The New York State Office of Mental Health (OMH) is providing one-time funding up to $50,000 to OMH providers to expand timely in-person and telehealth access to intensive community-based services. Specifically, these resources are intended to support children and youth returning to school for 2021-2022 in the wake of the coronavirus pandemic, in alignment with the design and intent of the Coronavirus Response and Relief Supplement Appropriations Act. Specifically, the Mental Health Block Grant is “designed to provide comprehensive community mental health services, including services that address the needs of children, particularly in regard to school re-entry and related crises for children and adolescents.”

**Eligible applicants:** There are two pools of eligible applicants. Eligible agencies may only submit ONE (1) application, choosing only one option of those below for which to apply.

**Expansion Funds.**
Eligible applicants for expansion funds (up to $30,000) are existing providers identified as operating in good standing with OMH, including:

- OMH-licensed Clinics serving children/adolescents to expand or create a fast-track for access to in-person and telehealth clinic services for children/youth presenting to Emergency Department, CPEP, or mobile crisis, or discharging from Inpatient Psychiatry Stay, Residential Treatment Facility, or Crisis Residence/Respite. The fast-track approach must include at minimum:
  - For enrolled/admitted clients or clients returning to treatment: Access to clinical appointment within two business days
  - For new clients:
    - Within 24-hour access to intake/admission
    - Access to a first appointment within 72 hours of intake
    - Access to a psychiatrist within five business days of intake

- OMH-licensed Clinic Child/Adolescent Intensive Outpatient Programs
- OMH-licensed Child/Adolescent Partial Hospital Programs
- OMH State Aid funded Home-Based Crisis Intervention (HBCI) Programs

**Start-up Funds.**
Eligible applicants for start-up funds (up to $50,000) are existing providers identified as operating in good standing with OMH one of the following:

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1 “Good standing” for licensed programs is defined as a provider having an OMH accepted Performance Improvement Plan and not receiving or not under active Enhanced Provider Monitoring. For unlicensed HBCI funded programs, good standing is defined as contract deliverables are met with no significant quality of care issues reported.

2 Certified Community Behavioral Health Clinics (CCBHC) in the federal demonstration and Clinics required to comply with OMH regulations codified at 14 NYCRR § 599.15(k) are excluded.

3 Upon acceptance of application, will require an Administrative Action or EZPAR, which will be expedited.
OMH-licensed Clinics to start Child/Adolescent Intensive Outpatient Programs\(^4\), with demonstrated sustainability mechanism. Clinics are eligible to apply for operation at their clinic location, at their school-based satellite or other satellite location.

OMH-licensed Providers to start Child/Adolescent Partial Hospital Programs\(^5\), with demonstrated sustainability mechanism.

**Goal of Funds:**
The intent of this funding is to increase service volume and expand timely access to in-person and telehealth services that divert youth from higher level of care and/or allow safe stepdown from higher level of care. These programs have an emphasis on higher intensity services, coordinated hand-off to a lower level of care, family engagement, and provision of services in the home or community, as appropriate.

To address the present volume of need for individualized, intensive, community-based services and support, funds will assist with the following:

- Expansion of program operations to serve a greater number of children/families and/or an expanded catchment area
- Creation of formal mechanisms for connections/partnership to ED/CPEP/Inpatient/mobile crisis/crisis residence/MIT team/etc. for seamless referral processes and timely access to care
- Efforts in marketing to, hiring, onboarding, and retaining more qualified staff for the growth and expansion of access to services

**Anticipated Outcomes:**
OMH is committed to supporting efforts to achieve the underlying intent of the Coronavirus Response and Relief Supplement Appropriations Act so that children and their families have access to needed intensive community-based services. This funding allotment is intended to achieve the following:

- Increased service capacity to eligible and appropriate referrals
- Decreased length of stay on program and service waitlists
- Increased workforce to be able to support service access and service provision to eligible children and families
- Increased community awareness and education regarding the services and their availability/how to access them

**Timeframe:**
- Date that applications must be received by: November 1, 2021
- Date that expenditure is available against funds: September 15, 2021
- Providers must expend funds by December 31, 2022

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\(^4\) Upon acceptance of application, will require 501 waiver approval, which will be expedited.

\(^5\) Upon acceptance of application, will require EZ PAR, which will be expedited.
To participate in this funding, providers will be required to:

1. Consult with the local governmental unit representing the location of the program main site to discuss their intent to start or expand services within the county.

2. Submit the application for funding as outlined below via email at: omh.sm.childrenfamilyservices.blockgrant@omh.ny.gov
   
   Subject line of the email must read: Intensive Community-Based Services for Children/Youth

3. Providers must submit an end-of-grant report by December 31, 2022. Reports must include the following data, along with a narrative description on completed activities and achieved outcomes, noting both baseline and end-of-grant data for any of the following elements, as applicable:
   
   - Number of children/families served in the expanded/created program. For clinic “fast track” applicants, data reporting must include the following:
     
     - Number of clinic enrolled/returning to service children/families who were able to be “fast tracked” within required timeframes
     
     - Number of new client children/families who were able to be “fast tracked: within required timeframes
   
   - Where services are operational in the expanded catchment area
   
   - Number of additional/new FTEs, roles, and credentials employed by the program
   
   - Number of referrals received
   
   - Number of referrals who were admitted
   
   - Number of children on your waitlist for the program, if applicable
   
   - Any additional expansions in service which were not captured

4. Providers must submit a Grant Expense Report due by December 31, 2022. Note that expenditures from this award must be tracked and reported separately from all other expenditures.

Notification of award status will be sent to all applicants. The release of funding may be further subject to the submission and approval of a 501 Waiver or Prior Application Review (PAR) application, as necessary.

Application Process:
OMH is allocating a total pool of $1.9M for this funding opportunity. Applications will be reviewed in the order received. Approved applicants will receive funds on a first come/first served basis until funds are exhausted, with a maximum of $950,000 awarded to New York City/Long Island based providers and $950,000 awarded to providers based outside of New York City/Long Island. Failure to be responsive to any section below will disqualify applicant from funding.
Eligible providers must submit an application requesting funding that includes the following. Applications will be reviewed against the criteria below:

- **Background**
  - Agency name, address
  - Type of eligible program and the grant opportunity applying for
  - Name and contact information of the applicant/lead individual who will be overseeing the project.
  - Provide name of county official informed of your intent to apply for this grant opportunity.
  - Brief narrative statement of demonstration of need, e.g., waitlist, historical need around school re-entry, etc.

- **Baseline data**
  - Description of covered catchment area
  - Current number of FTEs, roles, and credentials, currently employed by the program

- **Summary of proposed methods to meet intended goal of increased service volume through expansion or start-up funds, consisting of a maximum of 3 pages to include:**
  - Activities proposed to meet the goals of funds
    - For IOP start-up applications, include proposal information as outlined in the Clinic-Based Intensive Outpatient Program Guidance (CBIOP), necessary for waiver application. ([http://omh.ny.gov/omhweb/clinic_restructuring/docs/clinic-iop-guidance.pdf](http://omh.ny.gov/omhweb/clinic_restructuring/docs/clinic-iop-guidance.pdf)).
  - Projected increase in capacity (e.g., as operationalized by increased number of children/families served, decreased stay on waitlist, increased catchment area, etc.)
  - Provider’s plans on addressing cultural and linguistic needs of population and inclusion of families (may reference agency mission/strategic plan or work plan)
  - Provider’s plans for sustainability of services past the availability of grant funds

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6 For IOP start-up, the application will be used in lieu of the “IOP Program Description” to expedite approvals, however applicants should consult the Clinic-Based Intensive Outpatient Program Guidance (CBIOP) and include the description considerations identified therein ([http://omh.ny.gov/omhweb/clinic_restructuring/docs/clinic-iop-guidance.pdf](http://omh.ny.gov/omhweb/clinic_restructuring/docs/clinic-iop-guidance.pdf)) to help expedite the process.