Financially Assisted Agencies FY 2022 – 2023 Bidder's Conference

April 1, 2021

Palm Beach County
Community Services Department





WELCOME

Please put questions in the chat to everyone This meeting is being recorded



FAA Behavioral Health NOFO Bidders Conference April 1, 2021 3:00-4:30pm

AGENDA

Welcome & Introductions

John Hulick, Senior Program Manager, CSD

Overview of 2022 FAA NOFO Process and Guidance

Joanna Reid, Grant Compliance Specialist III, CSD

Outcomes Overview of ROMA Logic Model and Evaluation Plan

Meghan Parnell, Manager of Planning and Evaluation, CSD

Fiscal Overview for NOFO Budgets

Thomas Eaton, Fiscal Manager, CSD

FAA Application Website Overview

Gillian Moxey, Contract/Grant Coordinator, CSD

Questions & Answers

Adjournment & Distribution of NOFO Invitation Code



Overview of Behavioral Health Process & Guidance

Joanna Reid, Grant Compliance Specialist III



FAA Funding Cycle

FY 2022 NOFO Category:

Behavioral Health

Strategies:

Support Services, Community-Based Treatment and Services, Deep-End Treatment

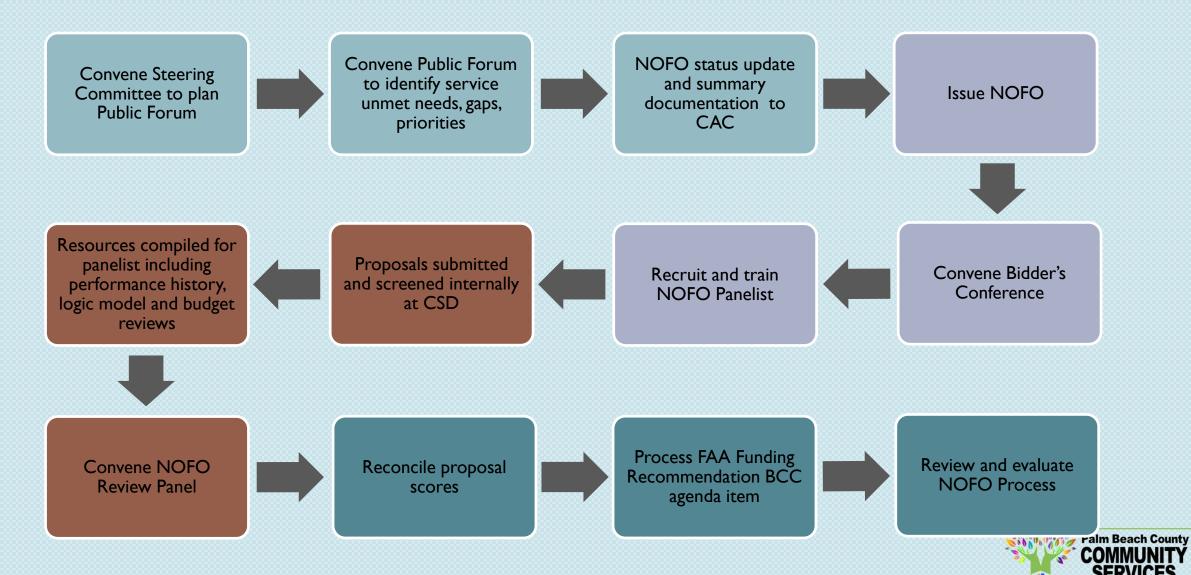
Subcategories:

Special Needs

FY 2022 – 2023 Oct 1, 2021 – Sept 30, 2023



FAA NOFO Process



CONE OF SILENCE

This NOFO includes a Cone of Silence. The Cone of Silence will apply from the date the NOFO is due, which is April 26, 2021, until the final FAA contracts are approved by the Board of County Commissioners.

Respondents are advised that the "Palm Beach County Lobbyist Registration Ordinance" (Ordinance), a copy of which can be accessed at: http://www.pbcgov.com/legislativeaffairs/pdf/Lobbyist_Registration_Ordinance.pdf

is in effect. The Respondent shall read and familiarize themselves with all of the provisions of said Ordinance, but for convenience, the provisions relating to the Cone of Silence have been summarized here. "Cone of Silence" means a prohibition on any non-written communication regarding this RFP between any Respondent or Respondent's representative and any County Commissioner or Commissioner's staff, any member of a local governing body or the member's staff, a mayor or chief executive officer that is not a member of a local governing body or the mayor or chief executive officer's staff, or any employee authorized to act on behalf of the commission or local governing body to award a contract. A Respondent's representative shall include but not be limited to the Respondent's employee, partner, officer, director or consultant, lobbyist, or any, actual or potential subcontractor or consultant of the Respondent.

The Cone of Silence is in effect as of the submittal deadline. The provisions of this Ordinance shall not apply to oral communications at any public proceeding, including pre-bid conferences, oral presentations before selection committees, and contract negotiations during any public meeting. The Cone of Silence shall terminate at the time that the BCC awards or approves a contract, rejects all proposals or otherwise takes action which ends the solicitation process.

Ethics Commission

If anyone has a question regarding ethics they should not be addressed to our department, but should be addressed directly with the Ethics Commission – http://www.palmbeachcountyethics.com/

FINANCIALLY ASSISTED AGENCIES FY2022 – 2024 Notice of Funding Opportunity TIMELINE

Schedule of Events — 2021

February 11 / March 11: Citizens Advisory Committee on Health and Human Services (CAC/HHS) information

update on NOFO process

March 29: NOFO available for the Public

April 26 – 12:00 PM NOON: PROPOSAL SUBMISSION DEADLINE

May 25 – 28: Review Panels meet to review and score proposals. Panelists in person; public can attend virtually.

➤ May 25, 2021 – Support Services

➤ May 26, 2021 – Community Based Treatment & Services

➤ May 27, 2021 – Deep-End Services

➤ May 28, 2021 – Special Needs

June 8 – 11: Staff reconciles review panel rankings and funding availability to develop recommended

Palm Beach County

allocations (Internal)

June: Funding recommendations posted on FAA website after CAC/HHS meeting

June: Final date to file a Funding Grievance-7 Business Days following Funding

Recommendations Posted on FAA Website

September 14, 2021: BCC Contract Approval

Funding Available

FY 2022 Total Allocation:

\$5,806,415.00

Behavioral Health:

\$5,732,391.00

- Strategy: Support Services

- Strategy: Community-Based Treatment & Services

- Strategy: Deep-End Services

Subcategory- Special Needs :

\$74,024.00

^{*} Funding availability/recommendations are subject to BCC approval



Behavioral Health Strategies and Subcategory

Strategies

- **Support Services** includes *crisis support, case management, care coordination, mobile crisis, recovery support* (i.e. peer services, drop-in recovery community centers, recovery community organizations), supported housing, supported employment.
- Community-Based Treatment and Services includes outpatient-individual therapy, outpatient-group and/or family therapy, medical, Medication-Assisted Treatment (MAT)
- Deep-End Treatment includes crisis stabilization, detox, inpatient, residential, including, residential-levels 1, 2, and 4 and room and board-levels 2 and 3.

<u>Subcategory</u>

Special Needs - Respite Care Services



Behavioral Health Strategies and Subcategory

Support Services

Services			
Crisis Support (i.e. Mobile Support)			
Case Management / Care Coordination			
Recovery Support			
Supportive Housing			
Supportive Employment			

Community-Based Treatment & Services

Services	
Outpatient Services (Therapy, Medical Services, Mental Health, Substance Use)	
In-home or Onsite Day Treatment	

Deep-End Treatment

Services	
Crisis Stabilization	
Medical Detox	
Inpatient / Residential Services	

Special Needs

Services			
Behavioral Respite Care			



Behavioral Health Outcomes and Tools

Program Outcomes are required in the logic models. By submitting a proposal, the Applicant Agency agrees to address and measure the following stated outcomes in the NOFO, and provide at least one appropriate indicator per outcome in proposals.

Tools

Applicant Agencies serving Young Adults and Adults with Substance use and cooccurring disorders must agree to utilize and adhere to protocols for on-going use of the Recovery Capital IndexTM (RCITM) tool.

Applicant Agencies serving Clients are required to administer Client Satisfaction Surveys at discharge. Survey results are to be reported on a quarterly basis.



Proposal Components

- **1. Need**: (5 points)
- 2. Program Implementation & Design: (50 points)
 - a. Program Narrative
 - b. Program Implementation
 - c. Collaboration and Partnership
- 3. Evaluation Approach (25 points)

- 4. Organizational Capacity (10 points)
 - a. Program History
 - b. Available Resources & Sustainability
- 5. Budget: (10 points)
- 6. Scope of Work: (No points)



Priority Area Score

The Review Panel will rank all proposals based on how critical they deem the program is for the system of care.

The <u>SCORE</u> awarded to a proposal is reflective of how competitive the proposal is.

The <u>RANKING</u> of the proposals is reflective of how imperative and critical the services are to ensure availability and access.

Please review the ranking guide in the NOFO



Ranking Guide and Process

- Please review the ranking guides in the NOFO for each of the categories.
- Each application will be scored and ranked.
- The proposals considered the most critical to the system of care will be ranked #1. All proposals will be ranked.
- No two proposals will be ranked the same, as a tie.
- If there are 10 proposals, then the ranking should ultimately have 10 proposals ranked 1 through 10, with 1 being deemed the most critical.



Outcomes Overview of ROMA Logic Model and Evaluation Plan

Meghan Parnell, Manager of Planning & Evaluation



Outcomes Overview of ROMA Logic Model and Evaluation Plan

Meghan Parnell, Manager of Planning and Evaluation, CSD



Logic Model

ROMA Logic Model – Please use format found in WebAuthor

Identified Problem, Need or Situation	Service or Activity	Outcome General statement of results expected	Projected Indicator # to achieve/# to be served; %; time frame	Actual Indicator # achieved/# served; %; time frame	Measurement Tool	Data Procedures	Frequency Data Collection and Reporting
Clients with BH, SUD, and/or Co- occurring need secure employment	 Supportive Employment Employment Trainings Job search 	Clients will secure employment	80% of Clients will be competitively employed for at least 92 days per year	DO NOT FILL OUT FOR APPLICATION	Paystubs, Employment letter	Job Coach will provide one-on-one services to Clients. A skills test will be administered. Based on the results Client will work on goals-setting with Employment Coach. Once Client is ready for employment, coach will help search employment and track client progress in Client file.	Client progress and goals will be reviewed every 60 days. All Clients will be tracked and results will be submitted at Quarter Report deadline.

Mission: Your Agency Mission



Keys to Creating A Good Logic Model/Evaluation Plan



Read The Description For Each Section



Use Specific & Concise Bullet Points



Provide Only What Is Asked For In Each Section



Tips for a Successful Application

- Read the NOFO 4 times
 - For understanding
 - For requirements
 - For writing response
 - For review
- Make sure to review all of the resource documents that have been posted online
- Make sure that your Partner Letters / MOUs:
 - ✓ Are well-written
 - ✓ Outline the partnership(s) between community agencies as detailed as possible
 - ✓ Are as updated as possible



Tips for a Successful Application

- Use the total work time allotted to complete your grant application. Do not wait until the last minute to submit.
- Answers should be simple, concise, and to the point, while still informing the reviewer of what your program does.
- While going through your grant application, please keep in mind that this is a highly competitive grant and we often receive more applications than we can fund.



Tips for a Successful Application

- Start as soon as possible and assemble a team
- Review all the questions
- Review the Ranking Guide
- Submit the Application in advance of the deadline in case of technology challenges

If you have questions use the email JREID2NOFO@pbcgov.org and review the FAQ often on the FAA Website!

Community Services Department Fiscal NOFO Review

Thomas Eaton, Fiscal Manager



Budgets

- Initial Submission with NOFO
 - Project program expenses to the best of your knowledge
 - Include proposed funding for this program and any other proposed or confirmed funding sources that may share the program's expenses
- Update with final award amount at contracting
- Examples on next slide



Budget Template – Program Expenses

Budget Items	Program Name		alm Beach County	Program Funder #2		Pro	gram Funder #3	Tot	cal Program Funding (All Sources)
Program Period: FY 2021		Proposed		Confirmed		Pending			Pending
	TOTAL PROGRAM FUNDING AMOUNT =	\$	129,500.00	\$	45,000.00	\$	17,500.00	\$	199,500.00
Program Expenses	<u>Narrative</u>		<u>Amount</u>		Amount		Amount		<u>Amount</u>
Personnel		\$	89,900.00	\$	25,000.00	\$	10,000.00	\$	124,900.00
Program Manager	Program manager position for community support service. Salary expense is 100% funded by PBC award and includes fringe benefits.	\$	60,000.00	\$; -			\$	60,000.00
Program Assistant`	Program Assistant role is to support the program manager and community educator with daily tasks. This salary expense is 50% funded by PBC award. Total salary expense is \$15,000, with 50% allocated to PBC (\$7,500). (Salary expense does not include fringe benefits)	\$	25,000.00	\$	25,000.00	\$	-	\$	50,000.00
Fringe Benefits - Program Assistant	Fringe benefits expense for Program Assistant. Fringe benefits for this position total (\$1,800), with 50% allocated to Palm Beach County in the amount of \$900.	\$	900.00					\$	110,000.00
Community Educator	Community Educator position is the primary interface with local schools, charities and support groups. Total Salary (including fringe benefits) billed to Palm Beach County = \$39,045. pays .8 FTE	\$	4,000.00			\$	10,000.00	\$	14,000.00

- Simplified and easier to use
- No macros
- Includes clearly defined sections for programmatic and admin expenses
- Will allow for better transparency and understanding of each program



Budget Template – Program Expenses

Program Expenses	<u>Narrative</u>	<u>Amount</u>	<u>Amount</u>		<u>Amount</u>	<u>Amount</u>	
Personnel		\$ 89,900.00	\$ 25,000.00	\$	10,000.00	\$ 124,900.00	
Program Manager	Program manager position for community support service. Salary expense is 100% funded by PBC award and includes fringe benefits.	\$ 60,000.00	\$ -			\$ 60,000.00	
Program Assistant`	Program Assistant role is to support the program manager and community educator with daily tasks. This salary expense is 50% funded by PBC award. Total salary expense is \$15,000, with 50% allocated to PBC (\$7,500). (Salary expense does not include fringe benefits)	\$ 25,000.00	\$ 25,000.00	\$	-	\$ 50,000.00	
Building /Occupancy		\$ 27,050.00	\$ -	\$	-	\$ 27,050.00	
Programmatic Rent/Lease	*Note: Rent for areas that house admin staff should be listed seperately under admin seciton* Rent expense for Lake Worth facility. Total rental expense for FY16 = \$35,000. Allocation to Palm Beach County award= \$20,000. Remaining \$15,000 will be paid by other operating income.	\$ 20,000.00				\$ 20,000.00	
Building Maintenance	Maintenance expense for building XYZ	\$ 3,800.00				\$ 3,800.00	
Utilities		\$ 2,400.00	\$ -	\$	1,500.00	\$ 3,900.00	
Electric	Electric Utility Services expense for location X	\$ 1,200.00		\$	1,000.00	\$ 2,200.00	
Telephone	Telephone expense for landline at location X	\$ 350.00				\$ 350.00	
Project Supplies/Equipment		\$ 4,900.00	\$ -	\$	-	\$ 4,900.00	
Office Supplies	Office supplies for program staff	\$ 500.00				\$ 500.00	
Postage/Shipping	Postage expense for client related mailing	\$ 750.00				\$ 750.00	
Equipment Rental	Monthly Equipment rental fee for use of X = \$500 (\$6000 per year). Palm Beach County to cover 50% of this expense (\$3000).	\$ 3,000.00				\$ 3,000.00	
Professional Fees		\$ 2,950.00	\$ 	\$	-	\$ 2,950.00	
Training	Staff training expense for program/medical/intervention training for client support	\$ 1,500.00				\$ 1,500.00	
Travel/Mileage	Program staff mileage reimbursement for client and training related meetings	\$ 1,100.00				\$ 1,100.00	m Beacl
	TOTAL PROGRAM EXPENSES =	\$ 122,300.00	\$ 25,000.00	\$	11,500.00	\$ 158,800.00	ERVI

Budget Template

Administrative Expenses	<u>Narrative</u>						
Personnel		\$	4,250.00	\$ -	\$ -	\$	4,250.00
Executive Position #1 (JL)	A 5% allocation of the Executive Director salary expense (including fringe benefits) will be billed to Palm Beach County . Executive Director total salary expense = \$85,000. 5% allocation to Palm beach County = % \$4,250	\$	4,250.00			\$	4,250.00
Consulting Fees		\$	2,950.00	\$ -	^ \$ -	\$	2,950.00
XYZ Consultants	Accounting and audit expenses for program. Annual Accounting fee = \$950, Annual Audit fee = \$2,000. Total expense = \$2,950	\$	2,950.00			\$	2,950.00
	TOTAL ADMINISTRATIVE EXPENSES =	\$	7,200.00	\$ -	\$ -	\$	7,200.00
Administrative % of PBC Award			6%				
<u>UNIT RATE</u>	Insert Unit Rate Amount: \$350/night						
Please Describe Proposed Unit Rate or							
Bed Night Rate Below. Include Detailed	Unit rate is equal to (insert description); OR Unit Rate is 1 bed	night ar	nd will be \$350. This	was calculated by	determining the	total	number of beds in
Calculations of How Rate Was	the facility (XXX) and maximum occupancy; OR U	Jnit/Bed	d rate is a standard i	rate as determined	by (insert agend	y/fund	der).
Determined							

- Sheet will tally your program and admin expenses and show what your budgeted % is at
- Will allow us to review and discuss with you any items that may be questionable before approving contracts

Palm Beach County

- Narratives should be completed for each item with details about the cost to clarify
- Unit Rate/Bed Rate Descriptions

Completing the FAA Behavioral Health NOFO In WebAuthor

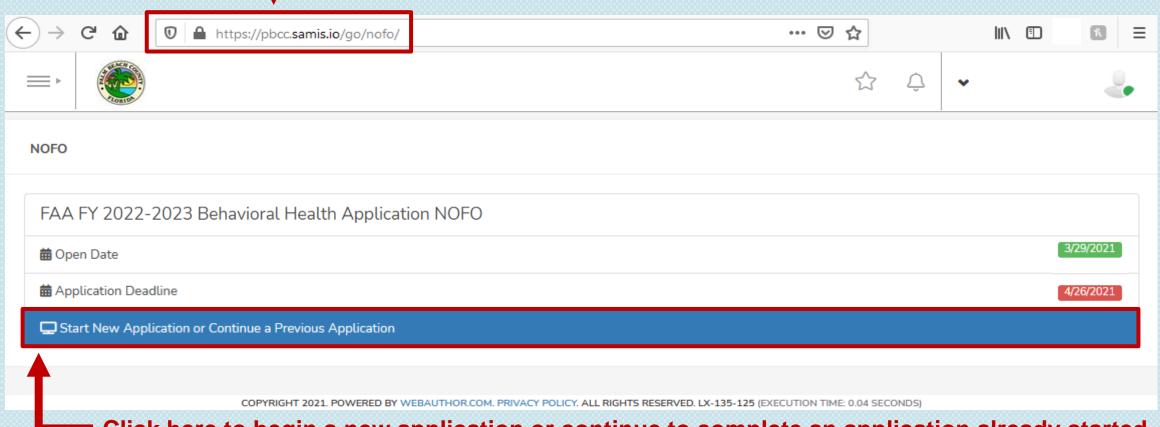
Gillian Moxey, Contract/Grants Coordinator



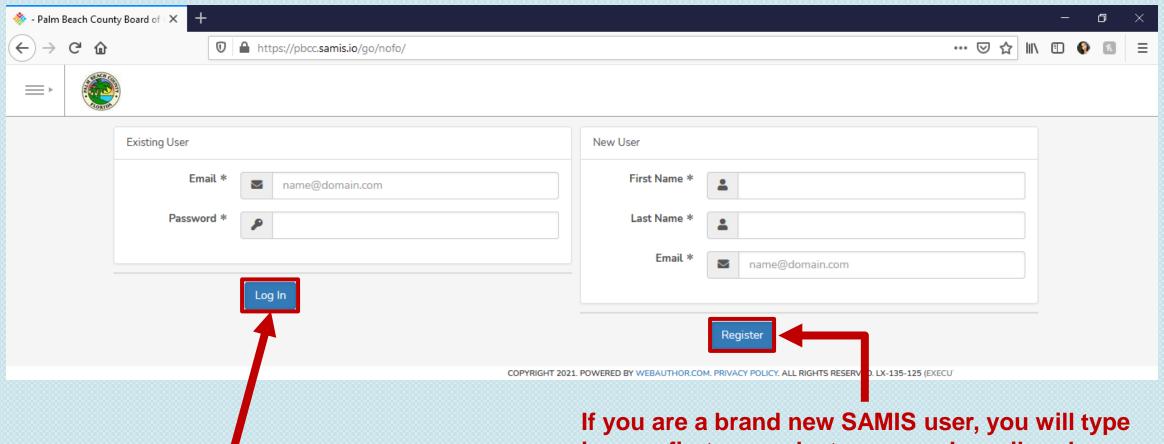
Enter link (https://pbcc.samis.io/go/nofo/) to access NOFO proposal page

↓

Please note there may be other applications on the page so be sure to select the correct application: FAA FY 2022-2023 Behavioral Health Application NOFO

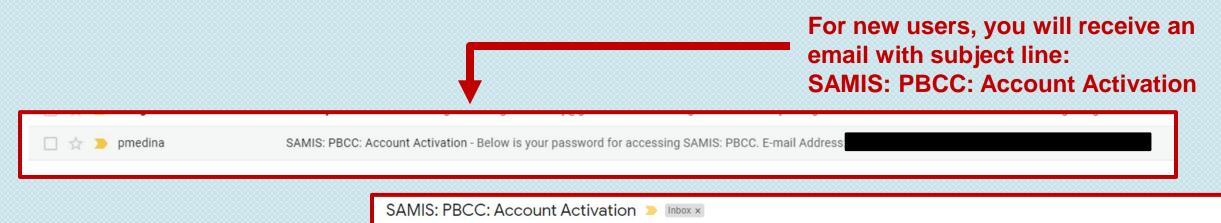


Click here to begin a new application or continue to complete an application already started



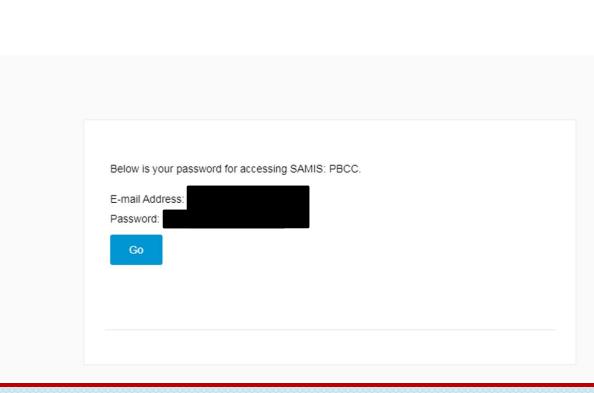
If previously submitted an application through SAMIS, you will use the email and password you created to log in under "Existing User."

If you are a brand new SAMIS user, you will type in your first name, last name and email under "New User" to begin the process for creating an account. By creating an account, you will be able to return to an application you have started and apply for future grants using your previously created account.



pmedina@pbcgov.org via amazonses.com

This email will contain your password to sign into SAMIS to complete the application



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By CLICKING A BOX OR PRESSING A BUTTON INDICATING YOUR ACCEPTANCE YOU AGREE TO THESE TERMS OF USE. IF YOU ARE USING THIS WEB SITE ON BEHALF OF A COMPANY OR OTHER LEGAL ENTITY, YOU REPRESENT THAT YOU HAVE THE AUTHORITY TO BIND SUCH ENTITY TO THESE TERMS OF USE, IN WHICH CASE THE TERMS "YOU" OR "YOUR" SHALL REFER TO SUCH ENTITY AND ITS AFFILIATES. IF YOU DO NOT HAVE SUCH AUTHORITY, OR IF YOU DO NOT UNDERSTAND AND AGREE WITH THESE TERMS OF USE, YOU SHOULD SEEK LEGAL COUNSEL, NOT ACCEPT THE TERMS OF USE, AND NOT USE THE SERVICES.

Populations

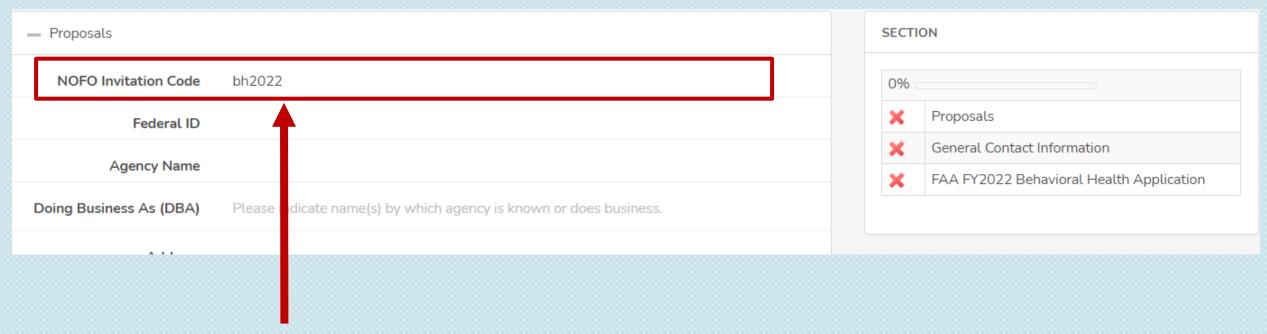
"Affiliate" means, with respect to a party, any entity which directly or indirectly controls, is controlled by, or is under common control with such party.

I Agree

I Do Not Agree



...and to change your password

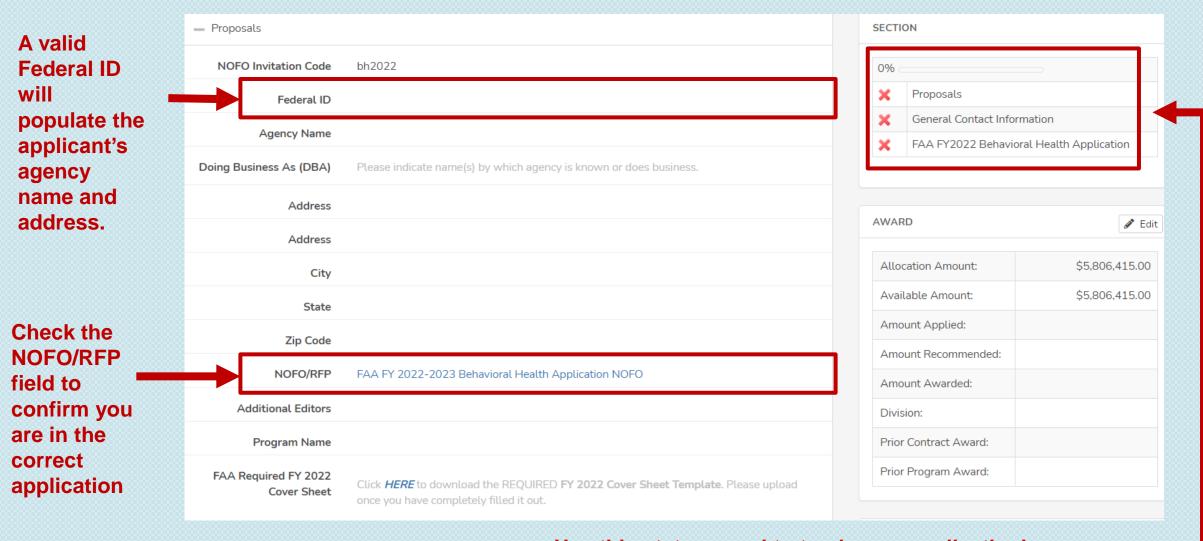


The application will appear once user has signed in.

This NOFO requires an invitation code or password: bh2022

Please insert this password at beginning of the application.

This allows the user to navigate the application, and to return to the application for completion.



Use this status panel to track your application's progress. A green "✓" (checkmark) means the section is completed. A red "X" means the section is not completed.

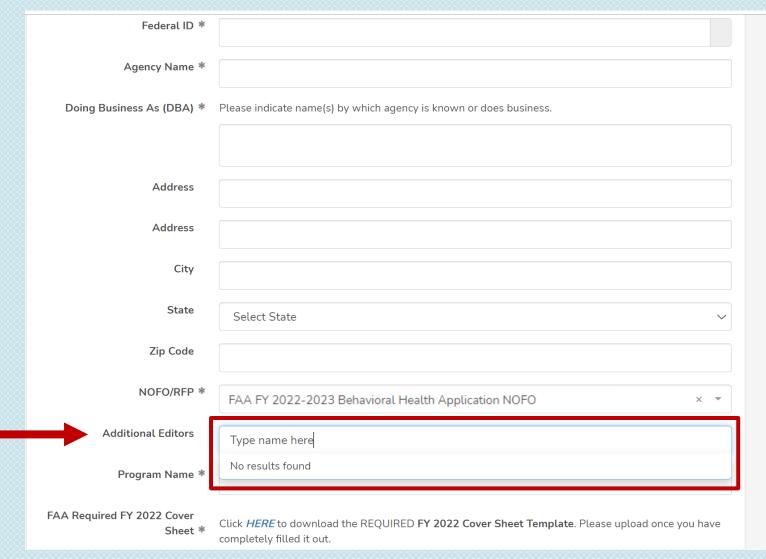
Throughout the application, an "*" (asterisk) next to an item indicates that the field is required.

To add another reviewer/editor to the application, go to the "Additional Editors" field in the first section of the application (first page)

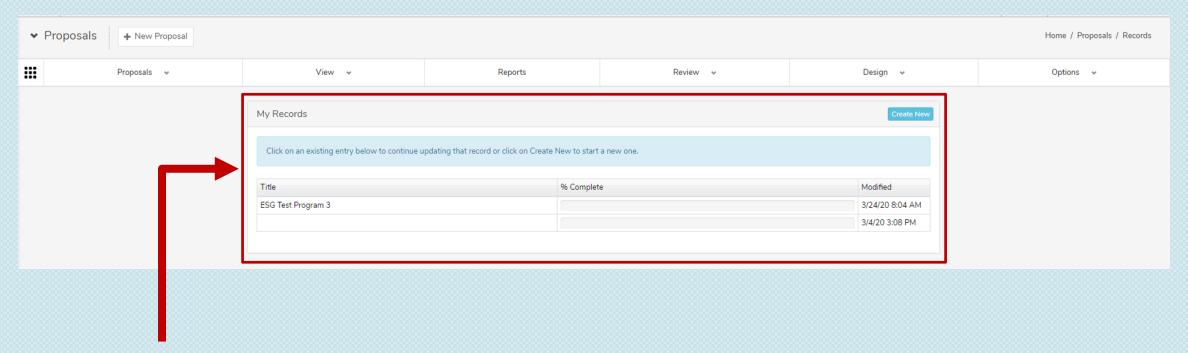
Proposals	
NOFO Invitation Code *	
Troi o invitación codo	bh2022
Federal ID *	
Agency Name *	
Doing Business As (DBA) *	Please indicate name(s) by which agency is known or does business.
Address	
Address	
City	
City	
State	
	Select State
Zip Code	
NOTO (DED. #	
NOFO/RFP *	FAA FY 2022-2023 Behavioral Health Application NOFO × ▼
Additional Editors	
Additional Editors	
Program Name *	
_	

You can select up to two (2) additional editors. Each additional editor must have already registered on the SAMIS system.

Click on the dropdown box to type in the name of the additional reviewer/editor



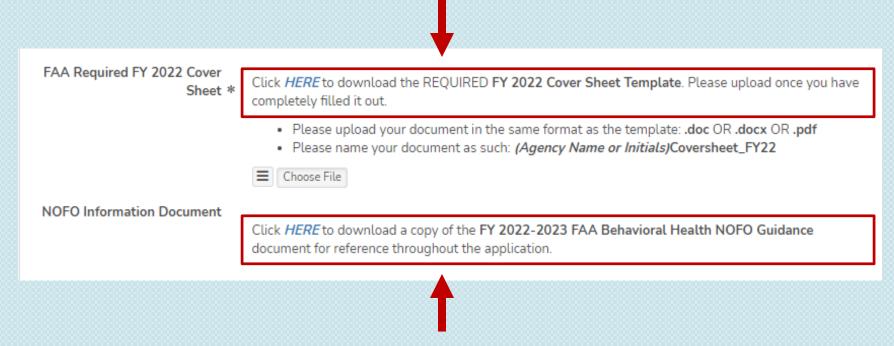
7	
×	General Contact Information
×	I. Homelessness Project Narrative (25 Points)
×	II. Evaluation Approach (15 Points)
×	III. Prior Outcomes and Response to Community Data
×	IV. Data Management (10 Points)
×	V. Partnerships, Resources and Collaboration
×	VI. Budget (20 pts)
×	VII. Scope of Work (No Points)



The application will then appear in the additional reviewer's list of applications.

Throughout the application, there will be several documents that you will be required to download, complete, and re-upload to the application.

Click on the link to preview and download the document. Re-upload the document in the suggested document formats and with the naming convention indicated.



Download the FY 2022-2023 FAA Behavioral Health NOFO Guidance Document for details on the program and reference throughout the application.

FY2022_REQUIRED_COVER_SHEET.DOC Posted 3/16/21 by Gillian Moxey

Click here to download the previewed document, then click 'Back' to return to the application

REQUIRED COVER SHEET



PALM BEACH COUNTY DEPARTMENT OF COMMUNITY SERVICES FINANCIALLY ASSISTED AGENCIES FY 2022

PLEASE RESPOND TO ALL QUESTIONS LISTED BELOW:

(NOTE: This form is formatted using MS Word, Cambria, and 10pt font)

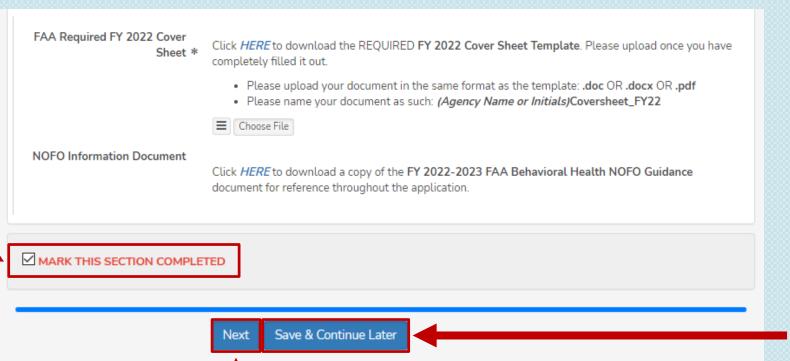
QUESTIONS:	AGENCY RESPONSES:
NAME OF AGENCY:	
SERVICE CATEGORY (identify the service category for which the proposal is being submitted):	
PROGRAM TITLE:	
PRIORITY POPULATION (include the unduplicated number to be served annually):	
GEOGRAPHIC AREA TO BE SERVED:	
COMMISSION DISTRICT(S) TO BE SERVED:	
PROGRAM STATUS (existing or new program):	
PROGRAM START DATE (if new program):	
TOTAL PROGRAM BUDGET:	\$
AMOUNT OF FUNDING REQUEST (how much you are requesting in the proposal):	s
UNIT COST SERVICE DESCRIPTION:	
UNIT COST OF SERVICE:	
IDENTIFY IF AGENCY IS CURRENTLY CERTIFIED BY NONPROFITS FIRST: (Yes or No)	

At the bottom of each section of the application, you will find this checkbox and accompanying text "Mark this Section Completed".

Check the box only after you have completed the section.

You can move between sections if this box is unchecked. The application will default to a checked box.

All boxes at the end of each section will need to be checked in order to submit the application.

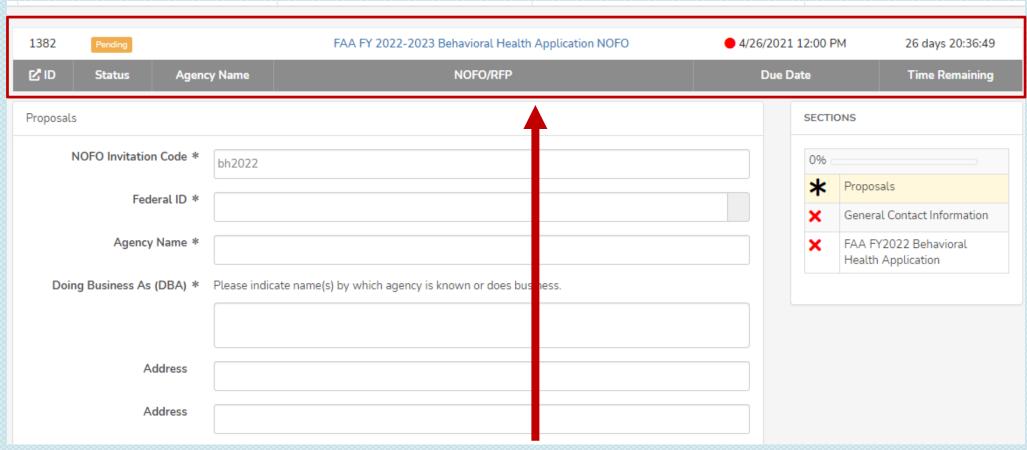


The "Next" button at the end of each section will take you to the next section of the application.

The "Back" button will take you to the previous section.

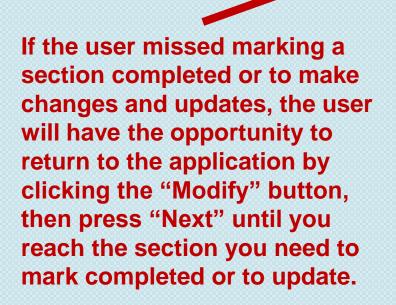
The "Save & Continue Later" button at the end of each section will take you to the application preview/ summary page.

You will be able to save your application there and return to complete the application at a later time.

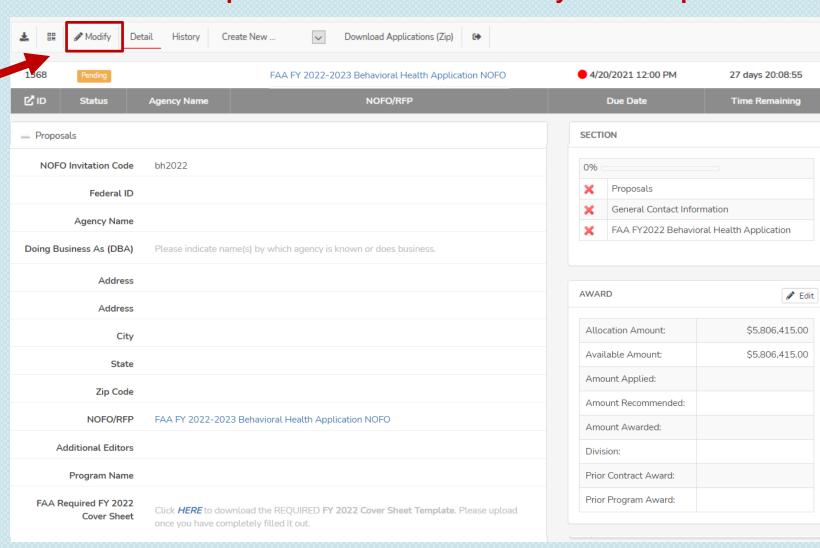


After you have completed the first section of the application, you will see this status bar at the top of each application section which will include your agency name, the name of the proposal, and a countdown to the application deadline date.

Once you have pressed "Save and Continue Later," you will be taken to the summary page, which will show all the sections of the application, as well as the status panel and all the documents you have uploaded.



Click on the "Save and Continue Later" button to return to the summary page.

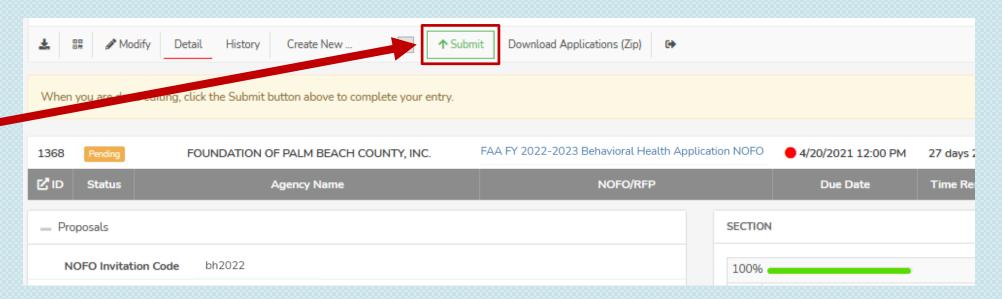


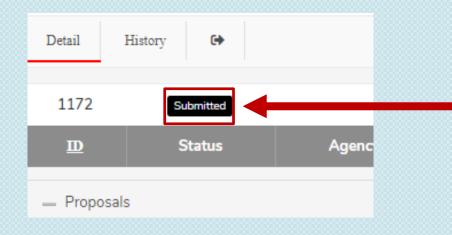
On the summary page, you will have one more opportunity to review your completed application before you submit.

Click on the "Submit" button to submit your application.

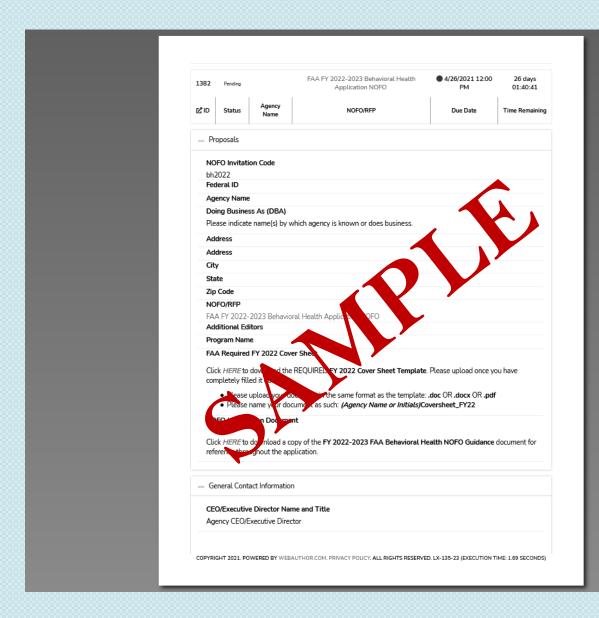
Note:

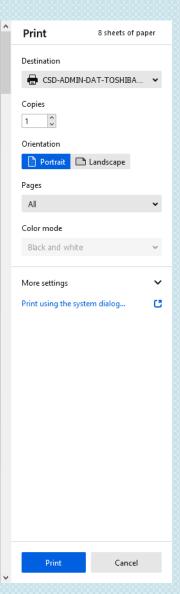
Be sure the application is complete and have the most updated information because changes cannot be made to the application once it has been submitted





When submitted, the application will display a black "Submitted" box on the status bar.





You can print your application for your record by using your browser's system options or by right-clicking your computer mouse and selecting "Print".

QUESTIONS?



Information

bh2022

All questions must be emailed to:

Jreid2NOFO@pbcgov.org

All questions and answers will be posted on the FAA website:
http://discover.pbcgov.org/communityservices/financiallyassisted/
Pages/default.aspx

All proposals must be submitted electronically to:

https://pbcc.samis.io/go/nofo

by

Monday, April 26, 2021 before 12:00PM – NOON

