FY10 School Mental Health Support Request for Proposals (RFP)
Phone Conference
May 11, 2009
2 p.m.

Welcome, I’m Kelly Rauscher, the grant administrator for these grant awards at the IL State Board of Education and joining me on the line is Colette Lueck, Managing Director of the IL Children’s Mental Health Partnership. Over the past two years, ISBE, the Department of Human Services, Division of Mental Health, and the Partnership have worked collaboratively to develop the School Mental Health Support Grants Program.

Thank you for your interest in this particular RFP. We did a round of grants three years ago that was a three year initiative in which we are now winding up year two of that group so we have a little bit of learning from that particular cohort of grants. I think we both feel that there is a pressing need to address mental health issues for kids and schools are a logical and natural place to address those issues as you’ll see in this RFP. This is also a great opportunity for partnerships to develop between schools and community mental health providers and other people within the community surrounding schools that really enhances the life of children, enhances the skill set of teachers and provides some extra support to often highly stressed mental health staff within schools such as school social workers and school counselors. We also know from our first cohort that this can really work, that some very exciting and unique projects have developed as a result from these grants and we’re delighted to be able to offer this opportunity to another group of districts.

We have three goals to this grant, the first is to enhance the capacity of school districts to identify and meet the early intervention mental health needs of students in natural settings such as schools. We want to take a little bit of time to talk about how we’re defining early intervention. Early intervention refers to tier 2 interventions that occur as quickly as possible after the onset of an identified concern. Sometimes that concern is with an individual student, sometimes it is with a subgroup of students and sometimes it is with students who are at risk of developing mental health concerns and that risk has to be significantly higher than average. Every community can choose how to define early intervention within their community as long as it meets this broader definition. For example the risk factors in one community may be very different from the risk factors in others, or the group of students you choose to target might be very different from school to school. We see the interventions using a developmental approach so we’re looking at students who are sort of developmentally off track from typical but don’t meet the criteria for a diagnostic category which is necessary for traditional mental health services. Typically, these interventions are selected through a collaborative process and they build on natural protective factors of the students that are supported by schools, communities and families. In education these types of services are typically referred to as early intervening. In the mental health field, they are referred to as early intervention so you already see some of the issues in terms of bringing mental health providers and schools together.

Our second goal is the development of a coordinated collaborative student mental health support system that integrates community mental health with other child survey systems. We know that both within schools and around schools one of the significant barriers for students accessing mental health services is that services are often fragmented and not integrated. School staff doesn’t always know what is going on in the community and the community mental health providers certainly aren’t always aware of what is taking place in schools to better support the academic and mental health needs of their clients so we’re really looking for partnerships that bring those two pieces of our service system together. In order to do that, you really need a team that is going to collaborate, plan together, work together and review things consistently together and then we’re hoping that as a result of the first two goals the third goal will happen naturally which is to reduce the stigma associated with mental health and mental illness. Part of putting these services in place will require defining who your population is, what the pathways are in order to serve those populations, providing teachers with some information about the risk factors...
for mental health issues, and also doing some broader anti-stigma events with your school community. So we are very happy to offer you this opportunity to meet these three goals and your particular school district and schools.

Completed grant applications must be received no later than 4:00 p.m. on May 29, 2009. RFP’s can be mailed to our Springfield office or hand delivered to the Springfield or Chicago office. Addresses are below.

Illinois State Board of Education
Special Education and Support Services
100 North First Street
Springfield, Illinois 62777-0001

or

Illinois State Board of Education
Reception Area
Suite 14-300
100 West Randolph Street
Chicago, Illinois

Please mail the original RFP along with 2 copies.

Eligibility- Public school districts, public university laboratory schools approved by the Illinois State Board of Education, charter schools, and area vocational centers are eligible to apply.

Joint applications for funds may be submitted by any combination of eligible applicants if it will result in a more cost-effective mental health support system for their students.

Existing grantees are eligible to apply but will be part of the competitive pool. They must demonstrate that they are serving a new population, providing new services, or expanding services. Supplanting is not allowed (see appendix B).

Grant Award- The total award is dependent on the FY10 appropriation but it is anticipated to be $770,000. Grant awards will range from $25,000 to $75,000 depending on the size of the district (see table under Fiscal Information in the RFP). CPS is eligible for 20% of the total award per Part 555 administrative rules. Grant awards for joint applications will be determined by the size of the participating districts. For example, if a small district eligible for $25,000 and a medium size district eligible for $50,000 jointly apply, the award would not exceed $75,000.

Expectations of the Grant Project
Each successful applicant must ensure that services provided under the grant will be made available to all students housed in the participating attendance centers.

A. Identify and develop a protocol and structures for meeting the early intervention mental health needs of students.

1. Protocols must include clear steps for early identification, referral, and follow-up. All protocols and procedures will adhere to Illinois laws pertaining to parental consent and confidentiality.

2. Participating school districts will provide professional development activities to school faculty on social and emotional development, signs and symptoms of mental health issues, and their school district’s mental health protocols and services.

3. School districts will provide school-based and/or school-linked community-based services by a qualified mental health professional, such as:
• Screening and assessment;
• Individual and group counseling and support;
• Skill-building activities;
• Family support, including linking family members to needed mental health services;
• Peer or adult mentoring;
• Teacher consultation and education;
• School-wide mental health prevention activities; and
• Targeted group early intervention.

B. Services are coordinated with other community-based service systems and providers.
   • Participating school districts must develop and implement formal interagency working agreements, which should go beyond the above mentioned protocols, with community organization(s), public agency(s) and/or business(s) that reflect a mutual agreement to jointly address the mental health needs of school-age children by providing a range of mental health services and supports that promote students’ academic, social, emotional, and behavioral development and/or addresses a specific mental health need.

   2. Participating districts will utilize a team approach, including school staff, community providers, and students and their families, to:
      • Develop a framework for the integration of social and emotional learning and mental health-related initiatives that builds upon existing mental health support programs, structures and collaborations;
      • Identify a contact person or coordinator for school mental health activities and school and community partnerships; and
      • Provide services in natural settings, such as the school, youth-serving agencies or family home.

C. School districts will reduce mental health stigma within the school community.
   • School districts will identify cultural and community-specific mental health beliefs and strategies to reduce stigma and promote mental health at the local level.

   2. Participating districts will conduct events for the school faculty, students, and families to promote mental health and increase awareness regarding the impact of mental illness, the efficacy of mental health treatment, and the importance of early identification. Students and parents/caregivers will be included in the planning and coordination of events whenever possible.

   3. School districts will promote leadership among students and support for peers with regards to mental health.

Districts will participate in reporting, evaluation, and technical assistance activities as required by ISBE.

   1. Grant recipients will be required to submit quarterly reports to ISBE that reflect progress toward the requirements set forth by this RFP, including the submission of interagency agreements, and protocols.

   2. School districts in collaboration with their community providers will participate in networking and technical assistance activities. Team participation in the following activities is required:
      • Orientation telephone conference;
Four trainings in Springfield (first two days of training will be held in early October); and
Two regional meetings.

**Fiscal Information**
No more than 5 percent of the total grant award shall be used for administrative and general expenses.

Allowable expenditures include:

- Staffing costs for service provision (district staff or by contractual);
- Staff time for project coordination, evaluation and reporting;
- Travel (including one two-day training and two additional one-day trainings in Springfield, and four regional meetings);
- Meetings, public and school awareness activities, and student leadership activities;
- Purchasing research-based curricula or programs related to specific interventions pertaining to this grant; and
- Stigma reduction materials and mental health promotion activities (e.g., social marketing, newsletters, posters, presenters).

School districts are encouraged to subcontract with local community mental health providers for some or all of the services provided through this grant program. Supplanting (see Appendix B for definition) is **not allowed**.

**Completing the Proposal**
All applicants will be required to complete the Continuation Application Form Attachment 1. If you are submitting a joint application, you must also complete Attachment 1A. All applicants must submit a one page abstract that briefly describes the overall plan for providing student mental health supports as required under this RFP. The proposal narrative should be no longer than 12 pages, double-spaced, with one-inch margins, 12-point font. Each page must be numbered and include a header or footer with the applicant's name and region-county-district code.

**Project Implementation and Management** should be addressed by: describing the demographics of the school community; identifying the participating schools and rationale for selecting those specific schools; and explaining past experiences in addressing the social and emotional learning and early intervention mental health needs of students in the district, including current and/or previous collaborations with community mental health providers. Applicants must also provide a detailed plan for addressing:

- Development, implementation, and evaluation of protocols that include but are not limited to the process of identification of students for early intervention and the coordination of mental health intervention services in a natural setting;
- Coordination and integration of mental health support services with other community-based service systems and providers, including the development of interagency agreements; and
- Reduction in the stigma associated with mental health issues within the school community.

The plan must indicate the objectives and activities in a time-specific format for meeting the goals of the School Mental Health Support Grants and describe how the requirements listed above will be met by all parties involved, including the role administrators will play in the implementation of this project and the resources districts will allocate to support these activities. The proposal needs to include a letter from the community mental health agency the applicant intends to partner/subcontract with that describes its potential role and services.

**Program Need** should be addressed by: describing the level and nature of students' need for early intervention mental health supports, the need for reduction of stigma associated with mental health issues, the need for collaborative efforts to address the students' mental health, and
explain why additional resources are needed to address gaps in school mental health services. Applicants should use available data to describe the financial need of their district and the students and families it serves.

**Applicants must indicate if their district has previously participated in the School Mental Health Support Grant Program.**

If applicant indicates prior participation in this project, then they must briefly describe the current services being provided during year three of the grant project and explain how services outlined in this proposal will expand and/or build upon the current services. Supplanting is **not allowed** (see Appendix B for definition).

Please refer to Appendix B, not Appendix C like noted in the RFP, when completing Attachment 4 (Budget Summary and Payment Schedule) and Attachment 5 (Budget Summary Breakdown). Budget information must be submitted on the forms provided and signed by the district superintendent or official authorized to submit the proposal. The payment schedule should be based on the projected date of expenditures. Salaries and fringe benefits should be requested in equal intervals on the schedule. Supplies, equipment, contracted services and professional development should be requested in the month for which the expenditure is anticipated. No more than 5 percent of the total grant award shall be used for administrative and general expenses.

The Budget Summary Breakdown requires an explanation of each expenditure amount. Use formulas in your explanation (e.g. 4 mtgs. in Spfld x $.485/mile x 85 miles = $165) and double check your math. **Make sure program and budget content matches.** For additional information, we will post a link to ISBE’s Fiscal Requirements and Procedures on our website where the application is posted.

Applicant must include subcontract information, if applicable and available at the time of proposal submission. The following information is required if any subcontracting is proposed:

- Name(s) and address(es) of subcontractor(s);
- Need and purpose for subcontracting;
- Measurable and time-specific services to be provided;
- Association costs, i.e., amounts to be paid under subcontracts;
- Projected number of participants to be served.

All subcontracting, including any subcontract(s) entered into after a Grant Agreement is executed, must be documented and must have the prior written approval of the State Superintendent of Education.

Each applicant, **including each entity that is participating in a joint application**, is required to submit the certification forms attached ("Certification and Assurances and Standard Terms of the Grant" and "Program-Specific Terms of the Grant"). These must be signed by the official legally authorized to submit the proposal and to bind the applicant to its contents.

**Question and Answers**

What is the maximum enrollment of students in the building that will be able to be covered by this grant? There is no maximum number of students that can be served by this grant.

In the RFP it is stated that grant participants will be districts that either operate only one school or will enroll no more than 1,000 students, so a school cannot have more than 1,000 students that are participating in this grant? That is referring to the amount of money
districts are eligible for depending on the size of the district. If you have more than 1000 students in your school district, you would be eligible for the higher award amount (see “Table” under Fiscal Information of the RFP).

One of our high schools has 3,800 students, would that building be eligible based on that amount of students in a building or were you looking at servicing no more than 1,000 students in a building? The district is the eligible applicant and so we go by those numbers when determining the actual award that you’re eligible for. We don’t have a max per building.

So can multiple schools be allowed to implement this grant? Yes, under one district application.

Under the program specifications it says that we have to be able to provide and be sure services are provided to all students housed in the participating attendance center so does that mean that all eligible students may not need tier 2? This means that there shouldn’t be a certain group of students excluded from receiving early intervention services that need those services.

Under the proposal format is there a separate continuation application form or is that something separate? That would be something separate. We have intentions to fund this grant project for 3 years provided that we have a sufficient appropriation but there will be a separate application form for those continuing years provided at a later date.

Where do we find the attachments because they weren’t connected to the RFP? The attachments I was speaking about are part of the form. It’s one big long form. When you go on our website it is under Special Education/Grants Information and is under the first heading for this FY10 RFP. There is an RFP link and a link for the forms (which is right under the RFP link).

Under proposal format in A, Project Implementation and Management, #3 it says to summarize current and past experiences the school district and selected schools have had with addressing the social and emotional learning of all students. So do you want us to summarize the school districts general not just the population that we plan to target for this application? That is correct.

So same goes for B Program Need, you want us to talk about the entire school district not just the population we attend to serve with this grant? Yes, however, you could highlight the specific target population you have in mind as well.

Skill building activities are listed as an allowable service. How would you define skill building activities? These activities could be implemented to meet the mental health needs of students at both the universal and secondary levels. However, these grant funds should primarily focus on prevention and early intervention. Examples of skill building activities that focus on prevention and early intervention might include: a skill building group for students who’ve had trauma exposure but are not showing any symptoms but could still benefit from additional skill building activities (target populations would vary depending on needs of students in district); conflict resolution skill building activities for students that are having some difficulty in this area, etc…

Does the agency partnership need to be with a mental health agency because we don’t really have a viable agency in our community? What types of agencies would be appropriate? Potentially, there can be partnerships with other entities for prevention activities. Some communities have a Youth Service Bureau that provides a mental health support or some early intervention support. Something like that might be appropriate. It’s not required that it be a community mental health agency.
We have a community mental health agency in the school district however they are experiencing a lot of difficulty right now financially so I don’t know if it would be stable enough for us to partnership with them. We are interested in doing that, I just didn’t know if there were other options. We understand that that’s not always feasible and another entity would be acceptable.

Does it have to be a partnership? The school district can’t do this alone with subcontracting with a provider? We would encourage you to develop some partnerships not just with your community mental health provider but other child serving entities (LAN, local boys and girls club, etc.,) We want to see some community partnerships established even if it’s not possible to establish those partnerships with a community mental health provider.

Aging Human Services operates Passages Charter School in Chicago and Charter Schools are listed as eligible applicants however most of the language throughout the RFP appears to be addressed to school districts, so I’m wondering if there is anything particular that would be different or that we would need to be aware of to be applying as a charter school? No, there is no additional requirement from ISBE for charter schools but you are encouraged to follow any local policies. Whenever we refer to districts, we are also referring to any of the eligible applicants so it doesn’t exclude you from any of the requirements set forth in the RFP.

We are a Special Education Cooperative that is looking at this grant as possibly cooperating or working with a couple of our local districts to develop some programming. What is the best way to present a proposal that might include two different districts with maybe two different types of program proposals? Would it be a stronger proposal even if they weren’t consistent with one another to do a cooperative proposal or to do two separate proposals? It depends on if they’re going to be sharing any resources or sharing any sort of partnerships. It basically comes down to the feasibility of jointly applying versus applying separately. Also, it is important to note that we are going to try to geographically distribute these grants and may not be able to fund two bordering districts.

If we were to submit a joint proposal, on the Proposal Narrative it indicates it should include the region county district code. How would we code that if we have two or more districts that were jointly submitted on an application? If there is going to be a joint application, one of the districts would need to be designated as the fiscal agent/applicant and their RCDT code would be used.

What exactly is the definition of a qualified mental health professional? We have not defined that at this time. It’s going to need to be determined by the school district on what they feel would be a qualified mental health provider for the service provision this grant is requiring.