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COOK COUNTY HEALTH (CCH) Open Call # 001

TITLE: Stronger Together: Building a More Equitable Behavioral Health System in Cook County Initiative

GENERAL DESCRIPTION: Stronger Together: Building a More Equitable Behavioral Health System in Cook County Initiative aims to address behavioral health inequities across the region's system of care through increased systems alignment, enhanced system quality, and the expansion of access to early intervention and prevention, treatment, support, recovery, and crisis assessment and care. This initiative, led by the Office of Behavioral Health at Cook County Health (CCH) is supported by funds from the U.S. Department of Treasury, under the American Rescue Plan Act (ARPA).

DATE ISSUED: Wednesday, March 6, 2024

APPLICANT QUESTIONS DUE DATE: All questions must be received by 12:00 PM CT on Wednesday, April 10, 2024. Responses to questions will be added to a Frequently Asked Questions (FAQs) with updated versions posted at <https://cookcountyhealth.org/strongertogether> on the Cook County Health website (see schedule below).

Questions received by:

Wednesday, March 13, 2024, 12 PM CT
Wednesday, March 20, 2024, 12 PM CT
Wednesday, March 27, 2024, 12 PM CT
Wednesday, April 3, 2024, 12 PM CT
Wednesday, April 10, 2024, 12 PM CT

Updated FAQ posted by:

Friday, March 15, 2024, 5 PM CT
Friday, March 22, 2024, 5 PM CT
Friday, March 29, 2024, 5 PM CT
Friday, April 5, 2024, 5 PM CT
Friday, April 12, 2024, 5 PM CT

PROPOSAL DUE DATE: Wednesday, April 17th, 2024, no later than 5:00 PM CT. Proposals must be submitted at <https://cookcountygrants.my.site.com/apex/AnnouncementView?id=a2S3d00000wXrWEAU>.

INFORMATION SESSION: Virtual sessions will be held Friday, March 8th from 12 pm – 1 pm and Wednesday, March 13th from 12 PM – 1 PM. The recordings and meeting links are on the Stronger Together Open Call website at <https://cookcountyhealth.org/strongertogether>.

OPTIONAL CAPACITY BUILDING WORKSHOPS: Optional virtual capacity building workshops will be held to support organizations, especially smaller ones with less grant experience, as they develop compelling grant proposals and programs. Workshops will be facilitated by Cook County partner Guidehouse on behalf of the Office of Behavioral Health. Workshops are open to public and will be recorded and uploaded to the Stronger Together Open Call webpage. The recordings and meeting links are on the Stronger Together Open Call website at <https://cookcountyhealth.org/strongertogether>. The schedule of trainings is below:

Grant Application	Wednesday, March 20 th and Friday, March 22 nd , 12 PM CT
Program Design	Wednesday, March 27 th and Friday, March 29 th , 12 PM CT
Monitoring, Reporting, & Legal Agreements	Wednesday, April 3 rd and Friday, April 5 th , 12 PM CT

QUESTIONS: All questions regarding this Open Call should be emailed to StrongerTogetherOpenCall@cookcountyhhs.org

The Stronger Together Open Call and related Addenda will be posted at <https://cookcountyhealth.org/strongertogether>.

Stronger Together: Building a More Equitable Behavioral Health System

Open Call #001

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List of Attachments

The following Appendices are included electronically to this Open Call. Applicants may access them by 1) downloading on the <https://cookcountyhealth.org/strongertogether> and saving them to a local drive to complete.

- Appendix A: Application (Fillable Word Doc Form)
- Appendix B: Work Plan Template
- Appendix C: Budget Preparation Guidelines and Budget Narrative

Section 1. Open Call At-A-Glance

Stronger Together: Building a More Equitable Behavioral Health System in Cook County Initiative seeks to resolve behavioral health inequities across the region's system of care through increased systems alignment, enhanced system quality, and the expansion of access to early intervention and prevention, treatment, support, recovery, and crisis assessment and care. This initiative, led by the Office of Behavioral Health at CCH is supported by funds from the U.S. Department of Treasury, under the American Rescue Plan Act (ARPA).

1.1 Eligibility

Proposed projects must take place and impact communities **within Cook County**. In general, the following are eligible to receive funding as part of this Open Call.

- **Faith-based Organizations**, defined as an organization whose values are based on faith and beliefs, which has a mission based on social values of the particular faith, including Churches, synagogues, temples, monasteries, mosques, and other houses of worship
- **Federally Qualified Health Centers (FQHC)**, defined as federally funded nonprofit health centers or clinics that serve medically underserved areas and populations
- **Community Health Centers**, including free clinics, FQHC "lookalikes," Independent Practice Associations (IPAs), mental health centers, and opioid treatment programs (OTPs)
- **Community-based organizations (CBOs)**, defined as 501(c)(3) non-profit organizations that have demonstrated service delivery to specific populations and/or community areas
- **Education agencies**, including Regional Offices of Education, K-12 public school districts, K-12 public and private schools, and higher education institutions

It is important to note that eligibility differs by each strategy identified on the Menu of Options.

Award recipients must have the organizational, fiscal, and contracting capacity to conduct the work described in this Open Call and have the accounting and administrative controls necessary to effectively manage a grant. Requirements include financial stability, fiscal solvency, ability to provide separate reporting for use of funds, and staff to oversee the scope of work and comply with the agreement.

1.2 Use and Availability of Funding

The goal of this funding opportunity is to build a more equitable behavioral health system across Cook County through increased systems alignment, enhanced system quality, and the expansion of access to early intervention and prevention, treatment, support, recovery, and crisis assessment and care.

Eligible applicants may choose to apply to one or more of the strategies listed in the 11.1 Menu of Options within the Open Call. However, applicants will only be eligible to be the primary award recipient for one strategy. A total of over \$44 million is available, and each award recipient may receive a funding amount between \$500,000 and \$1,000,000 over a 26/27-month period.

1.3 Information Sessions: Friday, March 8th and Wednesday, March 13th,

The Office of Behavioral Health will conduct virtual Information Sessions on Friday, March 8th from 12-1 PM and Wednesday, March 13th from 12-1 PM. The Office of Behavioral Health strongly encourages potential applicants to attend one session to have the chance to find out more about this funding opportunity. A recording of the session will be made available on the Cook County Health's website at <https://cookcountyhealth.org/strongertogether>.

1.4 Optional Capacity Building Workshops

The Office of Behavioral Health partner, Guidehouse, will conduct optional virtual capacity building workshops regarding how to develop compelling grant proposals and programs. Recordings of the workshops will be available on the Stronger Together Open Call website at <https://cookcountyhealth.org/strongertogether>. The schedule for the workshops is below.

Grant Application	Wednesday, March 20 th and Friday, March 22 nd , 12 PM CT
Program Design	Wednesday, March 27 th and Friday, March 29 th , 12 PM CT
Monitoring, Reporting, & Legal Agreements	Wednesday, April 3 rd and Friday, April 5 th , 12 PM CT

1.5 Proposal: Deadline – Wednesday, April 17th, 2024

Proposals must be submitted by Wednesday, April 17th, 2024, at

<https://cookcountygrants.my.site.com/apex/AnnouncementView?id=a2S3d000000wXrWEAU> no later than 5 PM CT.

You will find the fillable application in Appendix A, the work plan template in Appendix B, the budget preparation guidelines and budget narrative template in Appendix C.

1.6 Initial Award Notification and Project Period

Applicants will be notified of funding status the week of June 3, 2024. The project period is for 26/27 months, beginning September 2024, and ending November 30, 2026, unless otherwise stated.

1.7 Project Administration Schedule

Recipients should be prepared to begin project work as soon as possible after notification of award, initial meeting with all award recipients, and execution of an agreement. The Office of Behavioral Health at CCH will administer all projects through subrecipient agreements. Recipients can seek an advancement between 25% to 50% of the estimated budget per fiscal year, multiple times a year once the agreement is executed and the P.O. is established. Additionally, any remaining funds can be disbursed on a reimbursement basis. All project expenditures must be made by November 30, 2026, and final invoices submitted for reimbursement by December 16, 2026 (unless otherwise stated).

1.8 General Guidelines for Applicants & Summary Agreement Terms and Conditions

Award recipients will be bound by the requirements set forth in the Open Call, the General Guidelines for Applicants, the Agreement terms, and conditions should the proposal be accepted, and an Agreement offered by the Office of Behavioral Health at CCH. Applicants may also download and view the full Agreement template on the Stronger Together Open Call's webpage at <https://cookcountyhealth.org/strongertogether>.

1.9 Questions

You may ask send questions via email to StrongerTogetherOpenCall@cookcountyhhs.org. Questions and their respective responses will be added to a list of Frequently Asked Questions (FAQs) with updated versions posted on the Stronger Together Open Call's webpage at <https://cookcountyhealth.org/strongertogether> on the following Fridays: March 15, March 22, March 29, April 5, and April 12. All questions must be received by 12 p.m. CT on Wednesday, April 10, 2024.

To download any Open Call-related documents, including the FAQs, please visit <https://cookcountyhealth.org/strongertogether>.

Section 2. Important Dates

March 6, 2024	Open Call is released.
March 8 and March 13, 2024	Information sessions will be held for interested organizations to learn more about the Open Call.
March 20, March 22, March 27, March 29, April 3, and April 5, 2024	Optional virtual capacity building workshops will be held regarding the grant application, program design, monitoring and reporting, and legal agreements. Recordings of the workshops will be made available.
April 17, 2024	Deadline for proposals
June 2024	Notification of awards
June – August 2024	Solidify scope(s) of work and budget(s) for agreements. Completion of Cook County Risk Assessment and supporting materials.
July- August 2024	Anticipated presentation of awards over \$1,000,000 to Cook County Board of Commissioners for approval.
September 2024	Agreements are processed and executed & project period begins.

Section 3. Information Sessions – March 8 and March 13, 2024

The Office of Behavioral Health at Cook County Health will conduct virtual Information Sessions on Friday, March 8 and Wednesday, March 13. Both sessions will present the same information. The Office of Behavioral Health strongly encourages potential applicants to attend one session to have the chance to find out more about this funding opportunity.

Links to the virtual Information Sessions can be found on the Stronger Together Open Call's webpage at <https://cookcountyhealth.org/strongertogether>.

Information Session 1

Friday, March 8, 2024
12- 1 PM CT

Information Session 2

Wednesday, March 13, 2024
12-1 PM CT

Recordings of both sessions will be available on the Stronger Together Open Call's webpage at <https://cookcountyhealth.org/strongertogether>, and all questions asked during the sessions will be included in the FAQs posted on Friday, March 15, 2024 by 12 PM CT.

Section 4. Optional Capacity Building Workshops – March 20, March 22, March 27, March 29, April 3, and April 5, 2024

The Office of Behavioral Health partner, Guidehouse, will conduct optional virtual capacity building workshops covering Grant Applications (March 20 and March 22), Program Design (March 27 and March 29), and Monitoring, Reporting & Legal Agreements (April 3 and April 5). Both date and time options for each workshop will cover the same content. For example, the Grant Applications workshop on March 22nd will cover the same content from the Grant Applications workshop on March 20th.

Links to the virtual capacity building workshops can be found on the Stronger Together Open Call's webpage at <https://cookcountyhealth.org/strongertogether>.

Recordings of the workshops will be available on the Stronger Together Open Call's webpage at <https://cookcountyhealth.org/strongertogether>. The schedule for the workshops is below.

Grant Application Workshop

Wednesday, March 20th at 12 PM CT **and** Friday, March 22nd at 12 PM CT

Program Design Workshop

Wednesday, March 27th at 12 PM CT **and** Friday, March 29th at 12 PM CT

Monitoring, Reporting & Legal Agreements Workshop

Wednesday, April 3rd at 12 PM CT **and** Friday, April 5th at 12 PM CT

Section 5. Background

The Cook County Health Office of Behavioral Health (OBH) was created to bolster mental health services and improve the behavioral health ecosystem within Cook County Health and throughout the county through the support of the Cook County Board President's Office and Board of Commissioners and ARPA funding.

The Office of Behavioral Health's Impact Fund and community initiatives are committed to building resilient communities that can adapt, recover, and thrive in the midst of life's challenges through innovative and integrated solutions that bridge gaps in prevention, treatment, and support for mental health and substance use.

Stronger Together: Building a More Equitable Behavioral Health System in Cook County Initiative aims to address behavioral health inequities across the region's system of care through increased systems alignment, enhanced system quality, and the expansion of access to early intervention and prevention, treatment, support, recovery, and crisis assessment and care. This opportunity is intended to fund community health centers, community-based organizations (CBOs), education agencies, faith-based organizations, and federally qualified health centers (FQHCs) serving Cook County.

Supported by funds from the U.S. Department of Treasury, under the American Rescue Plan Act, the Office of Behavioral Health at Cook County Health will award over \$44 million in grants over a 26/27-month grant period to:

- Advance the behavioral health of Cook County's youth and families by supporting the development, maintenance, or expansion of programs and services that increase availability and access to early intervention, wraparound services, and trauma informed care, and/or address health-related social needs.
- Improve screening and integrated care support through the development, maintenance, or expansion of existing programs and services that improve access and overall effectiveness of coordinated screening and early intervention care for adults and older adults with mild to moderate acuity and/or substance use disorder services.
- Increase access and coordination to treatment, recovery, and support services for youth and families AND adults and older adults by supporting the development, maintenance, or expansion of existing programs and services that increase access and coordination to a full continuum of age-appropriate trauma-informed, culturally competent, linguistically responsive prevention, treatment, and recovery services.
- Amplify community awareness and engagement of "Somewhere to Call" and "Someone to Respond" by supporting the development, maintenance, or expansion of existing programs and services that increase communities' awareness and engagement with someone to call and someone to respond and increase access and coordination of care to provide the right response to the person in need.

- Build up the “Somewhere to Go” for youth and families AND adults and older adults in the crisis response system by supporting the development, maintenance, or expansion of existing support the development, maintenance, or expansion of existing age-appropriate programs and services that increase community awareness and engagement and work to move crisis care from emergency departments to safe and appropriate place to go.

Section 6. Applicant Eligibility Criteria

Proposed projects must take place and impact communities within Cook County. In general, the following are eligible to receive funding as part of this Open Call.

- **Faith-based Organizations**, defined as an organization whose values are based on faith and beliefs, which has a mission based on social values of the particular faith, including Churches, synagogues, temples, monasteries, mosques, and other houses of worship
- **Federally Qualified Health Centers (FQHC)**, defined as federally funded nonprofit health centers or clinics that serve medically underserved areas and populations
- **Community Health Centers**, including free clinics, FQHC “lookalikes,” Independent Practice Associations (IPAs), mental health centers, and opioid treatment programs (OTPs)
- **Community-based organizations (CBOs)**, defined as 501(c)(3) non-profit organizations that have demonstrated service delivery to specific populations and/or community areas
- **Education agencies**, including Regional Offices of Education, K-12 public school districts, K-12 public and private schools, and higher education institutions

Strategies include programming and service delivery, as well as policy, and systems improvements, driven by an understanding of, or directed by, community voice. Collaborations and partnerships between organizations are strongly encouraged.

Award recipients must have the organizational capacity to conduct the work described in this Open Call and have the fiscal and contracting capacity, as well as the accounting and administrative controls necessary to effectively manage a grant. Requirements include financial stability, fiscal solvency, ability to provide separate reporting for use of funds, and staff to oversee the scope of work and comply with the agreement.

Section 7. Key Application Concepts and Priorities

Each applicant should keep the following areas of emphasis in mind when preparing their proposal.

Advancing Racial and Health Equity

This initiative strives to ensure every individual in Cook County has equal access to quality services in a continuum of care that promotes prevention and early intervention, crisis intervention, recovery, and support, including health-related social needs. Additionally, funding is expected to be directed primarily to priority communities and populations outlined in Section 10. Priority Populations and Communities. Applicants should ensure consideration of additional barriers they face.

Cultivating Inclusion

The Office of Behavioral Health recognizes and celebrates the diverse communities it serves and is committed to building culturally humbled, linguistically responsive prevention, treatment, recovery, and crisis care and supports for all Cook County residents. Applicants should describe how their proposals will cultivate and promote inclusion in their proposed work.

Fostering Collaborations and Authentic Community Engagement

Collaborations and partnerships will maximize a proposal's impact. Coordination among multiple entities within a single community and/or across multiple communities are acceptable. Partnerships among grassroots organizations and community residents are strongly encouraged.

Engagement with priority populations (

Section 10. Priority Populations and Communities) in the proposal will ensure that people most affected by inequities, contribute to the development and implementation of their programs.

Applicants should highlight existing partnerships that can be leveraged, and how their existing programs and services are grounded in or driven by an understanding of the people they serve, data, and best practices.

Applicants should also describe their ability to reach priority communities and/or populations targeted for the specific strategy. If an applicant proposes to implement a program or provide services, they should demonstrate experience in reaching priority communities and/or populations with positive outcomes. Commitment and buy-in of leadership within the organization and with partners is crucial for implementation and long-term sustainability of efforts through this program.

Enhance Systems Alignment

For Cook County to have an equitable behavioral health system that meets the needs of all its residents, there needs to be better coordination, integration, and alignment across the continuum of care. Applicants should identify how their proposed work within the behavioral health system to address an unmet need(s), integrate within the behavioral health system and enhance overall systems alignment.

Promoting Evidence-based, Evidence-Informed and Innovative Care Models

This initiative promotes new or enhanced evidence-based, evidence-informed, and innovative models of care including new and emerging treatment modalities and innovative approaches to prevention, treatment, support, recovery, and care. Applicants should demonstrate how the potential of their proposed evidence-based, evidence-informed, and/or innovative work could achieve impact.

Section 8. Benefits to Award Recipients

Award recipients may be awarded funding between \$500,000 - \$1,000,000 over a 26/27-month period between September 2024 – November 30, 2026 (unless otherwise stated) to advance proposed strategies. Over \$44 million is available.

8.1 During the Grant Period

Benefits during the grant period include:

- **Technical Assistance:** Award recipients will have the opportunity to receive tailored technical assistance (TA) from the Office of Behavioral Health at Cook County Health staff who can help plan and implement strategies.
- **Performance Monitoring and Evaluation Data:** Award recipients will be tracking and submitting monthly information on their respective activities and outputs. This data can be used in real time for quality improvement, to broaden and deepen impact, and to showcase success stories to garner more support and resources. (See Section 16. Summary of Agreement Terms and Conditions)

8.2 Beyond the Grant Period

Benefits beyond the grant period include:

- Increased organizational capacity to sustain or expand community health initiatives.
- New partnerships to collaborate on future projects and funding opportunities.
- An ongoing, bi-directional relationship with the Office of Behavioral Health at Cook County Health.

Section 9. Use and Availability of Funding

Overall, the goal of this funding opportunity is to continue to resolve behavioral health inequities across the region's system of care through increased systems alignment, enhanced system quality, and the expansion of access to early

intervention and prevention, treatment, support, recovery, and crisis assessment and care.

9.1 Total Funding and Award Amounts

Over \$44 million is available for community agreements. Eligible organizations can apply for funding between \$500,000 and \$1,000,000 total over a 26/27-month period. More details are provided as part of the Program Description section (See 11.1 Menu of Options).

If selected, the agreement will be made at an amount that aligns with the scope of work and reach. Each organization may receive an advancement of 25% to 50% of the approved fiscal year budget upon execution of the agreement and establishment of a P.O. and approval from the Cook County Government. The advancement and determination, as well as the exact amount will be determined on a case-by-case basis.

9.2 Size of Funding Amount

Funding amounts will vary based on several factors including, but not limited to:

- 9.2.1 Demonstrated need in the defined project area
- 9.2.2 Scope of work, including the number of priority populations or communities reached, resources being offered, partners involved and related activities to implement the programs or services
- 9.2.3 Total number of people impacted by the work

9.3 Use of Funds

In general, budgets must reflect the scope of work proposed and justified. Funding must be used to implement strategies identified in the Menu of Options. Funding may be used for:

- 9.3.1 **Salary & Wages:** Include staff time supporting program activities. This may include percent time of existing staff or salaries of new staff.
- 9.3.2 **Fringe Benefits:** Include costs of leave, employee insurance, pensions, unemployment benefit plans, etc. Should be based on actual costs or an established formula.
- 9.3.3 **Consultant Costs:** Include costs related to hiring an individual who will give professional advice or services (e.g., training, expert consultant, etc.) for a fee. This individual is not and cannot be an employee of the organization.
- 9.3.4 **Equipment:** Include costs of any item of property that has a per unit acquisition cost of \$5,000 or more and has an expected service life of more than one year.
- 9.3.5 **Supplies:** Include costs for supplies that support program activities (e.g., computers, printers, computer software and applications, educational materials, naloxone, fentanyl test strips, and general office supplies).
- 9.3.6 **Local Travel:** Include costs for local travel during project period if this is applicable to your respective strategy. Travel mileage reimbursement rate is \$.625 per mile.
- 9.3.7 **Other:** Include costs associated with your activities not covered in other categories (i.e., stipends and incentives).
- 9.3.8 **Contractual Costs:** Include costs for: 1) work performed by an independent contractor requiring specialized knowledge, experience, expertise, or similar capabilities. 2) purchase of a product or service to be procured by contract and an estimate of cost.
- 9.3.9 **Indirect costs:** Capped at 10% of direct costs.

Guidelines and budget worksheets for each funding source are available in Appendix C to support budget preparation. A budget will need to be developed for each funding source in which strategies are selected.

9.4 Funding Restrictions

Funds may not be used as matching funds for any other grant program, or for:

- 9.4.1 Political or religious purposes

- 9.4.2 Contributions or donations
- 9.4.3 Fundraising or legislative lobbying expenses
- 9.4.4 Conference registration fees
- 9.4.5 Payment of bad or non-program related debts, fines, or penalties
- 9.4.6 Contribution to a contingency fund or provision for unforeseen events
- 9.4.7 Food or beverages, including alcoholic beverages
- 9.4.8 Membership fees, interest or financial payments, or other fines or penalties
- 9.4.9 Purpose or improvement of land or purchase, improvement, or construction of a building
- 9.4.10 Expenditures that may create conflict of interest or the perception of impropriety
- 9.4.11 Exhibit fees of any kind
- 9.4.12 Airfare
- 9.4.13 Out of state travel costs
- 9.4.14 Bonus pay
- 9.4.15 Cash assistance
- 9.4.16 Research
- 9.4.17 Reimbursement for pre-award costs

Use of funds for prohibited purposes may result in loss of community contract and/or place the community contractor at risk for recouping those funds used for the prohibited purposes.

Section 10. Priority Populations and Communities

Populations who have been made more vulnerable, are at higher risk or harder to reach include:

- Racial and ethnic minorities, African American, Hispanic/Latinx, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color
- Individuals with behavioral health challenges
- Individuals who are educationally disadvantaged
- Immigrants, refugees, and undocumented individuals
- Individuals who are housing insecure
- Individuals experiencing trauma, violence, and/or abuse
- Individuals with limited or no English proficiency
- Individuals with disabilities
- Low income or low wage workers
- Individuals who are uninsured, underinsured, or have limited healthcare access
- Individuals who are justice-involved
- Individuals with low technical literacy
- Older persons (65 and older), especially those with chronic conditions
- Persons adversely impacted by persistent poverty or inequality
- Sexual and gender minorities
- Youth especially those who are economically disadvantaged

Other populations with strong justification will be considered for funding.

Priority communities include Cook County communities across the region with the highest [Social Vulnerability Index \(SVI\)](#).

- | | | |
|---------------------|--------------------------|-------------------------|
| • Albany Park | • East Garfield Park | • Oakland |
| • Archer Heights | • Elgin | • Oak Lawn |
| • Armour Square | • Englewood | • Park Forest |
| • Auburn Gresham | • Franklin Park | • Phoenix |
| • Austin | • Fuller Park | • Prospect Heights |
| • Avalon Park | • Gage Park | • Riverdale |
| • Bellwood | • Grand Boulevard | • Robbins |
| • Belmont | • Greater Grand Crossing | • Rogers Park |
| • Bensenville | • Hanover Park | • Roseland |
| • Berwyn | • Harvey | • Sauk Village |
| • Blue Island | • Hazel Crest | • South Chicago |
| • Bridgeview | • Hegewisch | • South Chicago Heights |
| • Burbank | • Hermosa | • South Deering |
| • Burnside | • Hillside | • South Lawndale |
| • Brighton Park | • Hodgkins | • South Shore |
| • Calumet City | • Humboldt Park | • Stone Park |
| • Calumet Park | • Justice | • Summit |
| • Cicero | • Lower West Side | • Washington Park |
| • Chatham | • Markham | • West Elsdon |
| • Chicago Heights | • Maywood | • West Englewood |
| • Chicago Lawn | • McKinley Park | • West Garfield Park |
| • Chicago Ridge | • Melrose Park | • West Lawn |
| • Craigan | • Montclare | • West Pullman |
| • Crestwood | • New City | • West Ridge |
| • Des Plaines | • Niles | • Wheeling |
| • Dixmoor | • Northlake | • Woodlawn |
| • Dolton | • North Park | |
| • Douglas East Side | • North Lawndale | |

Section 11. Program Description

Stronger Together: Building a More Equitable Behavioral Health System in Cook County Initiative seeks to resolve behavioral health inequities across the region's system of care through increased systems alignment, enhanced system quality, and the expansion of access to early intervention and prevention, treatment, support, recovery, and crisis assessment and care. This opportunity is intended to fund community health centers, community-based organizations (CBOs), education agencies, faith-based organizations, and federally qualified health centers (FQHCs) serving Cook County.

Over \$44 million will be awarded to successful applicants who have the commitment and ability to implement one or more strategies listed in the Menu of Options below within a 26/27-month period, September 2024 – November 30, 2026 (unless otherwise stated).

This Open Call is supported by the American Rescue Plan Act, Coronavirus State and Local Fiscal Recovery Funds. On March 11, 2021, President Biden signed into law the \$1.9 trillion American Rescue Plan Act (ARPA) package and established the Coronavirus State and Local Fiscal Recovery Funds (SLFRF) program. The SLFRF program provides support to State, territorial, local, and Tribal governments responding to the economic and public health impacts of COVID-19.

11.1 Menu of Options

The Menu of Options are described below and include who is eligible, and an estimated funding amount for each strategy. **Eligible applicants may apply for more than one strategy but will only be eligible to be awarded as a primary grantee on one strategy.**

Strategies	Description & Examples (where possible)	Eligible Applicant	Est. Funding
I. Prevention and Early Intervention- Youth & Family - Meeting the Behavioral Health and Health-Related Social Needs of Students and Families Inside and Outside of Schools	Schools and communities provide critical settings where youth can receive behavioral health and health-related social needs resources to support their social and emotional development. Funding will support the development, maintenance, or expansion of existing programs and services to promote early intervention, wraparound services, and trauma informed care, and/or address health-related social needs. This may include but are not limited to programs and services in schools, health centers, and community-based organizations that increase the availability and access to screening tools and assessments, coordinated referral and care, prevention, treatment and supports including, community-based treatment, group therapy, and counseling options, and/or initiatives that address upstream drivers of behavioral health and community trauma, including housing, transportation, and other wrap-around services for youth and families.	<ul style="list-style-type: none">• Community Health Center• Community-based Organization• Education Agency• Faith Based Organization• Federally Qualified Health Center	<p>Track 1 – Awards up to \$500,000</p> <p>Track 2 – Awards up to \$1,000,000</p>

Strategies	Description & Examples (where possible)	Eligible Applicant	Est. Funding
II. Early Intervention- Adults & Older Adults - Improving Screening and Integrated Care	Primary care and other nontraditional behavioral healthcare settings have implemented the use brief screening tools to support the identification of mental health and substance use disorder symptoms and risk factors. Evidence supports that screening and early intervention approaches are effective ways to manage behavioral health concerns and improve the overall healthcare experience of individuals and families. Community health centers, behavioral health centers, and other healthcare providers are essential to identify behavioral health concerns and initiate treatment for adults and older adults. Funding will support the development, maintenance, or expansion of existing programs and services that improve access and overall effectiveness of coordinated screening and early intervention care for adults and older adults with mild to moderate acuity and/or substance use disorder services. This may include but are not limited to programs and services that increase the availability and access to coordinated, and collaborative early intervention care, trauma-informed, support, and wrap-around services.	<ul style="list-style-type: none"> • Community Health Center • Community-based Organization • Education Agency • Faith Based Organization • Federally Qualified Health Center 	<p>Track 1 – Awards up to \$500,000</p> <p>Track 2 – Awards up to \$1,000,000</p>
III. Treatment, Recovery, and Support Services- Youth & Family - Increasing Access and Coordinated Care	The demand for mental health and substance use services for youth and families has significantly increased in recent years in Cook County. Both locally and nationally, there has been significant increases in the number of youth experiencing moderate to severe anxiety and depression, mental health emergencies, and suicide. While gaps in access to mental health and substance use treatment, recovery, and support services persist across the socioeconomic status, there are significant disparities for BIPOC (Black, Indigenous, and People of Color) youth, LGBTQIA+ youth, and limited-English proficient youth and families. Funding will support the development, maintenance, or expansion of existing programs and services that increase access to a full continuum of prevention, treatment, and recovery services for youth and families. This may include but are not limited to programs and services that provide coordinated, trauma-informed, culturally humbled, linguistically responsive behavioral health and substance use programs that meet youth and families where they are at both in the schools and the community.	<ul style="list-style-type: none"> • Community Health Center • Community-based Organization • Education Agency • Faith Based Organization • Federally Qualified Health Center 	<p>Track 1 – Awards up to \$500,000</p> <p>Track 2 – Awards up to \$1,000,000</p>

Strategies	Description & Examples (where possible)	Eligible Applicant	Est. Funding
IV. Treatment, Recovery, and Support Services- Adults & Older Adults - Increasing Access and Coordinated Care	The demand for mental health and substance use services for adults and older adults is at an all-time high. According to the Substance Abuse and Mental Health Services Administration's National Survey on Drug Use and Health, 1 in 5 people aged 12 or older used illicit drugs in the past year, 1 in 5 adults aged 18 or older have any mental illness, and less than half of those with mental illness received help for their disorders. Funding will support the development, maintenance, or expansion of existing programs and services that increase access and coordination to a full continuum of trauma-informed, culturally competent, linguistically responsive prevention, treatment, and recovery services of adults and older adults. This may include but are not limited to programs and services that provide behavioral health and substance use treatment, support, and recovery programs such as team-based care, harm reduction, community-based peer support services.	<ul style="list-style-type: none"> • Community Health Center • Community-based Organization • Education Agency • Faith Based Organization • Federally Qualified Health Center 	<p>Track 1 – Awards up to \$500,000</p> <p>Track 2 – Awards up to \$1,000,000</p>
V. Crisis Care: Increasing Community Awareness and Engagement and Aligning Mobile Crisis Response	When someone is experiencing a mental health crisis, there are several access points, such as 988, 911, text lines, and warm or care lines. When a crisis cannot be resolved over the phone, a mobile crisis team must be dispatched to provide community-based intervention to the individual in need wherever they are, such as their home or place of work. Mobile Crisis Teams provide further assessment to the person in need and treatment and/or connection to care. For these services to meet their full potential, we must increase our communities' awareness and engagement and enhance alignment. Funding will support the development, maintenance, or expansion of existing programs and services that increase communities' awareness and engagement with someone to call and someone to respond and increase access and coordination of care to provide the right response to the person in need. This may include but are not limited to programs and services that decrease cultural shame and stigma, increase awareness, and buy in from the community on community-based crisis access points, and availability of services with age-appropriate assessment and treatment following call or text.	<ul style="list-style-type: none"> • Community Health Center • Community-based Organization • Education Agency • Faith Based Organization • Federally Qualified Health Center 	<p>Track 1 – Awards up to \$500,000</p> <p>Track 2 – Awards up to \$1,000,000</p>

Strategies	Description & Examples (where possible)	Eligible Applicant	Est. Funding
VI. Crisis Care: Somewhere to Go- Youth and Family - Moving from Emergency Department to Living Rooms, In Home Stabilization, and Crisis Stabilization Units	Youth require developmentally appropriate behavioral health crisis care. As a result, there are often considerable gaps in the capacity to serve youth and families. Too often, youth experiencing behavioral health crisis face hospitalization or justice system involvement, instead of the home and community-based services they need to de-escalate and stabilize. This is especially true for youth populations that have experienced high unmet behavioral health needs, including BIPOC youth, LGBTQIA+ youth, and limited-English proficient youth. Funding will support the development, maintenance, or expansion of existing age-appropriate programs and services that increase community awareness and engagement among youth and families. This may include but are not limited to programs and services that expand access to developmentally appropriate assessment, sensitive de-escalation supports, safety planning, somewhere to go, and connection to on-going care where it is needed.	<ul style="list-style-type: none"> • Community Health Center • Community-based Organization • Education Agency • Faith Based Organization • Federally Qualified Health Center 	<p>Track 1 – Awards up to \$500,000</p> <p>Track 2 – Awards up to \$1,000,000</p>
VII. Crisis Care: Somewhere to Go – Adults & Older Adults- Moving from Emergency Departments to Living Rooms, In Home Stabilization, Crisis Stabilization Units, and Sobering Centers	Behavioral health crisis systems are evolving to become more sophisticated and diverse as localities invest in addressing issues such as emergency department boarding, unnecessary law enforcement involvement in responses to non-criminal health care crises, and inadequate and inequitable access to services. The goals of crisis systems often include providing rapid access to care for individuals experiencing mental health challenges, with the aim of alleviating distress as quickly, safely, and effectively as possible. Living rooms, in home stabilization, crisis stabilization units, and sobering centers can provide a safe and therapeutic alternative to hospital emergency departments, inpatient psychiatric units, and jails, and offer a no-wrong-door access to mental health and substance use care. Funding will support the development, maintenance, or expansion of existing programs and services that move crisis care from emergency departments to safe and appropriate place to go. This may include but are not limited to programs and services that expand access to living rooms, in home stabilization, crisis stabilization units and sobering centers.	<ul style="list-style-type: none"> • Community Health Center • Community-based Organization • Education Agency • Faith Based Organization • Federally Qualified Health Center 	<p>Track 1 – Awards up to \$500,000</p> <p>Track 2 – Awards up to \$1,000,000</p>

Section 12. Deliverables and Obligations of Award Recipients

12.1 Project Activities

- Identify one individual to be the lead liaison and two individuals to serve as an alternate with the Office of Behavioral Health.
- Solidify work plan(s) based on selected strategy or strategies outlining populations prioritized and specific implementation steps. The work plan, where possible, should include explicit efforts to address identified population(s) most affected by racial and health inequities as well as strategies for continuing to sustain operations beyond this initial funding based on published literature and best practices.
- Participate in required meetings including but not limited to launch meeting, regular check-in calls with designated Office of Behavioral Health team members, and closeout meeting.
- Measure progress related to being implemented, as well as document outcomes, lessons learned, best practices, and success stories during the project period.
- Submit monthly progress reports pursuant to funding source requirements and as developed by the Office of Behavioral health. A final report will be due by end of the agreement period. Schedule and requirements will be finalized and shared with award recipients.
- Submit monthly data as requested, and within the necessary parameters of protecting PHI and ensuring data is submitted as encrypted and secure.

12.2 Administrative Activities

- Complete a risk assessment and submit required financial documentation.
- Adhere to Federal award guidelines in the Uniform Guidance, a set of federal rules -- including administrative requirements, cost principles, and audit guidelines -- that apply to federal money.
- Submit monthly expense reports as required by the Subrecipient Agreement and in accordance with the terms of their Risk Assessment and Financial Management Letter.
- Submit monthly, quarterly, and annual reports on the below metrics. Additional metrics may be required dependent on the program.

Cadence	Metrics (as applicable)
Monthly	<ul style="list-style-type: none">• # of participants or people serviced• # of people impacted by the work• # of priority communities reached• # of referrals to additional psych-social support services or resources

Section 13. Proposal Requirements and Review Process

13.1 Proposal Submission

The Office of Behavioral Health at Cook County Health intends to award funding to eligible applicants to support activities described in this Open Call. Completed proposals must be submitted by **Wednesday, April 17, 2024, no later than 5 PM CT**. Proposals submitted beyond this deadline will not be considered.

A complete proposal comprises of:

- 1) A submission of an Application via <https://cookcountygrants.my.site.com/apex/AnnouncementView?id=a2S3d000000wXrWEAU>, and
- 2) A submission of attachments, including Application Form, Work Plan, and Budget and Budget Narrative

Incomplete proposals will not be considered.

The Application will be completed online. After completing the Application and uploading the application form, workplan, and budget and budget narrative applicants will receive a confirmatory email from GovGrants.Support@cookcountyil.gov acknowledging submission of the Application Form. Please note that the application is not complete until all required application components and documents are also completed and submitted.

General Instructions

1. Go to <https://cookcountyhealth.org/strongertogether> to access and the Stronger Together application materials.
2. Complete the required application attachments using templates available in Appendix A, Appendix B, and Appendix C that can be found at <https://cookcountyhealth.org/strongertogether>.
3. Once complete go to <https://cookcountygrants.my.site.com/apex/AnnouncementView?id=a2S3d000000wXrWEAU> and submit your application and the appendixes.
4. Once the application is submitted, you will receive an email acknowledging submission from GovGrants.Support@cookcountyil.gov.
5. The completed application and required application documents must be submitted by **Wednesday April 17, 2024, no later than 5 pm CT.**

13.2 Proposal Sections

There are five sections in the application form and 2 required additional attachments (1. work plan, and 2. budget and budget narrative). Each is very important. **Incomplete proposals will not be considered.**

Section I: Applicant Criteria (5 Points Total)

- Organization contact information (CEO/Executive Director and Program Director/Manager)
- Organization type
- Organization description
- Previous funding from Cook County Health
- Previous funding from another government entity
- Organization equity focus

Section II: Organizational Capacity and Key Application Priorities (55 Points Total)

- Description of organizational strengths, experience, and partnerships
- Organization's fiscal and contracting capacity
- Rationale for funding proposal including description of community need and benefit using data and published literature
- Identification of selected strategies by funding source as part of the Menu of Options
- Populations and communities to be reached

Section III: Work Plan (25 Points Total)

- Submit work plan(s) by strategy. If applying for funding for more than 1 strategy included in the Menu of Options provide a work plan for each. *Templates available in Appendix B.*

Section IV: Budget (15 Points Total)

- Submit budgets(s) by strategy. If applying for funding for more than 1 strategy included in the Menu of Options provide a budget for each *Preparation Guidelines and Budget Worksheets available in Appendix C.*

Section V: Priority Communities Reached (3 Points Total)

- Select communities your proposal will prioritize and reach and the percent time effort your proposed project will spend in those communities.

13.3 Other Proposal Considerations

Proposals should speak to the following questions and issues, as each proposal will be evaluated in the context of the larger goals of the Office of Behavioral Health at Cook County Health.

- How the proposed activities address equity issues within your broader community.
- The assets and degree of need of the communities and populations identified in the proposal supported by data and published literature.
- The reach of the strategy and related activities (e.g., total number of people reached).
- How your proposal builds upon or utilizes existing and new partnerships and utilizes direct community involvement/input.
- The degree to which the proposal is tailored to meet the unique needs of the community.
- The ability of your organization and its partners to start your activities rapidly and complete your work within the grant period.

Section 14. Review Process & Application Selection Criteria

The review process will consist of the following steps:

- The Office of Behavioral Health at Cook County Health will screen proposals for eligibility, completeness, and technical requirements.
- The Office of Behavioral Health at Cook County Health panels will review proposals, score them based on quality, and recommend full, partial, or no funding (see Selection Criteria table below). Proposals will be reviewed for consistency with prevailing public sector and relevant professional body ethics and conflict of interest codes of practice. Reviewers with potential conflicts of interest will not participate in scoring or selecting the affected proposals.
- The Office of Behavioral Health at Cook County Health committee will recommend a set of proposals for funding. The selection will be based on scoring, as well as achieving an effective and integrated mix of strategies, geographic distribution across Cook County, and inclusion of priority communities and populations disproportionately affected by racial and health inequities.
- The Office of Behavioral Health at Cook County Health will notify each applicant of the decision about its proposal. The Office of Behavioral Health at Cook County Health may determine that the recommended proposals for funding do not fully address the goals of the Stronger Together: Building a More Equitable Behavioral Health System in Cook County Initiative and may try to fill any gaps by requesting changes to submitted proposals.
- Cook County Health will authorize the agreements to award recipients.

Selection Criteria	Description	Points
	Section I: Applicant Criteria	5
Organizational Background and Program Eligibility	<ul style="list-style-type: none">• Provides required information• Showcases equity components of the application – previous funding, DEI, and size of the organization	
	Section II: Organizational Capacity and Key Application Priorities	55
Capacity and Skills to Execute the Project	<ul style="list-style-type: none">• Provides clear explanation on the capacity and skills to execute the project (including past track record or other demonstration of capacity)• Describes similar past projects executed and the outcomes• If partnering with another organization, explains relationship and roles	
Description of Project and Target Population	<ul style="list-style-type: none">• Describes rationale for funding proposal including description of community need and benefit using data and published literature	

Selection Criteria	Description	Points
	<ul style="list-style-type: none"> • Demonstrates the need for the proposed project • Identifies the prioritized population and provides a detailed description of the population(s) to be served 	
	Section III: Work Plan	25
Goals, Objectives, and Expected Outcomes	<ul style="list-style-type: none"> • Clearly defines the activities to be undertaken or services to be provided • Provides a program design that reaches the intended audiences • Provides actionable and achievable goals and outcomes • Identifies service location(s) being within the proposed communities and history serving the proposed communities 	
	Section IV: Budget Development and Budget Narrative	15
Clarity and Reasonableness of Proposed Costs	<ul style="list-style-type: none"> • Provides complete budget of program activities • Provides proposed cost estimates that are reasonable • Demonstrates reasonable implementation costs 	
	Section V: Priority Communities Reached	3
Priority Communities Reached	<ul style="list-style-type: none"> • Shares what communities will be reached and what their percent time effort will be in the communities 	

Section 15. General Guidelines for Applicants

- Applicants shall comply with all laws prohibiting discrimination on the basis of race, sex, color, national origin, disability, religion, age, sexual orientation; and/or any other legally protected classification group.
- All submitted proposals and related materials shall become and remain the exclusive property of the Office of Behavioral Health at Cook County Health.
- All submitted proposals and evaluation materials become public information at the conclusion of the evaluation, negotiation and award process and may be reviewed pursuant to operation of law or court order. Any application which includes privileged and confidential information should contain a conspicuous notice of the same on such portions Applicant deems to be privileged and confidential. Full applications labeled privileged and confidential will not be accepted.
- The Office of Behavioral Health at Cook County Health is not liable for any costs incurred by the Applicant prior to issuing the Agreement.
- An authorized representative shall complete the certification and such completion and submission of a proposal constitutes agreement with subsequent contracting requirements and with conditions of participation in the Stronger Together: Building a More Equitable Behavioral Health System Initiative.
- The Office of Behavioral Health at Cook County Health reserves the right to reject any and all proposals that are deemed not responsive to its goals under the Stronger Together: Building a More Equitable Behavioral Health Initiative.

Section 16. Summary of Agreement Terms and Conditions

This summary outlines certain terms and conditions that will be used as the basis for agreements with Grantees. The Office of Behavioral Health at Cook County Health anticipates entering into agreements with multiple award recipients and would prefer consistency in the terms and conditions contained in the Agreement. Requests for changes or modifications will require multiple approval levels, could create delays in the contracting process and potentially result in the cancellation of negotiations with an award recipient.

- Funding: The Stronger Together: Building a More Equitable Behavioral Health System in Cook County Initiative is

supported by funds made available from the U.S. Department of Treasury, under the American Rescue Plan Act (ARPA).

- Method of Payment: Grantee must submit invoices to the Office of Behavioral Health in such detail as the Office of Behavioral Health requests and on a monthly basis. The Office of Behavioral Health will process payment within forty-five (45) days after receipt of invoices.
- Grant Budget: The Office of Behavioral Health and Grantee shall jointly develop a detailed grant budget that is based upon and consistent with the funding source(s). Any revisions of a line item in the working budget shall be subject to approval by the Office of Behavioral Health.
- Grantee Qualifications: Grantee shall ensure all agents, employees and subcontractors performing the services agreed upon, meet, and maintain any licensure, certification and accreditation required to carry out such services.
- Reporting: Grantees shall submit monthly and/or final reports pursuant to funding source requirements and as developed by the Office of Behavioral Health.

Section 17. Questions

You may ask questions via email to StrongerTogetherOpenCall@cookcountyhhs.org from the time that the Open Call is released until Wednesday, April 10, 2024, 12 PM CT. Questions and responses will be added to a list of Frequently Asked Questions (FAQs) and posted on <https://cookcountyhealth.org/strongertogether> as follows.

Questions received by:

Wednesday, March 13, 2024, 12 PM CT
Wednesday, March 20, 2024, 12 PM CT
Wednesday, March 27, 2024, 12 PM CT
Wednesday, April 3, 2024, 12 PM CT
Wednesday, April 10, 2024, 12 PM CT

Updated FAQ posted by:

Friday, March 15, 2024, 5 PM CT
Friday, March 22, 2024, 5 PM CT
Friday, March 29, 2024, 5 PM CT
Friday, April 5, 2024, 5 PM CT
Friday, April 12, 2024, 5 PM CT

To download any Open Call documents, including the FAQs, please visit <https://cookcountyhealth.org/strongertogether> on the Cook County Health website.