proposed in this application. Describe the research that established the validity of the proposed services and impact on the school adjustment of students in grades K-3. The description must include research that directly or indirectly supports each service component of the proposed program model.

2. Identify school sites in California or elsewhere where this model is, or has been, implemented successfully.

3. Cite the source documents for this research.

A supporting bibliography may be included as an appendix to the application, but must not include any information that is required to be in the narrative portion of the application.

(This concludes the Application Narrative portion.)

F. **Part 5: Grant Development and Support**

There are no page limitations for this part. On a separate page, provide the following information. Title this section "Part 5: Grant Development and Support," and place it immediately following the last page of the program narrative.

1. Identify the key person(s) who prepared this application, i.e., name, job title, agency, and role in the proposed program.

2. Cite the source(s) of information used in preparing this application.

3. List the letters of support contained in the attachments.

4. Letters of Support

   Letters of support should reflect an understanding of the proposed program and should not be form letters. Letters of support **must be included** as part of the bound grant application and the four (4) additional copies. Letters of support sent directly to DMH will **not** be inserted into the application by DMH staff and will not be considered during the review process. The required letters of support must be on letterhead and are described in items a through f. Omission of any of the required letters listed in items a through f, letters that do not address the specific requirements, or letters that are not on letterhead will result in the deduction of points during the review process.

Letters of Support must be addressed as follows:

Carol Hood
Deputy Director
Systems of Care
California Department of Mental Health
(No address has been included to prevent programs from mailing letters directly to DMH)

Letters are required from:

a. **The LEA superintendent**. In the case of a COE Consortium application (refer to page 9) submitted by a COE on behalf of up to five school districts, a letter is required from the COE superintendent, as well as the superintendent of each school district listed in the application.

b. The designated **Project Coordinator**. If the same person is the Project Coordinator and the School-Based Mental Health Professional, one letter indicating this may be submitted.

c. The **principal** at each proposed site. The principal's letter must include a statement describing the designated space (location and room dimensions) at the school site(s) listed in the application. This statement must also indicate whether the space will be for the exclusive use for the proposed model or if it will be shared with other activities.

d. The **faculty** of each proposed school site. This should be a single letter from each site signed by all K-3 faculty members. Please do not use "form" letters.

e. Each designated **School-Based Mental Health Professional**.

f. **The cooperating mental health entity**. The letter must confirm the cooperating entity's participation in, and support of, the provision of collaborative services. Also, a letter from at least one cooperating entity must describe how the cooperating entity will meet its commitment, according to its eligibility and priority process, to screen referrals of low-income students determined to be in need of mental health treatment services which are beyond the intent and scope of the program services. In addition, a statement must be included confirming agreement to facilitate linkages to resources for these students.

g. Other letters of support may also be included.

G. Fiscal Match and Budget Preparation

The budget must clearly indicate that a viable program will be in operation between July 1, 2004, and June 30, 2005, at each school site. Program services should be budgeted for at least 36 weeks and no more than 38 weeks for a traditional schedule or year-round, single-track schedule and at least 44 weeks and no more than 48 weeks for a year-round, multi-track schedule. However, if the year-round sites operate (provide classroom instruction) fewer than 44 weeks, this must be reflected in the budget, as well as explained in Part 2: Characteristics of Applicant.

Priority will be given to applications that best meet the basic program requirements at the lowest cost per child (refer to the section titled Application Review and Scoring on pages 3 and 4, Item h).

Each applicant must submit one detailed one-year budget for the total program in accordance with the sample format and instructions provided in this RFA. Do not submit a budget for each site listed in the application. **The budget should be based on projected third year costs**. The approved grant amount will remain the same for each of the three fiscal years.

Each item for which a dollar figure is provided must include the formula by which the dollar figure was calculated. **If it cannot be determined from the budget narrative how the dollar figures were calculated, points will be deducted during the scoring process**. The Budget Form and an example of how the budget narrative should be calculated are included in the Budget Preparation Instructions in the Appendix. The font size used for the budget narrative must meet the requirements specified on page iv, Item 13. There is no page limitation for the budget narrative.

NOTE: Please round off all figures in the budget to the nearest dollar.

Locally funded services, which were previously funded through EMHI, and which are proposed to support the services described in the application (either augmentation or enhancement services), must be included as match and be clearly identified in the budget narrative as "Locally Funded."

For the period July 1, 2004 to June 30, 2005, the maximum grant amount to be awarded is $40,000 per school site. The LEA is responsible for any portion of the total program cost not funded through EMHI. Grant awards are provided as reimbursement of LEA expenditures related directly to the EMHI funded program through bi-annual invoices. EMHI funds will not be provided as advance payments to the LEA.

NOTE: The term "All Inclusive Requested Grant Amount" on the Grant Request Form refers to the amount of grant funds being requested for one fiscal year. This amount should be calculated on the projected cost of the third year of program operation. The grant amount will not be increased once it is approved by EMHI, therefore it is important to calculate the budget amounts based on the projected cost of the third year of operation.

The budget must reflect that grant funds will be utilized for one or more of the following categories:

- Salaries and benefits for staff (including release time for teaching staff, professional consultation, and training). The duties of all staff included in the program budget must be described in the Program Staffing Section of the application narrative, Part 3, Section 2 on page 29.
- Materials and Supplies
- Equipment
- Travel (except out-of-state travel)
- Training
- Administrative Overhead (see Budget Preparation Instructions for limitations)
- Data collection, record keeping, and evaluation
- Other program related costs (must be well documented in Part 3, Application Narrative, and the budget narrative)

The budget must include travel costs to cover a one-day mandatory orientation meeting for all new professional staff and a mandatory training for program staff.

The one-day mandatory orientation meeting will be held at specified locations throughout the state. The date of the orientation meetings will be announced later. All LEA key professional staff (Project Coordinator and School-Based Mental Health Professionals) are required to attend. Other staff directly involved in the program (e.g. Mental Health Consultant) are encouraged to attend. The orientation will provide training to professional staff in hiring child aide staff, mandatory program requirements, staff roles, and an overview of the process for the selection of students for potential referral to the program. The program budget should include costs for travel, meals, and possibly lodging and airfare to attend this meeting. There is no registration fee.

A mandatory training conference will be held in January 2005. The location of the training conference will be determined at a later date. All key professional and all child aide staff are required to attend. Locally funded child aide staff, whose services are used as match to the services proposed in this application, are also required to attend the training conference. This cost should also be included in the program budget. In addition, it is helpful in establishing the program to invite principals, teachers, school board members, and parents to the conference. The conference provides training for professional and child aide staff in various aspects of program implementation and skills development. Estimated cost per person is approximately $400 (based on previous conference attendance). This amount includes the registration fee, hotel rooms, meals, and travel costs, excluding airfare.

There is also a one-day regional meeting in the spring that all program staff are encouraged to attend. Regional meetings are usually held within 150 miles from any school site. The regional meeting provides training and may allow time for structured networking among programs in the same regional area. The budget may include costs for travel and meals. There is no registration fee.

In accordance with the provisions of EMHI, the total requested state grant dollars cannot exceed 50 percent (50%) of the total program cost. The combined match from the LEA and cooperating entity must be at least 50 percent (50%) of the total program cost. Match may be cash, in-kind services, and/or resources, and should be reasonable and valid.

Following are categories for matching contributions: (Reviewers will consider whether figures are based on reasonable costs.)

- Salaries and benefits for staff directly involved in the program (professional and child aide). An appropriate contribution of services would be the redirection of a portion of the work week of a school psychologist or school counselor to the EMHI program. That person's salary and/or benefits portion would constitute the match.

- Cost of any other staff time devoted to the program (e.g., principals, teachers, substitute teachers, clerical).

- Cost of materials and supplies (such as toys, paint, paper, and copying related to the program).

- Cost of space. The total cost of space claimed as in-kind match for this program may not exceed 25 percent (25.00%) of the grant request.

- Cost for equipment (such as tables, chairs, shelves, filing cabinets). Equipment purchases are a one-time expenditure and may be prorated over the three-year grant period.

- Travel costs to workshops and meetings sponsored by the DMH.

- Training costs.

- Insurance (prorated). Insurance costs must be directly related to the funded program.

- Administrative costs related to implementation of program services or management of the grant award (such as telephone, utilities).

- Other (items which do not fall into one of the designated categories).

LEAs should follow district policy, as well as any other state requirements, regarding the use of other funding sources for matching contributions of either cash or in-kind services.

NOTE: If you are proposing to enhance or augment a previously funded EMHI program at the school sites identified in the application, you must maintain the previously funded EMHI program with local funds at the level described in this application for the full three-year grant period. The locally funded program services must be clearly identified in the application narrative and be shown as match in the program budget and budget narrative.

It is advisable to contact a State Program Analyst prior to implementing program services or hiring staff to verify the approved school sites and the total program allocation.

H. APPLICATION CHECKLIST

The Application Checklist is for the convenience of the applicant and is NOT to be included in the application.

- ☐ Notice of Intent to Apply (completed and either faxed or mailed by September 1, 2004 to the Early Mental Health Initiative office)

Documents must be assembled in the following order and forms completed and signed.

- ☐ Grant Request Form **(Must be signed by the LEA Superintendent or his/her designee and dated.)**
- ☐ Early Mental Health Initiative Program Summary Form
- ☐ Budget Form
- ☐ Budget Narrative
- ☐ Key Staff Summary Chart
- ☐ School Enrollment Information and Student Demographics Chart
- ☐ Part 1: Applying for Same Program Service at a Previously Funded EMHI Site (maximum of three double-spaced pages, no page numbering is required.)
- ☐ Part 2: Characteristics of Applicant (maximum of ten numbered doubled-spaced pages.)
- ☐ Year Round Multi-Track Calendar(s) (if applicable.)
- ☐ List of every region in the LEA and the school sites in each region (if applicable.)
- ☐ Part 3: Application Narrative (maximum of 25 numbered double-spaced pages, excluding the budget, budget narrative, forms, and attachments.)
- ☐ Part 4: Description of Supporting Research (maximum of 4 double-spaced pages, no page numbering is required.)
- ☐ Part 5: Grant Development and Support
- ☐ Letters of Support
- ☐ Vitae (required for key professional staff and must include program position title at the top.)
- ☐ Certification of Assurance of Compliance with Welfare and Institutions Code Section 4380(j)(10) (must be dated and signed with an original signature.)
- ☐ Certification of Assurance of Compliance with EMHI-2004 Part 1 Applying for Same Program Service at a Previously funded EMHI Site (must be dated and signed with an original signature.)
- ☐ Make 4 copies of the signed and dated original. Label the original as “Original” and each copy as “Copy”.
- ☐ Submission of the ORIGINAL and four (4) additional copies, each securely bound with a front and back cover and labeled with the name of the LEA and county, titled “EMHI-2004. Department of Mental Health – Early Mental Health Initiative”, c/o the Contracts Unit, 1600 9th Street, Room 150, Sacramento, CA 95814, by 5:00 p.m., on September 15, 2004.

IV. APPENDIX PAGE

Basic Components of a Primary Intervention Program ----------41

Budget Form ----------42

Budget Preparation Instructions----------43-47

Early Mental Health Initiative Program Summary Form ----------48-49

Early Mental Health Initiative Program Summary Form Instructions----------50-51

Key Staff Summary Chart----------52

School Enrollment Information and Student Demographics Chart----------53

Application Score Sheet----------54-55

Part 1 - Rating Criteria (Applying for Same Program Service at a
Previously Funded EMHI Site)----------56

Certification of Assurance of Compliance (W & I Code Section 4380(j)(10)) ----------57

Certification of Assurance of Compliance (Same Service Previously Funded)--------58

Grant Request Form ----------59

Notice of Intent to Apply----------60

BASIC COMPONENTS OF A PRIMARY INTERVENTION PROGRAM

Following are the basic components of a Primary Intervention Program (PIP) as outlined in the Welfare and Institutions Code, beginning with Section 4345, and as governed by the Welfare and Institutions Code, beginning with Section 4370, which provides the requirements of the Early Mental Health Initiative.

- PIP services must be delivered to students in kindergarten through third grade in publicly funded schools.

- PIP services must be provided to students who have been selected for program participation through a systematic selection process.

- Before acceptance of a child into PIP, parental consent is required.

- Each PIP must have a core team consisting of school-based mental health professionals, including credentialed school psychologists, school counselors, school social workers, local mental health program professionals, and child aides.

- The school-based mental health professionals must accept referred students into the program and assign students to child aides, supervise child aides, evaluate the students' progress, and make the determination when to end program services for the selected student. The school-based mental health professionals must supervise the program evaluation process, conduct conferences with parents/guardians, and contribute to the evaluation of the effectiveness of individual aides.

- Supervised and trained child aides must provide weekly play sessions with students selected for program services.

- Child aides must undergo a time-limited period of training that is focused on the main intervention strategies of the program and is provided prior to direct contacts with the children served in the PIP. Training must, at a minimum, include basic child development, crisis intervention, techniques of nondirective play, other intervention skills appropriate to identified problem areas, and instruction in utilizing supervision and consultation.

- School districts must demonstrate a capability for referral to appropriate public and private community services. The referrals must be made through contacts with families in response to information regarding the need for referral arising from the program services.

EARLY MENTAL HEALTH INITIATIVE
FY 2004-2005 PROGRAM BUDGET

PROJECT COORDINATOR NAME:
TELEPHONE NUMBER:
FAX NUMBER:

LIST SCHOOL SITES:

LEA NAME:
BILLING ADDRESS:

NUMBER OF SCHOOL SITES:

BUDGET CATEGORY	GRANT REQUEST	LEA MATCH	OTHER MATCH	TOTAL
PERSONNEL (IDENTIFY POSITION)				
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11 TOTAL PERSONNEL				
OPERATING EXPENSES & EQUIPMENT (OE&E)				
12 Materials & Supplies				
13 Space (Maximum 25% of Grant Request)				
14 Equipment				
15 Travel				
16 Training				
17 Insurance				
18 Administrative Costs (5% of Grant Request)				
19 Other				
20 TOTAL OE&E				
21 TOTAL PERSONNEL AND OE&E				
22 DATA COLLECTION / EVALUATION				
23 TOTAL BUDGET / ALLOCATION	**$**	**$**	**$**	**$**

BUDGET PREPARATION INSTRUCTIONS

GENERAL INFORMATION

The Local Education Agency (LEA) and/or the cooperating entity(ies) must provide at least 50 percent (50%) of the total program funding. The local share of the matching grant may be either funds or in-kind services, supplies, or space. **The budget should be based on projected third-year costs.** The grant amount will remain the same for each of the three years. It is recommended that a State Program Analyst is contacted prior to implementing services or hiring staff because of revisions to the proposed budget after awards are announced.

The Budget Narrative, an attachment to the Budget Form, must provide the formulas (calculations) showing how each dollar amount that appears on the Budget Form was calculated. All amounts are to be rounded off to the nearest dollar.

Identify each formula by the budget line number (found on the Budget Form) and column (i.e., Grant Request, LEA Match, or Other Match). Identify each formula for formerly EMHI funded services, which are now locally funded, and which are proposed to support the grant-funded services as "Locally Funded." If the applicant is seeking grant funds and providing match for the same item, provide the formula for the Grant Request column first.

The top portion of the budget form must be completed with the exception of the Account Number. The area for the Allocation Recipient should include the name of the LEA, and the address should be where reimbursements are to be mailed. This address may be different than the LEA's main address or the project coordinator's address.

Following are explanations of the allowable line item categories and examples of how line item amounts are calculated. The examples show how formulas on the required Budget Narrative should look.

LINES 1-10: PERSONNEL

Salaries and Benefits:

The budget must clearly indicate that a viable program will be operating at each program site at least 36 weeks and no more than 38 weeks for a traditional schedule or year-round, single-track schedule, and at least 44 weeks and no more than 48 weeks for a year-round, multi-track schedule, unless a different year-round schedule is described in Part 2 Characteristics of Applicant. Each position listed in the program budget must also be described in the application narrative, Part 3.

Identify the staff classification (Child Aide, School-Based Mental Health Professional [SBMHP], Project Coordinator, Mental Health Consultant [MHC], principal, substitute teachers, clerical, etc.). Indicate the **hourly rate** of identified staff, the **hours per week**, and **weeks per year** that each identified staff will work on the program. **The use of Full Time Equivalents (FTEs) or hours/days per year is NOT ACCEPTABLE and will result in a deduction of points.**

Indicate the percentage of benefits for each staff classification. Add the benefit dollar amount to the salary dollar amount to arrive at the combined salary/benefit for each classification.

EXAMPLE: Line (1) Grant Request

3 child aides @ $8.41/hr. x 15 hrs./wk. x 36 wks. = $13,624.20 (rounded to $13,624)

Percent of benefits: 26%
$13,624 x .26 = $3,542.24 (rounded to $3,542)

$13,624 + 3,542 = $17,166 (Total child aide salaries and benefits)

Line (1) LEA Match

2 child aides @ $8.41/hr. x 15 hrs./wk. x 36 weeks = $9,082.80 (rounded to $9,083)

Percent of benefits: 26%
$9,083 x .26 = $2,361.58 (rounded to $2,362)

$9,083 + 2,362 = $11,445 (Total child aide salaries and benefits)

GRAND TOTAL: $17,166 + $11,445 = $28,611

ENTER THE TOTAL OF SALARY AND BENEFITS IN THE IDENTIFIED COLUMN AND ON THE IDENTIFIED BUDGET LINE FOR EACH CLASSIFICATION.

LINE 11: TOTAL PERSONNEL - Enter subtotals for each column on Budget Form.

LINES 12 -19: OPERATING EXPENSES AND EQUIPMENT (OE&E)

LINE 12: Materials and Supplies

Identify the materials and supplies that will be required for the program for the year. This includes the cost of stocking an activity room, purchasing curriculum related to small group services, and providing literature and information to parents/teachers, within the context of the approved program. Typically, $600 per activity room is considered a reasonable cost for providing activity room supplies. Costs for telephone, mailing, and photocopying related to the program may be included if they are not included in the overall administrative costs of the program and can be identified as such for invoicing purposes.

EXAMPLE: Line (12) Grant Request

Supplies for 2 activity rooms @ $600 each = $1,200

LINE 13: Space

Indicate the dimensions of the activity room and key program staff areas, and the cost per square foot. THE COST OF SPACE MAY NOT BE PART OF THE GRANT REQUEST. Any space used as part of the program may be part of the match provided by the LEA. The cost of space claimed as in-kind match for this program may not exceed 25 percent (25.00%) of the grant request.

The budget narrative must show the calculation for the actual cost of space. If the cost of space exceeds 25 percent (25.00%) of the grant request, the amount entered on the budget cannot exceed the maximum allowable percentage. To determine the maximum allowable cost of space:

Total grant request x .25 = Maximum allowed for space.

EXAMPLE: Line (13) LEA Match

2 activity rooms: 396 square feet (sq. ft.) each.
Cost: $3.55/sq.ft.
2 x 396 x $3.55 = $2,811.60 (rounded to $2,812)

Parent resource room: One room: 450 sq. ft. (dedicated full time)
Cost: $3.55/sq.ft.
450 x $3.55 = $1,597.50 (rounded to $1,598)

$2,812 + $1,598 = $4,410 (Total Cost of Space)

In the above example, assume the grant request is $20,000. The maximum allowable for space as match is 25 percent (25.00%) of $20,000, or $5,000. The actual cost of space is $4,410 and under the $5,000 limitation; therefore, the entire cost of the space ($4,410) would be allowable as match.

However, if the grant request is $12,000, then only $3,000 of the total cost of space ($4,410) would be allowed as match ($12,000 x .25 = $3,000).

LINE 14: Equipment

Costs of providing necessary equipment for the program may be included in the budget. Examples of equipment needed for the program may include activity room partitions, a filing cabinet, table, etc. Equipment purchases are a one-time only expense; therefore, the purchase of a specific item of equipment may only be included in the program budget once. Equipment purchases over $500 per item are discouraged and become the property of the state at the conclusion of the grant period if purchased with grant dollars (as opposed to match dollars). Funding may not be utilized for major capital expenditures or to purchase electronic equipment, such as, TVs, VCRs, fax machines or computers without a justification and prior written permission from DMH.

EXAMPLE: Line (14) Grant Request

4 activity room partitions @ $150 ea. = $600

LINE 15: Travel

Identify the cost of travel that may be incurred by identified staff working on the program. Estimate the total number of miles that may be driven, the cost per mile, and any per diem costs (using the local per diem rate). EMHI funds cannot be used for reimbursement of out-of-state travel costs.

Included in this line item is the cost of a mandatory one-day orientation meeting for all new professional staff and a mandatory training conference in January 2005 for all program staff including all child aides. The average cost of attending the Training Conference is $400 person. There is also an optional one-day regional meeting in the spring, usually within 150 miles from the district. (See page 36 more information.)

EXAMPLE: Line (15) Grant Request

1 Project Coordinator, 2 SBMHP (3 people) to attend orientation meeting: 3 x $125 = $375

1 Project Coordinator, 2 SBMHP, 1 MHC, 4 child aides
(8 people) to attend Training Conference: 8 x $400 = $3,200

1 Project Coordinator, 2 SBMHP, 1 MHC, 4 child aides
(8 people) to attend spring meeting: 8 x $20 = $160.

LINE 16: Training

Identify the cost of providing or attending local training/workshops that are related specifically to the proposed program. Costs may include hiring consultants, providing speakers, and providing materials and child care that will assist in meeting the program goals. Training that involves a cost, either from EMHI or the local share of match, must be described in the application narrative.

EXAMPLE: Line (16) Grant Request

Social Skills for K-3 Students training workshop for teachers @ $150 (speaker fee) = $150.

LINE 17: Insurance

Identify the prorated cost of any insurance that is related specifically to the program. THE COST OF INSURANCE MAY NOT BE PART OF THE GRANT REQUEST. Any insurance cost related to the program may be part of the match provided by the LEA. A formula must be included showing how the cost of insurance was determined. Since there is no formula that would be consistent throughout the state, no example can be given.

LINE 18: Administrative Overhead Costs

Administrative overhead costs are the indirect costs related to the implementation and operation of the program and may be reimbursed up to five percent (5.00%) of the grant request for program operating costs.

Add Line 11 (Total Personnel) plus Line 20* (Total OE&E), plus Line 22 (Data Collection) and multiply by .05. The following Administrative Overhead Cost Worksheet is helpful when determining the maximum amount of administrative overhead cost that may be included in the grant request column of the program budget.

Administrative Overhead Cost Worksheet	
Enter the total amount of Personnel (Line 11)	
Enter the total amount of Operating Expenses and Equipment (Line 20)*	
Enter the amount of Data Collection/Evaluation (Line 22)	
Total	
Multiply by .05 (five percent)	.05
Maximum amount of Administrative Overhead Costs that may be included in the Grant Request column of the program budget.	

*The Line 20 total used in the above calculation is for program operating costs only, excluding Administrative Overhead.

LINE 19: Other

Identify items that do not fall into one of the designated budget categories. A rationale for such items should be clearly explained in the narrative portion of the application. A formula for the cost of each item must be included in the budget narrative.

LINE 20: TOTAL OPERATING EXPENSES AND EQUIPMENT – Enter subtotals for each column on the Budget Form.

LINE 21: TOTAL PERSONNEL AND OE & E – Add Line 11 and Line 20 and enter the total here.

LINE 22: DATA COLLECTION AND EVALUATION

Enter $450 per school site for participation in the statewide data collection system in the Data Collection line item on the Budget Form. This fee is an estimated cost of required program evaluation instruments, scoring, and the evaluation of the information submitted by the program. This amount must be entered as part of the grant request. Because the cost of this service is an estimate, the DMH reserves the right to negotiate the applicant's budget to cover the cost of data collection.

EXAMPLE: Line (21) Grant Request

2 school sites x $450 = $900

No more than 10 percent (10.00%) of the combined match categories (LEA and Other Match) may be used for other identified costs associated with collecting and maintaining the necessary data for required reports and evaluations.

LINE 23: TOTAL BUDGET/ALLOCATION – Enter totals for each column on the Budget Form.

REMEMBER TO TOTAL ALL LINES ACROSS

EARLY MENTAL HEALTH INITIATIVE
PROGRAM SUMMARY

1. Type of Application proposed for EMHI funding (mark appropriate box with an "X"). NOTE: No more than one of each type of application may be submitted per district, except for districts that are regionalized administratively.

Primary Intervention Program (PIP) ☐ Other Model ☐ Other Model and PIP ☐
Enhanced PIP ☐ Enhanced Other Model ☐ Enhanced Other Model and PIP ☐

2. Expansion of Existing Model to Other Sites Within the LEA: ☐ YES ☐ NO

3. Name of Applicant (LEA) and Mailing Address:	4. County:
Superintendent Name:	Telephone:
5. Project Coordinator Name and Mailing Address:	Summer Address:
Telephone: / FAX:	Summer Telephone:
Project Coordinator E-Mail Address:	

6. Name of school sites (in alphabetical order) where proposed model will be implemented. Enter the Cluster or Region Number or Letter after school site, if applicable:	Regional Identifier	A. Augmentation of Existing Services at Listed School Site (X)	B. Modified Traditional (MT) or Year-Round Sites (YR)	C. Receiving Healthy Start Funds (O or P)	D. Formerly EMHI Funded (enter last year of state funding)	E. Locally Funded (enter last year of local funding)
1.		☐				
2.		☐				
3.		☐				
4.		☐				
5.		☐				
6.		☐				
7.		☐				

7. Total Number of Child Aides and **Combined** Number of Hours to be Worked per Week:	8. Estimated Number of Students to Receive Direct Services for One Year with **Grant Funds**:	9. Estimated Number of Parents, Teachers, and/or Students To Receive Indirect Services for One Year with **Grant Funds**	10. Grant Request (One Year):	11. Percent of Grant Request to Total Program Cost:
_____/_____ # of Aides/Combined Hrs.	_____	_____ Parents _____ Teachers _____ Students	$_____	_____%

12. Estimated Cost Per Student (Grant Funds Only) to Receive Direct Services.	13. Total Number of K-3 Students Enrolled at Proposed Sites	14. Cooperating Mental Health Entities:
$_____	_____	

15. Key Professional Staffing Summary:

Name	Role in Program	Hours per Week

EARLY MENTAL HEALTH INITIATIVE
PROGRAM SUMMARY
PAGE 2

16. Clearly describe the basic elements of the proposed services to students, staff, and/or parents:

17. Describe the sequence of implementing the program services from the beginning to end (number each sequence):

18. Name of Person from LEA to Contact:
In the event that there are questions about this application, the following individual will be the only point of contact between the DMH and the LEA.

Typed Name: _____ Title: _____

Telephone Number: _____ Date: _____

INSTRUCTIONS FOR COMPLETING THE EMHI PROGRAM SUMMARY

All of the required program information must be placed on the form in the space allowed. Additional pages may NOT be added except to list additional school districts, key professional staff, and/or cooperating mental health entities.

1. **Type of Application**: Mark with an "X" the type of application proposed for EMHI funding. The services proposed in the application must be described in detail in Part 3: Application Narrative. Definitions of the six different models are as follows:

   - Primary Intervention Program (PIP): Direct service model using one-to-one, nondirective play techniques delivered by trained and supervised child aides.
   - Other Model: Direct services that are not PIP.
   - Other Model and PIP: Combination of Other model and PIP.
   - Enhanced PIP: Direct services are PIP and indirect services are provided to parents, teachers, and/or classrooms
   - Enhanced Other Model: Other model direct services and indirect services provided to parents, teachers, and/or classrooms.
   - Enhanced Other Model and PIP: Other model and PIP with indirect services provided to parents, teachers, and classrooms.

   This section only applies to the specific type of application and does not include expansion or augmentation of existing services. See item 2 for expansion of services and item 6.a. for augmentation of services at the listed school site.

2. **Expansion of Existing Model to Other Sites Within the LEA**: Mark with an "X" either Yes or No if the application is for the expansion of the existing model to other school sites within the LEA.

3. **Name of Applicant (LEA)**: Enter the complete name (no abbreviations) of the LEA (County Office of Education or School District) that is applying for EMHI funding. Enter the LEA mailing address. Enter the LEA Superintendent's name and telephone number, including the area code.

   When an application is submitted by a county office of education or jointly by two or more school districts, designate the county office of education or one of the school districts as the LEA and enter its name and mailing address on the form. Enter the name of the designated LEA superintendent and telephone number. Do not list more than one LEA on this form. County office of education or joint school district applications may include a separate page listing each district, the district mailing address, and each school site in that district where the proposed EMHI funded model will be implemented.

4. **County**: Provide the county where the Local Education Agency (LEA) is located.

5. **Project Coordinator**: ONLY ONE PROJECT COORDINATOR MAY BE DESIGNATED FOR EACH GRANT APPLICATION. Enter the name, mailing address, telephone, FAX number, and e-mail address for the designated project coordinator. Enter the project coordinator's summer address and telephone number. This information is important during the program/budget negotiations that will occur during the summer months. If the designated project coordinator will be unavailable during the summer months, enter the name, summer address and telephone number of a person knowledgeable about the application who can be contacted by state staff should questions arise concerning the application.

6. **Names of School Sites Where Proposed Model will be Implemented**: List the names of all school sites in alphabetical order where the proposed model will be implemented. If the district is regionalized administratively, put the region/cluster number or letter after each school site. Refer to the RFA for requirements that pertain to districts that are regionalized administratively.

   A. **Augmentation of Existing Services at Listed School Site**: Mark an "X" if existing locally funded services are being augmented at the school sites listed in response to number 6.

   B. **Modified Traditional (MT) or Year-Round (YR) Sites**: Mark an "MT" for each site that is on a modified traditional schedule and "YR" for each site that is on a year-round education schedule. Include a copy of the school's calendar in the application.

   C. **Receiving Healthy Start Funds**: If any of the listed sites currently has a Healthy Start Operational or Planning Grant, mark either an "O" (for Operational) or "P" (for Planning) on the appropriate line next to that site.

   D. **Formerly EMHI Funded**: If any site listed in number 6 was formerly funded through EMHI or PIP, enter the year the state funding **ended**.

   E. **Locally Funded**: If any site listed in number 6 was formerly funded through EMHI or PIP and the program was continued with local funding, enter the last year of local funding. If the school site is currently operating a locally funded program at the time this application is being made, enter a "C."

INSTRUCTIONS FOR COMPLETING THE EMHI PROGRAM SUMMARY FORM
(Page 2)

7. Total Number of Child Aides and Combined Number of Hours Worked per Week: Enter the total number of child aides that will deliver direct services to identified students in the proposed model. Enter the combined total number of hours they will work per week. For example, two child aides will each work 15 hours a week: 2/30. This section does not apply for applicants proposing enhancement services that do not include grant funded child aide staff.

8. **Estimated Number of Students to Receive Direct Services for One Year with Grant Funds**: Enter the estimated total number of students to receive direct services with grant funds through the proposed model in one year. The estimate should only include students who will have at least four service contacts in one year.

   If the proposed model will employ child aides, a standard formula to be used when estimating the number of identified students to be served is: Each 15 hour/week child aide will provide individual (one to one) services to approximately 12 students a cycle. If the school site is on a traditional or modified traditional schedule, there will be two cycles a year. If the school site is on a multi-track year-round education schedule, there will be two to three cycles a year. For example: One 15 hour/week child aide will see 12 students at a traditional year school site, therefore 24 students will be served in a year (1 x 12 x 2 = 24). The same ratio must be used for child aides who will work more than 15 hours a week.

9. **Estimated Number of Parents, Teachers, and/or Students to Receive Indirect Services for One Year with Grant Funds**: Enter the estimated total number in the designated space of parents, teachers, and/or students to received indirect services with grant funds through the proposed model in one year. This section only pertains to Enhancement applications.

10. **Grant Request (One Year)**: Enter the amount of STATE grant funds requested for one year. This figure should be the same amount as line 23 of the budget form and on the Grant Request Form. This amount should reflect the estimated cost of the third year of program operation.

11. **Percent of Grant Request to Total Program Cost**: Enter the percent of the grant request in relation to the total program cost. For example, if the total program cost is $80,000 and the grant request is $32,000, the percent of the grant request is 40% ($32,000/$80,000 = 0.40). GRANT REQUESTS THAT EXCEED 50% OF THE TOTAL PROGRAM COST WILL BE PENALIZED DURING THE SCORING PROCESS.

12. **Cost Per Student**: Enter the estimated cost per student to be served in one year. To determine the estimated cost per student, divide the Grant Request (number 10) by the Estimated Number of Students to Receive Direct Services with Grant Funds (number 8). If the application is for Enhancement Services only, mark "N/A" in this section since there will not be a cost per student.

13. **Total Number of K-3 Students Enrolled at Proposed Sites**: Enter the total enrollment of all students in grades kindergarten through third grade at the sites listed in number 6.

14. **List Cooperating Mental Health Entities**: List the names of all cooperating mental health entities that will participate on the proposed model. You may include additional cooperating mental health entities on a separate page if there is not sufficient space on this form.

15. **Key Professional Staffing Summary**: List the name, role and total hours per week devoted to the proposed model for each key professional staff, including staff from the cooperating entity (do not list child aides), who are proposed to work on the EMHI funded model. **DO NOT USE FULL TIME EQUIVALENTS (FTEs)**.

16. **Clearly describe the basic elements of services to students, staff, and/or parents**: Briefly describe the proposed program services model and what it will accomplish.

17. **Describe the sequence of implementing the program services from the beginning to end**: List the activities that will occur to accomplish program goals (quantify where possible). Be brief (one or two sentences per item) yet specific.

18. Name of Person from LEA to Contact: Enter the name, title, date, and telephone number of the person to contact should there be questions regarding this application. Failure to designate a contact from the LEA will result in a deduction of points.

EARLY MENTAL HEALTH INITIATIVE
EMHI-2004

KEY STAFF SUMMARY CHART

County: _____

School District or
County Office of Education:_____

PROJECT COORDINATOR

		Hours per Week
Name:	_____	_____
Address:	_____	
	_____	
City and Zip Code	_____	
Telephone Number:	_____	
E-Mail Address:	_____	

PLEASE LIST ALL OTHER KEY PROFESSIONAL STAFF

Name	Role in Program	Hours per Week

Staff hours per week should match information provided in the application narrative and budget narrative.

PROJECTED CONFERENCE ATTENDANCE

Enter the estimated number people who will attend the Training Conference to be conducted in January 2005 (remember, all key staff are required to attend this conference). Please do not include staff from any continuing EMHI funded programs:

Child Aides: ☐ **Project Coordinator, SBMHP's and MH Consultants:** ☐ **Others** ☐

COUNTY:_____ School District or County Office of Education:_____

EMHI-2004
ANTICIPATED SCHOOL ENROLLMENT INFORMATION (FY 2004-2005)

SCHOOL	K	1	2	3	4	5	6	TOTAL STUDENTS	NUMBER OF STUDENTS EXPECTED TO BE SERVED
TOTAL									
TOTAL K-3 ENROLLMENT									

ESTIMATED STUDENT DEMOGRAPHICS (FY 2004-2005)

School	Current Enrollment	% AFDC	% Free Lunch	% Family LEP	% Out-of-Home Placement[1]	% White	% Black	% Hispanic	% Asian	American Indian/ Alaskan	% Other

[1]A student is considered to be in an **out-of-home placement** when not living with at least one biological or adopted parent.

Score Sheets Faxed to: _____
FAX Number: _____
Date: _____
Sent By: _____ Rater Number: _____

EMHI-2004
APPLICATION SCORE SHEET

Number of Sites: _____ Application Number: _____

School District/County Office of Education: _____

County: _____

Model: _____	**Points Less Than Maximum**					**Maximum Points**	**Score**
					Average		
1. Characteristics of Applicant	0	2	4	6	8	10	
2. Program Services	0	6	12	18	24	30	
3. Program Staffing	0	3	6	9	12	15	
4. Cultural Competency	0	2	4	6	8	10	
5. Budget	0	4	8	12	16	20	
6. Letters of Support	0	1	2	3	4	5	
7. Adherence to RFA Instructions (Minus Any Automatic Deductions)	0	2	4	6	8	10	
	Application Score					100	

COMMENTS: (Indicate reasons for any high/low scores given for a specific category **on the reverse side of this page**)

GENERAL COMMENTS AND SUGGESTIONS:

Indicate reasons for any low scores given

1. Characteristics of Applicant
2. Program Services
3. Program Staffing
4. Cultural Competency
5. Budget
6. Letters of Support
7. Adherence to RFA Instructions (List any Automatic Deductions)

Score Sheets Faxed to: _____
FAX Number: _____
Date: _____
Sent By: _____ Rater Number: _____

EMHI-2004

PART 1 - RATING CRITERIA

APPLYING FOR SAME PROGRAM SERVICE AT A PREVIOUSLY FUNDED EMHI SITE

Number of Sites: _____ Application Number: _____

School District/County Office of Education: _____

Model: _____

Criteria	Deductions			Comments
	0	1	2	
1. Previously Funded Program Services				
2. Reduction/Discontinuation of Services				
3. Changes that Support Program Continuation				
4. Plan for Continued Program Support				
5. Plan for Securing Local Funding				
(10 points Maximum Deduction) **TOTAL POINTS DEDUCTED**				

General Comments/Suggestions:

EMHI-2004

Certification of Assurance of Compliance with Welfare and Institutions Code Section 4380(j)(10)

Pursuant to Sections 4380 et seq. of the Welfare and Institutions Code (Chapter 757, Statutes of 1991, Assembly Bill 1650),
_____ (name of local education agency) has applied for a matching grant for school based early mental health and intervention and prevention services.

As an authorized representative of the above named local education agency, I have read and am familiar with Section 4380(j)(10) which states in pertinent part: "Each matching grant application submitted shall include . . . [a]ssurance that grants would supplement and not supplant existing local resources provided for early mental health intervention and prevention services."

I certify under penalty of perjury that a grant awarded to the above named local education agency, in accordance with Sections 4380 et seq. of the Welfare and Institutions Code, will supplement and not supplant intervention and prevention services.

_____	_____
Signature	Date
_____	_____
Title	Location

EMHI-2004

Certification of Assurance of Compliance with EMHI-2004-Part 1 Applying for Same Program Service at a Previously Funded EMHI Site

Pursuant to Sections 4380 et seq. of the Welfare and Institutions Code (Chapter 757, Statutes of 1991, Assembly Bill 1650), _____ (*name of local education agency*) has applied for a matching grant for school based early mental health and intervention and prevention services, at a site or sites that have previously provided the same service during one, three-year grant period.

As an authorized representative of the above named local education agency, I have read and am familiar with EMHI-2004 which states in pertinent part: "Applicants must submit a plan proposing how they will assume the total costs to continue the program beyond the three-year grant period. LEAs may not receive EMHI funding more than two times for the same program service at any school site. Applicants requesting EMHI funding to restore or augment previously funded program services at the sites listed in this application are required to complete Part 1: Applying for Same Program Service at a Previously Funded EMHI Site."

I certify under penalty of perjury that a grant awarded to the above named local education agency, in accordance with Sections 4380 et seq. of the Welfare and Institutions Code, will not fund any service that has already been funded through the EMHI for two grant cycles at any school site listed in the application.

☐ Part 1 has been completed and submitted for the following sites:

_____

_____

OR

☐ Part 1 is not applicable to the application for _____
Local Education Agency

_____ _____
Signature Date

_____ _____
Title Location

STATE OF CALIFORNIA
DEPARTMENT OF MENTAL HEALTH

GRANT REQUEST FORM

NUMBER: EMHI-2004
DATE: SEPTEMBER 15, 2004

TITLE: **DEPARTMENT OF MENTAL HEALTH -- EARLY MENTAL HEALTH INITIATIVE**

The undersigned applicant hereby proposes to provide the services specified in:

Part 2: Characteristics of Applicant
Part 3: Application Narrative
Part 4: Description of Supporting Research
Budget and Budget Narrative

It is understood that the Local Education Agency (LEA) will receive an allocation letter from the State Department of Mental Health which outlines program, fiscal, and general requirements.

Pursuant to the attached provisions of this program, our all-inclusive requested grant amount for ONE YEAR (Fiscal Year 2004-2005) is entered below. (This amount should be the same as the amount on line 23 of the Budget form and should represent the third year cost of program operation.)

REQUESTED GRANT AMOUNT: $_____

The following information must be completed and signed by the LEA Superintendent or his/her designee:

_____
Authorized Signature Date
Superintendent, School District/County Office of Education

_____
Type or Print Signer's Name and Title

_____
Type or Print the Name and Telephone Number of the Person to Contact Regarding this Application

Name and Address of the LEA:

_____
Federal Identification Number

NOTICE OF INTENT TO APPLY
EARLY MENTAL HEALTH INITIATIVE
REQUEST FOR APPLICATION
EMHI-2004

PLEASE COMPLETE ONE FORM FOR EACH PROPOSED APPLICATION TO BE SUBMITTED

COUNTY:_____

LOCAL EDUCATION AGENCY (Name of District or County Office of Education):

_____

LIST THE SCHOOL SITES PROPOSED FOR THE PROGRAM FUNDED THROUGH EMHI:

1.	☐	4.	☐
2.	☐	5.	☐
3.	☐	6.	☐
		7.	☐

☞If any of the listed school sites are operating an intervention program that is either currently or formerly funded by the Department of Mental Health through either EMHI or PIP, mark an "**X**" next to the school name.

Type of Proposed Application (Check One):

Primary Intervention Program (PIP)	
Other Model	
Other Model and PIP	
Enhanced PIP	
Enhanced Other Model	
Enhanced Other Model and PIP	

Will this application be for: Expansion of Services _____ Augmentation of Services _____

Did a representative from your district/county office of education attend one of the EMHI-2004 RFA Information Meetings? YES _____ NO _____

PLEASE MAIL OR FAX THIS FORM BY **SEPTEMBER 1, 2004** TO:

Jacqui Naud
California Department of Mental Health
Early Mental Health Initiative
1600 9th Street, Room 100
Sacramento, CA 95814

FAX: (916) 653-6486
If you have any questions, please call (916) 654-2996.