

Mental Health Board – FY 25 – Proposal Rubric

The Mental Health Board utilizes the Proposal Rubric as a guide to reaching levy funding allocations.

Funds allocated by the MHB shall be used to contract for mental health, substance abuse, and developmental disability services. The MHB has chosen to include autism spectrum and to address the behavioral health issues exhibited in those with traumatic brain injury services for McHenry County residents pursuant to the authority contained in the Community Mental Health Act, ILCS, Chapter 405, Act 20, Section 0.1, et.seq.

Proposal Category	Compliance Criterion	Substantially Compliant	Moderately Compliant	Minimally Compliant
		<p>1. Agency Description Describe how the following components are in place throughout the agency:</p> <ul style="list-style-type: none"> a. Risk Management Practices b. Multiple Revenue Streams c. Adequate staffing for proposed program d. Agency is Accredited, Licensed and/or Certified e. Cultural Competency f. Consumer Satisfaction 	<p>The agency is accredited, licensed, and/or certified and has the capabilities to deliver funded services based on leadership and stability. There is evidence to support multiple funding streams, risk management practices, cultural competency, consumer voice, and effective use of technology. Staffing ratios are adequate for number of clients served.</p>	<p>The agency is accredited, licensed, and/or certified and has multiple funding streams as well as evidenced documentation of providing culturally competent and consumer driven services. Agency shows strong leadership and significant investment, fulfilling all of the components of the proposal.</p>
<p>2. Service/Program/Project Description</p> <ul style="list-style-type: none"> a. Indicate alignment with the MHB 3 Year Plan, Mission, and Community Mental Health Act b. Evidence why the identified community need warrants funding? c. Program clearly defines the target population(s) served and coinciding level of urgency d. New innovation fills gap e. Increases accessibility to services 	<p>Program description should align with the priorities of the MHB 3-year plan, mission, and Community Mental Health Act identifying specific target populations and community needs. Program demonstrates promotion of community wellness and access by clearly defining the urgency level.</p>	<p>Program’s description is clear and indicates strong alignment with MHB priorities. Program clearly defines impact. Program clearly demonstrates effective strategies to improve prevention, treatment, and/or recovery efforts of target population(s). Program, project, service need is substantiated with data and urgency level.</p>	<p>Some indication of a defined project description but not well aligned with MHB priorities. Program vaguely or insufficiently outlines its impact on the target population(s). Program minimally demonstrates strategies to improve prevention, coordination, treatment, and/or recovery efforts with data. Urgency level is stated.</p>	<p>Program’s description is obvious but not clearly stated and/or not aligned with MHB priorities. Program does not demonstrate that it promotes strategies to improve, prevention, coordination, treatment, and/or recovery efforts of target populations(s). Urgency level appears inappropriate.</p>

<p>3. Service, Program, Project Outcomes</p> <ul style="list-style-type: none"> a. Are the key outcomes being measured appropriate for the population served? b. Agency ability to accurately capture outcome data with tools and processes in place c. Utilization of Evidence-based Practice(s) d. Outcome ranking as compared to other network providers e. Compliance with data outcome reporting and Network meeting attendance 	<p>Program defines key outcome domains that are measurable and demonstrate effectiveness for the population served. Outcomes are achieved through utilization of evidence-based practice(s) and fidelity to models of care. Systems and tools are in place.</p>	<p>The program clearly demonstrates ability to conduct outcomes measurement. Reporting tools and processes are clearly defined. Evidence-based practices are clearly utilized. Measurement tools and timeframes are outlined.</p>	<p>The method of data collection, tools or processes are partially stated or not all are in place. Evidence-based or best practices are utilized.</p>	<p>The program does not clearly identify the method of data collection, tools or processes in place to accurately measure outcomes. Systems are unclear or underdeveloped. The program does not utilize evidence-based practices.</p>
<p>4. Service/Program/Project Budget</p> <p>Describe the budget and answer these areas:</p> <ul style="list-style-type: none"> a. Management /general % rate if applicable b. Sources of complementary funding c. Indirect Cost Allocation Plan included (if applicable) d. Agency submitted a Fee Schedule e. Company is solvent and not at risk - Debt ratio and Days Cash On Hand good 	<p>The budget is realistic and cost effective. In cases where funding is complemented by equity or another source this should be documented. Direct and Indirect costs are clearly stated.</p>	<p>The budget is clearly stated and reasonably cost efficient. There is evidence of alternative funding streams. Agency followed budget directions. Direct and Indirect costs appear reasonable.</p>	<p>The budget is clearly stated with evidence of alternative funding, but cost efficiency is not addressed or is questionable. The program appears to be serving a minimal number of clients for the total cost requested. Agency followed most budget directions. Direct and Indirect costs are not fully substantiated.</p>	<p>The budget is not clearly stated and or management cost is above 20%. Insufficient documentation of complementary funding. Unduplicated number of clients appears unsubstantiated. Agency did not follow budget directions. Direct and Indirect costs are inadequately substantiated.</p>
<p>5. Agency Continued Funding</p> <ul style="list-style-type: none"> a. Compliance history b. Collaboration Initiatives c. Network Council/Quality Management Participant d. Reporting Compliance e. Copies of audits and optional review of compliance reports are received. f. Program is clearly aligned with MHB priorities g. Utilization of previous funding awards is on target 	<p>Repeat applicants should demonstrate a history of contract compliance, collaboration with program partners, and program impact consistent with MHB priorities. Staff is competent to provide service and supported with a supervision model.</p>	<p>Applicant meets or exceeds baseline program outcomes, has expanded or enhanced program services, and is contract compliant in most if not all areas. Personnel listings including credentials are complete. Program is clearly aligned with MHB priorities.</p>	<p>Applicant meets baseline the program outcomes and is contract compliant in some but not all areas. Program is moderately aligned with MHB priorities.</p>	<p>Applicant has been unable to effectively resolve difficulties in meeting program outcomes requirements and is unable to demonstrate consistent contract compliance. Program is minimally aligned with MHB priorities.</p>