

Welcome!

**Lake County Behavioral Health
Mental Health Services Act
Prevention and Early Intervention
Prevention Mini-Grant Program
FY 2018/19**

The Lake County Behavioral Health Department is pleased to announce the availability of Prevention and Early Intervention (PEI) mini-grant funding provided by Mental Health Service Act (MHSA). The MHSA provides an array of services to people of all ages who suffer from, or are at risk of, severe mental illness. The purpose of the PEI mini-grant program is to provide the Lake County community with an opportunity to develop prevention-oriented activities aimed at building protective factors and reducing risk factors with respect to Mental Health. Activities addressing suicide prevention, stigma and discrimination reduction are encouraged. Funding in the amount of \$25,000 will be administered by way of mini-grants in the range of \$1,500 to \$2,500 will be awarded to grantees.

Eligibility

Applications will be accepted from the community-based organizations that are committed to providing activities which promote protective factors in the prevention of severe mental illness, including suicide prevention education awareness, stigma and discrimination reduction. These organizations include, but are not limited to:

Schools and Educational Institutions

- **Mental Health and Primary Care Organizations**
- **Social Service Organizations**
- **Organized Mental Health Consumer and Family Member Groups**
- **Employment Assistance Program**
- **Organizations Targeting Cultural or Ethnic Disparities around accessing mental health services**

Mini-Grant Applicant Requirements

Grantees will be required to develop and implement activities in the community. Possible activities include, but are not limited to:

- **Peer-Facilitated Performance Art**
- **Job Shadowing/Skill set learning**
- **Outreach to individuals who are homeless**
- **TAY/Older Adult Peer Support Activities**
- **Peer Mentorship**
- **Social Events for Isolated Consumers**
- **Community Stigma & Discrimination Reduction Campaigns**
- **Alcohol and Other Drugs and Mental Health Prevention Activity**

Approved projects will be prevention-oriented as well as culturally competent for the targeted or intended audience. All application must have a fiscal agent responsible for monetary oversight

Proposals must focus on one or more of the following:

- **Disparities in Access to Mental Health Services**
- **Psycho-Social Impact of Trauma**
- **At-Risk Children, Youth and Young Adult Populations**
- **Stigma and Discrimination**
- **Suicide Risk and/or Prevention**

Grantees and fiscal agents will be required to submit applications and agreement forms. Documentation of activities and expenditures will be required from grantee. Also, grantees are required to collect data on those who participate in activity. This may include numbers served, demographic information, and satisfaction survey data.

Selection Criteria

Projects will be selected based on the following criteria:

- **Completion of application forms.**
- **The extent to which the proposal will address the identified key community needs as well the priority populations of the project.**
- **The extent to which the proposed activity meets the description and intended outcomes outlined in the proposal.**

Selection Process

The department will assemble a review team that will evaluate the mini-grant applications and make recommendations for final approval. The review team may include members of the Lake County Mental Health Board and/or other stakeholder participants.

Submission Deadlines

Completed applications are due by May 30th, 2018 at 5:00PM. Applications received after the due date and time will not be considered. Please note that only electronic applications will be accepted.

The link to the Online application may be accessed at the following website:

http://www.co.lake.ca.us/Government/Directory/Behavioral_Health/MHSA.htm

Award Notification

Applicants will be notified of awards two weeks following submission deadline. Selected applicants will be required to sign a service agreement with Lake County Behavioral Health. All funds awarded must be expended by 05/31/2019. Any unexpended funds must be paid back to the grantor. Once selected, all grantees will be required to attend a workshop outlining the event and documentation process.

Mini-grant funding may only be used for prevention activities and is exclusive of the purchase of equipment (i.e., copy machine, desk, computer, tools, etc.).

Application

*** 1. Contact Information**

Advisor Name

Title

Organization

Street Address

City

State

Zip Code

Phone

Email

*** 2. Fiscal Agent (who will sign agreement and receive check):**

Fiscal Agent Name

Title

Organization

Street Address

City

State

Zip Code

Phone

Email

*** 3. Prevention Mini-Grant Project Name**

* 4. Key Community Mental Health Need (check all that apply):

- Disparities in Access to Mental Health Services
- Psycho-Social Impact of Trauma
- At-Risk Children, Youth, and Young Adult Populations
- Stigma and Discrimination
- Suicide Risk and/or Prevention

* 5. Priority Populations (check all that apply):

Note: All PEI projects must address underserved racial/ethnic and cultural populations.

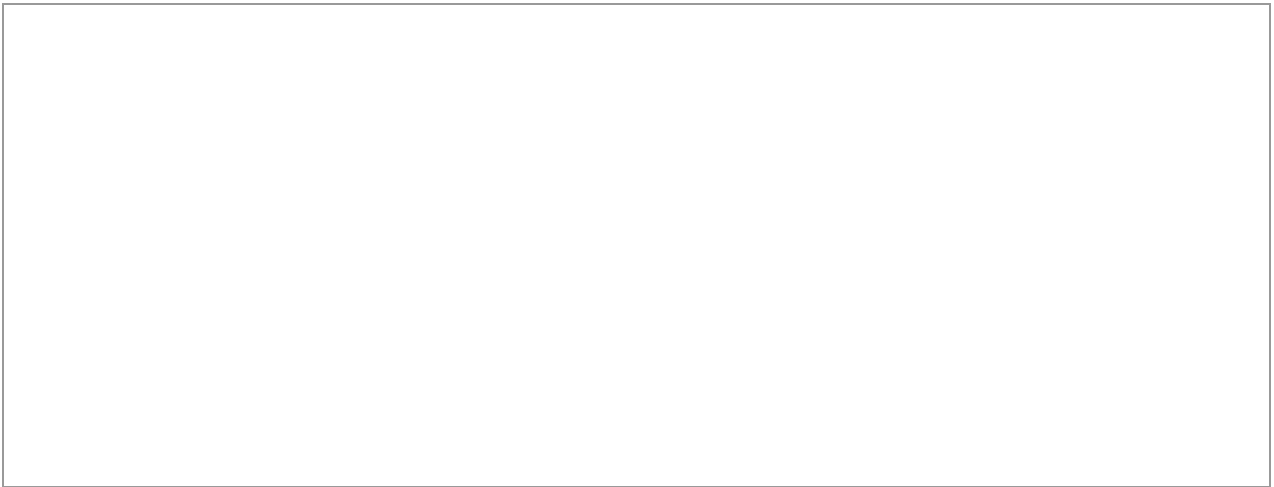
- Trauma Exposed Individuals
- Individuals Experiencing the Onset of a Serious Mental Illness
- Children and Youth in Stressed Families
- Children and Youth at Risk of School Failure
- Children and Youth at Risk of Experiencing Juvenile Justice Involvement
- Underserved Cultural Populations

* 6. Please provide a brief description of the prevention activity you plan to offer.

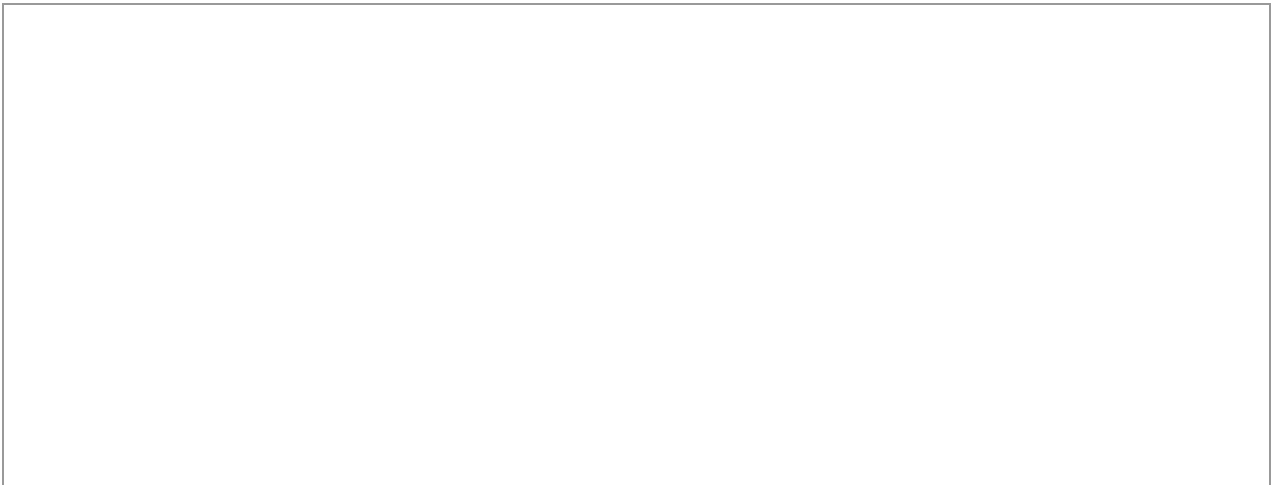
* 7. How do you plan to implement this prevention activity?



* 8. What outcomes are you hoping to achieve by offering this prevention activity?



* 9. How will Cultural Competency be incorporated into the program & evaluation?



* 10. How will data be collected and analyzed?

* 11. Will this funding be combined with other funding or in-kind services?

Yes No

If so, please specify.

12. Additional Comments:

Timeline

Provide a timeline for implementing this activity, including key milestones. All funds awarded must be expended by 05/31/2019. Any unexpended funds must be paid back to the grantor.

* 13. Date

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Budget

Provide a detailed budget of resources needed to implement this activity.

* 15. Description

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* 16. Cost

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* 17. How did you hear about this program?

- | | |
|---|--|
| <input type="checkbox"/> Lake County Behavioral Health (Clinics) | <input type="checkbox"/> Record Bee (print) |
| <input type="checkbox"/> Lake County Behavioral Health (Wellness Centers) | <input type="checkbox"/> Record Bee (online) |
| <input type="checkbox"/> Lake County Behavioral Health (Website) | <input type="checkbox"/> Clearlake Observer |
| <input type="checkbox"/> MHSA Stakeholder Meeting | <input type="checkbox"/> Middletown Times Star |
| <input type="checkbox"/> Partner Agency (please specify) | <input type="checkbox"/> Penny Slaver |

Other (please specify)

Thank You!

Thank you for your interest in the MHSA Prevention Mini-Grant Program!

Please click on the "Done" button if you are ready to submit your application online.

Important Notice: Completed applications are due by May 30th, 2018 at 5:00PM. Applications received after the due date and time will not be considered. Only electronic applications will be accepted.

Lake County Behavioral Health reserves the right to reject Mini-Grant applications that are incomplete or do not clearly relate to a component of the Prevention and Early Intervention Mini-Grant Program.