

Children First Trust Fund

Department of Mental Health ()

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Application Form

About the Agency

Project Name*

Please provide the name of your agency.

Agency Contact*

Name of person to contact for questions about CFTF reporting.

Kim Hammack

To Whom Should Plan of Investment Approval be Addressed*

Please provide name and full address of person to whom the Plan of Investment approval letter should be sent.

Alabama Department of Mental Health; 100 North Union Street; Montgomery, Alabama 36130

Amount of Funds

Provide the amount of your allocation from CFTF for 2015-16*

\$2,022,457.00

If you will carry over funds from previous year, please provide that amount.

Plan of Investment

According to the law that establishes the Children First Trust Fund, each agency will submit a "Plan of investment [that includes] but [is] not... limited to, a minimum of four (4) quality assurance items...Quality assurance items shall include the number of children receiving service, an identifiable measure of success of services provided and a prioritized standard of successful measures for future plans of investment." (Section 5) Please complete the questions below as they specifically relate to the Children First Trust Fund money allocated to your department and how you will measure and report success.

Overall Impact Statement*

Explain what overall impact the CFTF allocation to your department will have on children, families, and/or the overall well being of the state. What need(s) will be met and/or what impact will your agency's actions have?

Provide expanded community-based services across the DMH Service System to children/adolescents and their families that are in crisis due to Serious Emotional Disturbance, Intellectual Disability, and/or Substance Abuse needs.

Quality Assurance Item 1

Activity*

List a specific, measurable action your agency will take with the CFTF allocation to contribute to the overall impact

Provide funding for community based outreach services for children with Serious Emotional Disturbances (SED), such as In-Home Intervention services (FIND Teams) and case management services.

Measurement*

How will you measure the activity and/or the impact of the activity?

number of children served.

Provide the amount budgeted for this quality assurance item.*

\$405,000.00

How often will you measure the success of this quality assurance item?*

Annually

Quality Assurance Item 2

Activity*

List a specific, measurable action your agency will take with the CFTF allocation to contribute to the overall impact

Provide funding for home based services for children with Developmental Disabilities (DD) to include for Respite and Diversion for Institutional care.

Measurement*

How will you measure the activity and/or the impact of the activity?

number of children served.

Provide the amount budgeted for this quality assurance item.*

\$172,875.00

How often will you measure the success of this quality assurance item?*

Annually

Quality Assurance Item 3

Activity*

List a specific, measurable action your agency will take with the CFTF allocation to contribute to the overall impact

Provide funding for Intensive Adolescent Outpatient services for children with Substance Abuse (SA) issues/needs.

Measurement*

How will you measure the activity and/or the impact of the activity?

number of children served.

Provide the amount budgeted for this quality assurance item.*

\$536,458.00

How often will you measure the success of this quality assurance item?*

Annually

Quality Assurance Item 4

Activity*

List a specific, measurable action your agency will take with the CFTF allocation to contribute to the overall impact

Provide funding for cross-division (MI, SA, ID) and cross agency (DMH, DYS, DHR) collaborative projects - Mental Health Juvenile Court Liaisons and OUR Kids Collaboration.

Measurement*

How will you measure the activity and/or the impact of the activity?

number of children served.

Provide the amount budgeted for this quality assurance item.*

\$908,124.00

How often will you measure the success of this quality assurance item?*

Annually

Quality Assurance Item 5 (optional)

Activity

List a specific, measurable action your agency will take with the CFTF allocation to contribute to the overall impact

Measurement

How will you measure the activity and/or the impact of the activity?

Provide the amount budgeted for this quality assurance item.

How often will you measure the success of this quality assurance item?

Quality Assurance Item 6 (optional)

Activity

List a specific, measurable action your agency will take with the CFTF allocation to contribute to the overall impact

Measurement

How will you measure the activity and/or the impact of the activity?

Provide the amount budgeted for this quality assurance item.

How often will you measure the success of this quality assurance item?

File Attachment Summary

Applicant File Uploads

No files were uploaded