

ADAMH Board of Franklin County Funding Requests Guidance for Applicants



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The Alcohol, Drug and Mental Health Board of Franklin County (ADAMH) welcomes applications for funding from qualified organizations¹ to serve the behavioral health needs of Franklin County residents. This document provides guidance and instructions for how to submit an application and explains how ADAMH will evaluate proposals that are submitted.

When to Submit Applications

Organizations may apply at any time during the year. However, except for emergency applications,² submitted applications will only be evaluated at three times throughout the year. Here are the evaluation dates:

- April 1 Operational/Programmatic requests
- July 15 Operational/Programmatic requests
- October 1 Capital requests

Decisions about applications will typically be made within a month of these evaluation dates. Applicants will be notified of decisions through an email sent to the person identified as the point of contact in the application.

In the case of emergency applications, submissions should still be made through the same [application form](#) but indicate that the request constitutes an emergency and applicants are encouraged to send an email to funding@adamhfranklin.org informing ADAMH that an emergency request has been submitted.

Where and How to Submit Applications

All applications should be submitted through this online form:
[ADAMH Funding Requests \(jotform.com\)](http://jotform.com)

Materials to Include as Part of Application

The following materials must be included in your application:

- Completed Form
- Narrative (to include answers to all questions found in Attachment C within this document)
- Project Budget (you may use the format found in Attachment D from this document, or you may use your own format if you include all budgetary information included on Attachment D.)

Incomplete applications will not be considered.

¹ ADAMH will make determinations about whether an organization is qualified based on the application materials submitted and the history of the people and the organization(s) involved in the project. The organization may be required to be certified by the Ohio Department of Mental Health and Addiction Services.

² Emergency requests are those which BOTH (1) threaten the ability of the provider to provide services and/or represent a significant safety hazard to clients or staff; and (2) could not reasonably have been foreseen.

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When you submit an application, you will subsequently receive a confirmation email stating that your application has been received. We will also confirm in that email whether your application is complete. Completed applications must be received by the evaluation date at 11:59 p.m. or they will be considered during the next funding round. Incomplete applications will not be considered.

Applications should be written to provide ADAMH reviewers with as complete a picture of your project or proposal. Proposals should not be conceptual in nature; rather they should be specific about costs and cost estimates, collaborations and partnerships, timelines and documented need. If ADAMH staff need additional information to help make funding recommendations, we may reach out to the submitting organization with questions.

Criteria for Evaluation

Attached to this document as “Attachment A” is a summary of how we will evaluate proposals. As should be clear from the distribution of points on Attachment A, we will place a strong emphasis on consistency with the 2020 Needs Assessment. We also will rank highly those proposals which include financial support from the applicant and/or the applicant’s partner organizations. Consult Attachment A for a full list of criteria.

For some funding cycles, ADAMH may focus on one particular type of project or targeted program. When this happens, this emphasis will be clearly stated on the website and the relative emphases of the scoring criteria will be adjusted to reflect the special area of emphasis.

There is no set number of points which guarantee funding. Funding of projects is dependent on availability of funds; strength of the proposal; and consistency of the proposal with the stated criteria.

Requests Not Subject to this Process

For existing providers wishing to make changes to their existing allocation formula, if those proposed changes are budget neutral (i.e., the changes have no impact on the total amount that has been allocated to the agency), it is not necessary to submit an application through this process. Instead, agencies wishing to make a budget neutral change should do the following:

- Clearly define the proposed change and the reason for the change
- Clearly show the impact of the proposed change on specific allocations and on the amount and types of services you are providing;
- Submit this documentation at any time during the calendar year prior to October 15 using the online form: [ADAMH Funding Requests \(jotform.com\)](https://jotform.com).

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Attachment A. Criteria for Evaluation

- Demonstrate consistency with [2020 Needs Assessment](#) 30 pts
- Consistency with Areas of Emphasis for funding cycle (if applicable) up to 20 pts
- Is applicant a current provider? 10 pts
 - a. If current provider submitting claims: 10 pts
 - b. If current specialty provider: 5 pts
 - c. If not provider: 0 pts
- What percentage of project cost is requested from ADAMH? 20 pts
 - a. 30% or less 20 pts
 - b. 31% to 50% 15 pts
 - c. 51% to 70% 10 pts
 - d. 71% to 90% 5 pts
 - e. 91% or more 0 pts
- Project readiness and plan preparation 20 pts
 - a. Solid concept/research based 5 pts
 - b. Partnerships in place 5 pts
 - c. Personnel plans in place 5 pts
 - d. Target population defined + measurement in place 5 pts

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Attachment B. Information to have prepared to complete the [application form](#)

Funding Requests to ADAMH Board of Franklin County

Name of Organization:

Address:

Point of Contact Name for this request:

Email and Phone for Point of Contact:

This request is for:

- program/operations shift of existing provider allocation
- capital funds

Is this an emergency request? (For definition of "emergency," see footnote 3 on page 1 of this document)

- Yes No

Brief description of the project/request

Amount of funding requested from ADAMH:

Amount of funding for project provided by applicant:

Amount of funding for project provided by other sources (list sources and amounts):

Source	Amount	Check if pending
	\$	<input type="checkbox"/>

Briefly describe the project timeline:

What is the current nature of applicant's financial relationship to ADAMH?

- Receive funding as a provider and submit claims
- Receive funding but do not submit claims
- Do not currently receive funding

Attachment C. Questions to be answered by applicant

For capital projects, answer the first set of questions. For programmatic funds, answer the second set of questions. Answer these questions as part of your narrative included in the [application form](#). You may cut and paste these questions, or you may answer them in the body of your narrative.

Capital Projects

1. Please check as many of the following boxes as are appropriate for your project.
This project would be considered:
 - a. New build
 - b. Renovation of your current structure
 - c. Renovation of a structure not yours or not currently used by your organization
 - d. Major repairs/maintenance
2. Provide a detailed description of what you plan to do. Include the reason why this project is necessary.
3. What will happen if you are not able to move forward with this project?
4. At what phase are you in the work? What is the anticipated completion date?
5. Do you own the land and/or structure on which you are proposing to do this work? If not, explain the nature of your organization's financial relationship with the land/structure.
6. Do you have credible estimates obtained in the last six months of how much the work will cost to complete? If not, what is your basis for your project cost figure? If so, what are the estimates, and do you still consider them accurate?
7. If the project will be financed in part, explain the financing arrangements you have in place.
8. Who is the project manager for your project? How much experience does this person have with building projects?

Program Projects

1. Provide a detailed description of the project. Why is there a need and how do you know that the need exists? Explain how the project aligns with at least one ADAMH system of care. Is the program consistent with the [ADAMH Community Needs Assessment from 2020](#)?³
2. What is the target population? Are there specific zip codes targeted for the project? How does the population align with the [ADAMH Community Needs Assessment](#)?
3. Describe the capacity of your organization or partnership to implement the proposed project and to track its results.
4. Describe your sustainability plans for this project? ADAMH funding is not guaranteed beyond the current grant funding cycle.

³ The Needs Assessment may be found on the ADAMH Board of Franklin County website at <https://adamhfranklin.org/resources/communityneeds/>

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Attachment D. Project Budget

Budget Instructions

Complete a budget for your proposed project using the appropriate format found in this attachment, or you may use your own format if all budget categories found on this page are accounted for.

Indirect and administrative costs may be included in your request. The amount you request from ADAMH for indirect and/or administrative costs may not exceed 17% of the total project amount requested from ADAMH.

Note that your sources of funds (i.e., your revenue budget) is part of the [application form](#).

For Programmatic Requests

	ADAMH Request	Total Project Amount
Personnel (including payroll taxes and fringe)		
Supplies/Equipment		
Consultants/Partners		
Materials Development		
Evaluation		
Space Rental		
Indirect Costs/Administration		
Other (list)		
TOTAL		

For Capital Requests

Land
Design
Construction
Consultants (separate line for each)
Contingency (_____% of construction costs)
Permits and Legal