

REQUEST FOR FUNDING ANNOUNCEMENT-RFF 2022-017  
FOR  
*System of Care Technical Assistance & DMHA Provider Training*

This is a Request for Funding announcement (RFF) issued by the Family and Social Services Administration *Division of Mental Health and Addiction (FSSA/DMHA)*.

This RFF is intended to publicize the availability of Grant opportunities for services described herein. Neither the issuance of this RFF nor the receipt of any responses thereto, shall create any obligation to the State of Indiana to make any award pursuant hereto. The award of any grant(s) as a result of this RFF shall be at the sole discretion of FSSA. Neither this RFF nor any response (“proposal”) submitted hereto are to be construed as a legal offer.

CONFIDENTIAL INFORMATION

Potential respondents are advised that materials contained in proposals are subject to the Indiana Public Records Act, IC 5-14-3 *et seq.*, and after the grant award may be viewed and/or copied by any member of the public, including news agencies and competitors. Potential respondents claiming a statutory exception to the Indiana Public Records Act must place all confidential documents in a sealed envelope clearly marked “Confidential” and must indicate on the outside of their proposal envelope that confidential materials are included and, in their cover letter, specify which statutory exception provision applies. The State reserves the right to make determinations of confidentiality. If the State does not agree that the information designated is confidential under one of the disclosure exceptions to the Public Records Act, it may either reject the proposal or discuss its interpretation of the allowable exceptions with the respondent. If agreement can be reached, the proposal will be considered. If agreement cannot be reached, the State will remove the proposal from consideration for award and return the proposal to the respondent upon request. The State will not determine price to be confidential information.

FUNDING SOURCE & COMPENSATION

Funds for this project have been secured through the FSSA/DMHA appropriations for Child Psychiatric Services. One (1) award will be issued in the amount of \$78,000.

TERMS

This agreement shall be for a period of twelve (12) months with anticipated start date of **November 1, 2022** (or from date of final State approval of grant) and terminating on **October 31, 2023**

## SUBMITTING A PROPOSAL

Applicants interested in providing these services to FSSA/DMHA should submit an electronic proposal to:

### **Tanya Merritt-Mulamba**

Assistant Director of Mental Health & Wellness  
Division of Mental Health & Addiction  
Indiana Family and Social Services Administration  
Email Address: [tanya.merritt-mulamba@fssa.in.gov](mailto:tanya.merritt-mulamba@fssa.in.gov)

- The submission must include:
  1. A letter of application signed by the Director or agency board president
  2. Completed proposal
  3. Budget
  4. All supporting documents & attachments
  5. Most recent audit report made in accordance with OMB circular A-133 if applicable.
- Proposals must be received no later than 4:30 p.m. EST September 8, 2022. Proposals received after 4:30 p.m. will not be considered. Proposals must be delivered in electronic format with all appropriate forms. The subject heading of the email mail should state:

**RESPONSE** to RFF-2022-017 - System of Care Technical Assistance & DMHA  
Provider Training

- No more than one proposal per respondent should be submitted. In the letter of application, you are required to indicate the principal contact for the proposal along with a telephone number and email address
- PDF files are preferred as other formats may not be accessible by state reviewers

## QUESTIONS

Questions regarding this RFF must be submitted in electronic format to:  
Tanya Merritt-Mulamba - [tanya.merritt-mulamba@fssa.in.gov](mailto:tanya.merritt-mulamba@fssa.in.gov)

Questions are to be submitted no later than 4:30 p.m. EST on August 17, 2022. Questions received after 4:30 p.m. may not be considered. Please keep questions brief and of high priority. Please utilize the following subject heading for emails regarding questions:

**QUESTIONS** to RFF-2022-017 - System of Care Technical Assistance & DMHA  
Provider Training

All inquiries are to be directed to Tanya Merritt-Mulamba and are not to be directed to any other staff member of FSSA. Such action may disqualify respondent from further consideration for DMHA grant funding.

PROJECT DESCRIPTION/SCOPE OF WORK

The purpose of this initiative is to provide technical assistance, consultation & training to local SOC networks supported by DMHA.

*Definition of SOC:* A spectrum of effective, community-based services and supports for children and youth with or at risk for mental health or other challenges and their families, that is organized into a coordinated network, builds meaningful partnerships with families and youth, and addresses their cultural and linguistic needs, in order to help them to function better at home, in school, in the community and throughout life.

Some potential areas of training include but are not limited to the following:

- Increasing youth and family engagement in local SOCs
- Promoting shared ownership, responsibility, and accountability of SOC functions across system partners
- Articulating what SOC is to system partners
- Supporting the role of the SOC Coordinator based unique factors and circumstances

In addition to supporting local SOCs the selected entity may also be responsible for providing training to non-SOC networks and to assist DMHA with data collection and analysis projects as requested. The selected entity would be required to participate in regular meetings with DMHA and other approved DMHA vendors to design and plan appropriate trainings, events, and projects.

DMHA intends to fund one (1) entity who will work in collaboration with DMHA and/or other DMHA approved vendors as assigned.

Proposals must include a detailed plan including but not limited to the following:

1. Letter of application from the agency who will serve as the fiscal agent for this contract.
2. Detailed description of entity's understanding of System of Care as defined within this RFF

3. Detailed description of the entity’s involvement in System of Care work
4. Detailed description of entity’s experience providing training and technical assistance to local communities that have various needs and resources.
5. Detailed description of entity’s experiences with data collection and analysis.
6. Staffing plan and description of how entity would structure project. Please be creative in your approach.
7. Proposed budget
8. All supporting documents and attachments

**The time frame is as follows:**

*\*\*Subject to Change\*\**

August 8, 2022	RFF sent to potential applicants
August 17, 2022	RFF questions due
August 24, 2022	Responses due back to applicants
September 8, 2022	RFF proposals due to DMHA
September 15, 2022	Awardees notified
November 1, 2022	Grant effective date

ELIGIBLE APPLICANTS

Entities with proven experience in grass roots and/or community organizing. Preference will be given to entities with experience in social services and System of Care.

SELECTION PROCESS AND CRITERIA

Proposals must be in written format. Proposals will be reviewed and scored by a committee selected by the FSSA/DMHA or designee. Proposal will be evaluated based on the criteria below and final selection of the grant awards will be made by the Division Director or designee.

Specific categories and criteria are:

Written Proposal Scoring Criteria	Points
<p><b>Letter of Support</b>            Letter of support from the agency who will serve as the fiscal agent for this contract and Attachment A</p>	5
<p><b>Description of understanding of SOC</b>            Describe how you organization interprets and understands the definition of System of Care.</p>	25
<p><b>Description of your agency's involvement in SOC</b>            Describe any work and/or involvement your agency has had with SOC</p>	20
<p><b>Description of experience providing training</b>            What experience does your agency have in training groups in grass root and/or community organizing efforts. What other training experience does your entity have.</p>	15
<p><b>Data</b>            Describe the experience your agency has in collecting and analyzing large data sets.</p>	15
<p><b>Staffing Plan</b>            Describe your staffing plan for this project. What role would key individuals have.</p>	10
<p><b>Budget</b>            Please complete the budget form below</p>	10

**ATTACHMENT A**

**RESPONDENT INFORMATION**

1) LEGAL NAME:
2) Doing Business As (if different than legal name):
3) ADDRESS:
County:
4) ELECTRONIC MAIL ADDRESS:
5) TELEPHONE:
6) DIRECTOR NAME/TITLE:
7) CONTACT PERSON:
9) TAXPAYER IDENTIFICATION NUMBER <sup>1</sup> :
10) DUNS Number:
11) Congressional District:

**RESPONDENT FACILITY INFORMATION**

- 1) Type of Facility: Private, Non-Profit, Other
  
- 2) ATTACH Proof of Non-Profit Status - 501(c)(3) CERTIFICATE if applicable

**SIGNATURE OF AUTHORIZED REPRESENTATIVE:**

To the best of my knowledge and belief, the information in this proposal has been duly authorized by the governing body of the applicant.

SIGNATURE:
NAME/TITLE: (Typed)
DATE SIGNED:

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<sup>1</sup> Employer I.D. number or Social Security number, as appropriate, whichever is used for Federal Income Tax purposes.

**Attachment B**

**Budget**

**A. Personnel**

Position	Name	Hourly Rate	Annual Rate	Amount Requested

Provide brief description of job duties:

**B. Fringe Benefits**

Position	Name	Insurance Cost	FICA	Amount Requested

Provide brief description of percentages of costs:

**C. Travel**

Purpose	Destination	Item (Ex: Hotel, flight, per diem)	Cost	Amount Requested

Provide brief description of travel (Ex: conference, workshop, location, dates if known)

**D. Supplies**

Item	Cost	Bases (Ex: monthly, quarterly)	Quantity	Amount Requested

Provide brief description of supplies

**E. Contracts**

Name/Vendor	Duty	Amount Requested

Provide brief description of contractor duties:

Total Amount Requested \$ \_\_\_\_\_