

**Staff Person for Submission:** Ms. Jody Fortenberry

**PowerForm Link:** [https://na3.docusign.net/Member/PowerFormSigning.aspx?](https://na3.docusign.net/Member/PowerFormSigning.aspx?PowerFormId=d55e5c4b-a120-4f37-961e-d07d6e2319d6&env=na3&acct=f03caff0-d8b6-4e91-ba70-c12592a3e516&v=2)

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Mississippi Department of Mental Health

Bureau of Behavioral Health Services

**Compliance and Fidelity Assessor**

Request for Applications

Due Date: **June 9, 2023**

**Please note that all grants are contingent on the funding by the Mississippi State Legislature and/or the Federal Government. The submission of this application to the Department of Mental Health is not a guarantee of funding.**

**The Department of Mental Health, Bureau of Behavioral Health Services/ Division of Peer Recovery and Support is now accepting funding proposals for the state fiscal year 2024. This proposal application is eligible to all Mississippi Department of Mental Health (DMH) certified providers in good standing. However, DMH certification is not a guarantee of funding. All submitted proposals will be evaluated by a panel of reviewers using the posted competitive grant scoring rubric. Not all submitted proposals may be funded, but comprehensive feedback will be provided to all providers, particularly if their application was not funded for the current fiscal year.**

**The funding associated with this grant opportunity is meant to defray a proportion of operational costs for the service.**

**Cash requests will only be signed and processed for payment after the Department of Mental Health has received required data outcomes and/or metrics specific to the respective grant.**

## **Compliance and Fidelity Assessor**

This funding is intended to support compliance and fidelity assessments, reports and/or technical assistance to Department of Mental Health Certified Providers providing peer support and/or recovery support services. Compliance and Fidelity Assessor will utilize *Evaluating Your Program* assessment tools derived from the Illness Management and Recovery Knowledge Informing Transformation (KIT). This KIT is part of a series of Evidence-Based Practices KITs created by the Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services.

*Evaluating Your Program* shows quality assurance team members how to evaluate the effectiveness of your Illness Management and Recovery (IMR) program. It includes the following:

- A Readiness Assessment;
- The Illness Management and Recovery Fidelity Scale;
- The General Organizational Index; and
- Outcome measures that are specific to your program.

All *Evaluating Your Program* assessment tools to be utilized can be found at:

[https://store.samhsa.gov/sites/default/files/d7/priv/evaluatingyourprogram-imr\\_0.pdf](https://store.samhsa.gov/sites/default/files/d7/priv/evaluatingyourprogram-imr_0.pdf)

Resource: Substance Abuse and Mental Health Services Administration. *Illness Management and Recovery: Evaluating Your Program*. HHS Pub. No. SMA-09-4462, Rockville, MD: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services, 2009.

**The Department of Mental Health/Bureau of Behavioral Health Services is now accepting grant applications for state fiscal year 2024 (July 1, 2023 – June 30, 2024).**

**A. Application Guideline Requirements: Please submit the following required forms which can be found in the MS Department of Mental Health's Service Provider Manual.**

1. Proposed Budget Summary Form: 100-1
2. Proposed Budget Personnel Form: 100-2
3. Proposed Budget Line Item Form: 100-3
4. Budget Narrative/Justification
5. Program Narrative (**not to exceed 3 pages**) which addresses B – E.

## **B. Outcome Measures**

### **1. Goals**

- 1) To provide compliance and fidelity assessments, reports and/or technical assistance to Department of Mental Health Certified Providers providing peer support and/or recovery support services.
- 2) To ensure supports and services are truly person-centered.

### **2. Performance Measures**

- Number of agencies in which assessments were performed.

- Report of the outcomes and how each agency compares to state and national percentages. Agency reports due to DMH within 7 working days post interview visit.
- Provide list of providers where technical assistance and training was provided.

### 3. Reporting on Performance Measures

DMH grant recipients must review the performance data they submit to DMH, assess their progress, and use this information to improve the management of their grant. Recipients are also required to report on their progress addressing the goals and objectives identified in the grant. The assessment should be designed to help you determine whether you are achieving the goals, objectives, and outcomes you intend to achieve and whether adjustments need to be made. You will be required to submit a monthly report on the performance measures in your grant when you submit your cash request.

#### C. Specific Requirements:

1. Provide assessments conducted with Department of Mental Health certified providers;
2. Provide technical assistance to DMH Providers to promote quality assurance and effectiveness of the Illness Management and Recovery (IMR) program.
3. Develop and provide assessment reports to providers and DMH.

#### D. Other Guidelines:

1. A maximum funding amount of **\$37,500** per fiscal year may be requested for Compliance and Fidelity Assessor.
2. The Compliance and Fidelity Assessor staff is a **100% salaried position** therefore this is a **COST REIMBURSEMENT** grant, and **no** fee-for-service billing is allowed.
3. Any travel reimbursement listed in the budget cannot exceed the current State of Mississippi mileage reimbursement rate, currently **\$0.585** per mile. Mileage reimbursement rates are located on the Mississippi Department of Finance and Administration website: <https://www.dfa.ms.gov/media/qfplg0td/01012022-mileage-memo.pdf>

4. Indirect/administrative costs listed in the budget cannot exceed 8% of the budget total.
5. Provide a list of staff from the Proposed Budget Personnel Form 100-2 which also provides a portion of their time to other grant funded services, to include the grant funded service, the position the staff holds, and the percentage of time the staff will be providing the other service(s).
6. Agencies that are not able to meet the required goals/objectives of this service funding and are not able to submit timely and accurate data as required by DMH may not be eligible for future funding for this service.

**E. Required Data Report(s):**

1. Reporting will be on a monthly basis to include items a-e:
  - a. List agencies in which assessments were conducted.
  - b. List number of assessments conducted on each visit.
  - c. Provide a report of the outcomes and how each agency compares to state and national percentages. Agency reports due to DMH within 7 working days post interview visit.
  - d. Provide list of providers where technical assistance and training was provided.
2. Reports are due by the 10<sup>th</sup> of the following month to be emailed to the Peer Support Services Project Coordinator and/or Division Director of Peer Recovery & Support.
  - a. A detailed year-end report addressing Item 1 items along with results of findings and how each were remedied is to be composed and submitted by **Friday, July 14, 2024**.



## Compliance and Fidelity Assessor

### Monthly Report

*Due by the 10<sup>th</sup> of the following month*

Agency: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Month/Year: \_\_\_\_\_

DATA COLLECTION	NUMBERS
1. Number of agencies in which assessments were conducted	
2. Number of assessments conducted on each visit	
3. Number of organizations who participated in TA	
4. Number of person(s) who participated in TA	
SIGNATURE OF STAFF	

EFFECTIVE: 9/2/2022