**MICHIGAN HEALTH
ENDOWMENT FUND**

2021 BEHAVIORAL HEALTH INITIATIVE
REQUEST FOR PROPOSALS

2021 BEHAVIORAL HEALTH INITIATIVE GRANT TIMELINE

February 24, 2021	Grants portal open to applicants
March 15, 2021	Concept papers due by 5 p.m. (highly encouraged)
April 22, 2021	Applications due by 5 p.m.
August 12, 2021	Awards announced

A. PROGRAM OVERVIEW

The goal of the Michigan Health Endowment Fund is to improve the health and wellness of Michigan residents, with an emphasis on children and older adults. To achieve this goal, the Health Fund's Behavioral Health Initiative aims to improve access to high-quality, person-centered mental health and substance use disorder (SUD) healthcare for Michigan residents. In doing so, we endeavor to improve health outcomes, reduce health disparities and promote health equity, and decrease overall healthcare costs.

According to the behavioral health access study we funded, 38% of Michigan residents with mental health conditions and 80% with SUD face barriers to accessing services and ultimately go untreated. Provider shortages, challenges in navigating a disjointed healthcare system, and the persistent stigma associated with these disorders equate to fewer individuals receiving care.

The Behavioral Health Initiative supports organizations in implementing innovative, evidence-based, and sustainable strategies with an emphasis on children and older adults. Effective strategies for improving access to mental health and SUD services will serve more people with shorter wait times, incorporate innovative technology, encourage the retention of behavioral health providers, and identify behavioral health concerns at the point of first response with timely treatment access.

PROJECT PRIORITIES

Successful projects will prioritize at least one of the following:

- Strengthening school-based mental health capacity to support students by bolstering the school health workforce, implementing evidence-based strategies, and leveraging other resources
- Implementation of innovative care delivery models
- Multi-sector responses aimed at developing and strengthening local systems of care for mental health and SUD, supporting efficient entry to treatment and seamless transition into community treatment settings
- Use of innovative technology to improve access to care and/or quality of care
- Implementation of team-based approaches to care, including integration at the point of care, sharing health information among providers, and increased provider consultation

CROSS-CUTTING GOALS

Applications are required to emphasize one of the Health Fund's two cross-cutting goals within the context of their project:

WORKFORCE DEVELOPMENT

Build, extend, and strengthen the healthcare provider workforce to better meet the needs of residents in their communities.

INTEGRATION

Develop and expand innovative and cost-effective integration models that coordinate care, services, and community resources to promote the health of children and seniors in Michigan.

REDUCING HEALTH DISPARITIES AND PROMOTING HEALTH EQUITY

Embedding equitable elements into programs reflects the Health Fund's commitment to improving the health of children and older adults in Michigan. To this end, the Behavioral Health Initiative will consider programs that improve behavioral health access by:

- Benefiting or increasing access for populations most affected by a health issue
- Removing barriers to health
- Empowering communities
- Engaging community leaders to share in decision-making

Health Disparities

Differences in the incidence, prevalence, mortality, and burden of diseases and other adverse health conditions that exist among specific population groups in the United States. (National Institutes of Health, 2002)

Health Equity

Achieved when every person has the opportunity to "attain his or her full health potential" and no one is "disadvantaged from achieving this potential because of social position or other socially determined circumstances." (Centers for Disease Control and Prevention, 2020)

Community Empowerment

Achieved when marginalized or oppressed individuals and groups gain greater control over their lives and environment, acquire valued resources and basic rights, and achieve important life goals and reduced societal marginalization. (Community Engagement Key Function Committee Task Force, 2011)

DEFINING THE NEED

Local data plays an important role in the application review process. Strong proposals will use local data to define the target population, demonstrate need for the intervention, and highlight inequities and health disparities that will be addressed through the project. Below are some examples of region-specific health data sources. Applicants are also encouraged to incorporate self-collected data to demonstrate organizational experience and capacity as well as the need for the intervention in the community.

- **Community Health Needs Assessments**
  Nonprofit hospitals are required to complete community health needs assessments with public input once every three years and the report must be made available through the hospital website. These are very often collaborative efforts with local health departments and other nonprofit providers.

- **Local Data**
  Clinical or non-clinical data related to the project location, to be used as baseline to measure programmatic progress. Examples: local waitlist times, number of patients served, prevalence of behavioral health disorders in population served, etc.

- [**Behavioral Risk Factor Surveillance System Prevalence & Trends Data**](#)
  Explore by location – Michigan Metropolitan Statistical Areas (MMSAs)

- [**County Health Rankings Data**](#)
  From the Robert Wood Johnson Foundation

- [**HRSA Data Warehouse**](#)

- [**MDHHS Mental Health Reports and Proposals**](#)
  From the Michigan Behavioral Health and Developmental Disability Administration

- [**Michigan Profile for Health Youth (MiPHY)**](#)

- [**Regional and Local Health Department Tables**](#)
  From the Michigan Behavioral Risk Factor Survey

- [**Substate Regions Reports**](#)
  From SAMHSA's National Surveys on Drug Use and Health

MEASURING THE IMPACT

To be considered for funding, applicants must describe evaluation plans and include specific measurable health outcomes, with the understanding that some health outcomes may not be achieved within the grant period. Click here for examples of outcome indicators and data sources. The applicant's evaluation plans should answer:

- What are the intended impacts and outcomes of your proposed initiative? Goals should be specific, measurable, achievable, relevant, and time-based.

- How will the project outputs, outcomes, and impact be measured? (include the data source) What, if any, baseline data will be collected?

Additionally, all applicants must upload a separate workplan document. You do not need to use a specific template, but your workplan should include:

- Major activities
- Responsible person
- Timeline for completion
- Deliverable(s)
- Related health outcome(s)

CRITERIA FOR REVIEW

The Health Fund will use the following criteria in reviewing applications:

- **Strategic alignment.** The project aligns with the Health Fund's mission, strategies, and goals and focuses on improving the health of Michigan children and/or older adults.

- **Bold innovation.** The project supports new or enhanced programs or strategies. Proposals will not be considered if funds would be used to maintain an existing program or fill a budget gap for current services.

- **Long-term impact.** The project has the potential to achieve significant long-term impact by implementing effective models or supporting needed innovation.

- **Cross-cutting goals.** The project incorporates at least one of the Health Fund's two cross-cutting goals of workforce development or integration.

- **Measurable outcomes.** The project has clear outcomes and the potential to have a measurable impact in improving health.

- **Unmet need.** The project has the ability to address an unmet need and focus on populations that face health disparities and disproportionate barriers to improved health.

- **Health equity.** The project uses well-developed, population-specific data and input from the target population to help understand and reduce health disparities.

- **Sustainability.** The project has the potential to be sustainable after the end of the grant period. Applicants must demonstrate how the grant activities will be sustained after the grant period. This could include strategies to inform public policy.

- **Deep collaboration.** The project demonstrates collaboration, including community involvement in planning and implementation, multi-sector partnerships with defined roles and responsibilities related to the project, and leveraging external resources.

- **Replication potential.** The project has potential for replication in other settings, including opportunities to learn, disseminate knowledge, and inform public policy. Proposals will not be considered if the initiative only impacts one organization or one program and does not have the ability to be replicated or broadened to impact larger systems.

The Health Fund Board of Directors has sole responsibility for all grant decisions.

B. ELIGIBILITY

Applicants must:

- Be recognized by the Internal Revenue Service as a nonprofit organization;
- Be based in Michigan;
- Have a current certified financial audit; and
- Have at least 1 FTE.

EXCLUDED FROM FUNDING CONSIDERATION

❌ Requests to increase COVID-19 testing or vaccination capacity	❌ Requests that are exclusively for the purchase of PPE	❌ Health-related emergencies*
❌ Clinical research	❌ Capital projects	❌ Electronic medical record software
❌ Ongoing program operations and staffing	❌ Loans	❌ Litigation
❌ Lobbying activities	❌ Tuition costs and related fees	❌ Organizations that discriminate because of age, race, ethnic origin, religion, sexual orientation, disability, or gender

*The Health Fund might in some situations consider support to address longer-term rebuilding or other needs following emergency situations

C. GRANT AMOUNT

The Health Fund expects to award grants up to $500,000. An organization may not apply for a grant that is larger than 20% of its annual operating budget.

No more than 10% of the total grant budget may be allocated to indirect/administrative costs.

You may apply for a one or two-year grant, but the total request is limited to $500,000. Please be sure to clearly identify your funding requests per year in your proposal, along with any other associated program revenue.

The Health Fund anticipates awarding a total of approximately $6,000,000 for this grant round.

D. APPLICATION PROCESS

CONCEPT PAPERS

DUE MARCH 15, 2021

We **strongly encourage** concept paper submission (not to exceed two pages) for review and feedback by the Health Fund prior to submission of a full proposal. While not required, this may result in a stronger, more competitive proposal that clearly aligns with Health Fund goals.

Concept papers should include the following sections, in this order:

- Organization name and mission
- Project information
  - Title
  - Description of how the project will improve access to behavioral health. What health disparities, problem(s), challenge(s), or need(s) do you propose to address?
  - Information specific to either of the Health Fund's cross-cutting goals (workforce development or integration—more information in Section A)
  - List of key partners and expected roles in the project
  - How the project will continue or have an impact after the grant period ends
- Estimated budget (detailed budget breakdown is not required, just tell us what the budget will cover)

Send concept papers to rfp@mihealthfund.org **before 5 p.m. on March 15, 2021.** We will not review concept papers submitted after the deadline.

APPLICATION

DUE APRIL 22, 2021

Applications must be submitted electronically through the Health Fund website using the grants portal. **Using Google Chrome**, applicants will first be required to create an account. It may take 48 hours for your account to be approved. Once approved you will receive login credentials via email.

While the grants portal does not have a word limit function, we require applicants to keep the total narrative within the equivalent of 10 standard pages. The Health Fund also reserves the right to confidentially share proposals with external reviewers and other foundation partners.

Visit the grants portal to view the application questions and required attachments.

Full proposals must be received by 5 p.m. on April 22, 2021. Proposals submitted after the deadline will not be considered.

E. MORE INFORMATION AND FURTHER QUESTIONS

The following resources may be useful as you develop your proposal:

- [Access to Behavioral Health in Michigan](#)
- [A Standard Framework for Levels of Integrated Healthcare](#)
- [Behavioral Health Crisis Services: Models and Issues](#)
- [Cost Effectiveness: Piecing Together the Puzzle Webinar](#)
- [Data Sources and Indicators](#)
- [Mental Health Technology Transfer Center Network](#)
- [National Center for School Mental Health](#)
- [SAMHSA-HRSA Center for Integrated Health Solutions](#)
- [School Health Assessment and Performance Evaluation System](#)

For helpful tips, to view past grant partners and additional information please see our [Behavioral Health webpage.](#)

For more information on our grantmaking, view our [Frequently Asked Questions](#) page. If you have further questions, please email rfp@mihealthfund.org.