



North Carolina Department of Health and Human Services

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January 31, 2014

The Honorable Ralph Hise, Co-Chair
Joint Legislative Oversight Committee on
Health and Human Services
Room 1026, Legislative Building
Raleigh, NC 27601

The Honorable Justin Burr, Co-Chair
Joint Legislative Oversight Committee on
Health and Human Services
Room 307A, Legislative Office Building
Raleigh, NC 27603-5925

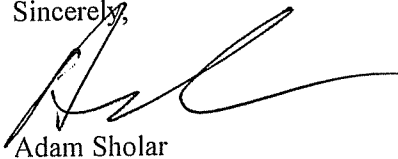
The Honorable Mark Hollo, Co-Chair
Joint Legislative Oversight Committee on
Health and Human Services
Room 639, Legislative Office Building
Raleigh, NC 27603-5925

Dear Senator Hise and Representatives Burr and Hollo:

Section 12A.2.(e) of Session Law 2013-360 requires the Secretary of the Department of Health and Human Services to develop a plan for the implementation of the competitive grants process for nonprofit funding and report to the Joint Legislative Oversight Committee on Health and Human Services on the plan. Pursuant to the provisions of law, the Department is pleased to submit the attached report.

Please contact Matt McKillip, Chief Policy Officer at (919) 855-4815 should you have any questions regarding this report.

Sincerely,



Adam Sholar

Attachment

cc: Rod Davis
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Plan to Implement a Competitive Grants Process for Nonprofit Organization Funding

In response to the requirements of Session Law 2013-360, Section 12.A.2, the Department of Health and Human Services is pleased to provide a plan for the implementation of a competitive grants process for nonprofit funding. The Department appreciates this opportunity to invite and evaluate program applications from nonprofit providers of services related to the Department's mission and to award funds to those programs that most effectively serve the health and safety needs of the people of North Carolina and provide essential human services.

Purpose

The Department of Health and Human Services (DHHS) is responsible for protecting the health and safety of all North Carolinians, which includes providing essential human services for persons with special needs such as mental illness, deafness, blindness, developmental or other disabilities; older adults; caregivers, children, adults and families at risk or experiencing challenges affecting their health and safety; and other vulnerable populations. DHHS seeks to partner with eligible nonprofit organizations to fulfill these responsibilities. In order to realize the greatest benefit from these one-year awards, the Department will give priority to programs serving persons experiencing or at risk for significant health and safety needs.

Approach and Timeline

No later than **March 1, 2014**, DHHS will issue a Request for Applications (RFA) inviting proposals from nonprofit organizations on any of the State health and wellness initiatives defined in SL 2013-360 Section 12.A.2.(d).

Applications on these initiatives may be submitted in the following categories:

- Large Grants not to exceed \$3.0M for state-wide delivery of services reflecting one or more of the defined initiatives. DHHS anticipates making no more than three awards at this level.
- Small Grants not to exceed \$500,000 for state-wide delivery of services reflecting one or more of the defined initiatives. Applications for regional delivery of services will be accepted in this category if Applicants are willing to collaborate as part of a state-wide network.
- Demonstration programs not to exceed \$75,000 for programs demonstrating innovative approaches to a defined initiative that are scalable to state-wide implementation. Awards in this category will not exceed 20% of total funds awarded.

Applications will be due to DHHS no later than **April 15, 2014**.

In the event DHHS does not receive merited applications that are complete and responsive to the RFA sufficient to exhaust the funds available, the RFA will be reissued with a second closing date of **May 15, 2014**.

Grantees will be announced no later than **July 1, 2014**. Contractual agreements implementing the selected programs will be issued promptly after award.

Evaluation Process and Criteria

Applications will be evaluated by a DHHS committee including programmatic expertise related to each health and wellness initiative for which proposals are received.

The committee will apply the following criteria in evaluating applications:

- Alignment with defined initiatives (See Attachment 1)
- Alignment with the DHHS Goals 3-5 (See Attachment 2):
 - Provide services and protection to individuals and families experiencing serious health and safety needs who are not, at least temporarily, able to assist themselves with the goal of helping them to return to independent, community living.
 - Provide services and supports to individuals and families experiencing health and safety needs to assist them in living successfully in the community.
 - Provide outreach, support and services to individuals and families identified as being at risk of compromised health and safety to eliminate or reduce those risks.
- Impact (Number and geographic distribution of individuals) of service
- Significance of benefit to individuals served
- Results of past performance
- Applicant ability to leverage non-State funds to enhance program benefits

Applications will be scored and ranked by the evaluation committee. Final determination of awards will be made within the Office of the Secretary based on these scores, with consideration for total funds available and avoidance of duplicative efforts. The Department's determination of awards will be final.

Attachment 1: Eligible Initiatives defined by SL 2013-360 Section 12A.2.(d)

- a. A program targeting advocacy, support, education, or residential services for persons diagnosed with autism.
- b. A comprehensive program of education, advocacy, and support related to brain injury and those affected by brain injury.
- c. A system of residential supports for those afflicted with substance abuse addiction.
- d. A program of advocacy and supports for individuals with intellectual and developmental disabilities or severe and persistent mental illness, substance abusers, or the elderly.
- e. Supports and services to children and adults with developmental disabilities or mental health diagnoses.
- f. A food distribution system for needy individuals.
- g. The provision and coordination of services for the homeless.
- h. The provision of services for individuals aging out of foster care.
- i. Programs promoting wellness, physical activity, and health education programming for North Carolinians.
- j. A program focused on enhancing vision screening through the State's public school system.
- k. Provision for the delivery of after-school services for at-risk youth.
- l. The provision of direct services for amyotrophic lateral sclerosis (ALS) and those diagnosed with the disease.
- m. The provision of assistive information technology services for blind and disabled persons.

Attachment 2: DHHS Mission and Goals

The Department of Health and Human Services (DHHS) is responsible for protecting the health and safety of all North Carolinians which includes providing essential human services for persons with special needs such as mental illness, deafness, blindness, developmental or other disabilities; older adults; caregivers, children, adults and families at risk or experiencing challenges affecting their health and safety; and other vulnerable populations.

The Department touches the lives of virtually every North Carolinian from birth to end-of-life through its many different services such as prenatal services, child development, child and adult protective services, Medicaid, foster care, nutrition services, mental health, substance abuse and intellectual and developmental disabilities services, regulating long term care and health care facilities, home and community services, and the maintenance of vital records.

DHHS has established five performance goals and related measurable objectives which provide the overarching guidance for executing the Department's mission. The focus is on eliminating the silos, integrating both service delivery and how we measure/ achieve the desired results of the service delivery; evaluating the continuum of care; and providing the foundation for strengthening the capacity for setting priorities, effectively measuring progress, strengthening accountability, identifying opportunities for efficiencies and collaboration—all of which will help further achieve person-centered outcomes and increased customer satisfaction.

There are several other characteristics of the goals (as presented below) that lay the groundwork for the DHHS approach: (1) they were written to be person-centered—given that DHHS exists to help the people of North Carolina; and (2) they are interconnected and progressive—meaning that investment and success in establishing infrastructure and providing education and outreach (goals 1 and 2) will help to mitigate the need for increasingly more intense and costly services to clients (goals 3-5).

GOAL 1: Manage resources to provide effective and efficient delivery of services to North Carolinians.**WHY IS THIS IMPORTANT?**

The Department of Health and Human Services works to ensure that resources are used efficiently and services are managed effectively, and in a manner consistent with applicable state and federal

requirements. Critical to this goal is to promote, measure, and enforce existing and emerging standards of service delivery and infrastructure.

Goal 2: Expand awareness, understanding and use of information to enhance the health and safety of North Carolinians.

WHY IS THIS IMPORTANT?

The health and safety of the public is enhanced when North Carolinians make healthy choices in their lifestyles and take advantage of preventive health practices (e.g., wellness activities, screenings, falls prevention). Therefore, the development and dissemination of information concerning the extent, causes and prevention of chronic diseases and other risk factors is a key function led by Public Health but shared across DHHS. The use of this type of information is vital to the development of health and safety policies, practices aimed at prevention and to the mitigation of personal and environmental risks.

Goal 3: Provide outreach, support and services to individuals and families identified as being at risk of compromised health and safety to eliminate or reduce those risks.

WHY IS THIS IMPORTANT?

It is imperative that DHHS provide and strengthen its access and service delivery to children, adults and families so that those at risk receive what they need to mitigate those risks. Provision of services and benefits that support the well-being and advance families toward attaining and sustaining self-sufficiency are a significant part of this goal. It is also important to ensure that multiple services when applicable are well coordinated and reflect the changing strengths and needs of the affected children, adults and families.

Goal 4: Provide services and supports to individuals and families experiencing health and safety needs to assist them in living successfully in the community.

WHY IS THIS IMPORTANT?

The focus of this goal is to help individuals with identified needs remain in their residence of choice and/or least restrictive setting, obtain employment, and live more independently through the provision of such supports as counseling, medical and psychological services, job training and other individualized

services. The goal also includes services that support cost-effective long-term family caregiving, and assure the protection of children.

Goal 5: Provide services and protection to individuals and families experiencing serious health and safety needs who are not, at least temporarily, able to assist themselves with the goal of helping them return to independent, community living.

WHY IS THIS IMPORTANT?

This goal relates to services provided to prepare individuals for successful integration back into the community when appropriate and to publicly-funded services offered to those who can no longer care for themselves. In the provision of these services, efforts are made to offer them as close to the individual's home and natural supports as possible.

Goal 3 indicates the beginning of more targeted service delivery for those receiving DHHS services and defines how DHHS addresses services for children, adults, and families who are at risk of compromised health and safety without preventative intervention and direct services. As such, it is the starting point for this plan to implement a competitive grants process for nonprofit organization funding.