



St. Charles 708 Mental Health Board Application for Funding Completion Guidance

Guidance for completion of Section 2: Designated Program/Priority

1. Describe How the designated program/priority/activity aligns with the vision and mission of the City of St. Charles 708 Mental Health Board. How does your organization's human service outlook and practice serve St. Charles residents mental health, substance abuse and developmental disabilities.
2. Purpose is defined as the reason for Why the program/priority exists. What is the conceptual idea and how does it improve the quality of life for identified St. Charles residents. Do not list goals, interventions, activities or timeline here. Example: The program exists to provide treatment to people experiencing substance abuse.
3. Describe the need of the program or priority. Who are the individuals to be served? Provide details, identifiers and characteristics of the target population. Focus on who. Example: the CDC reports low income substance abusers are at increased risk of unemployment, homelessness and incarceration; List who program/priority is intended to prevent-reduce substance abuse in particular target group.
4. Describe the specific activities of the program or priority. Specific activities are the interventions, groups, treatment, volunteer training, education, modalities of What you do. A program/priority may have numerous, multifaceted elements; the intention of these activities is to meet the needs of the targeted individuals.
5. Describe the timeline or schedule activities of the program or priority. Include a begin and end date for each priority or program. The timeline is When activities occur. This may involve an hourlong intake interview, a ten-week group therapy program, an ongoing intervention where clients come and go according to their treatment plan, etc. The focus here is when interventions occur with begin and end dates defined as best as possible.
6. Describe the goal(s) with a description of the anticipated major outcomes. The goal(s) is essentially: all your effort is directed towards an intended result. How you establish goals may be complex; successive approximations in a chain towards a global result, or a simple yes/no achievement. Provide a clear definition of the goal(s), how measured and outcome results.
7. List total number of all people served annually by your organization.
8. List total number of City of St. Charles residents served annually (residents in wards 1-5 per City map).
9. List City of St. Charles residents served annually by this program/priority.
10. Project any anticipated increase/decrease of residents to be served in the next funding year.
11. Project service hours per program/priority and how computed.



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12. List staff and training/credentials of service providers for program/priority.
13. Provide a brief budget of anticipated expenditures for each designated program or priority, including revenues from other sources. Make sure there is a clear description for the use of the funds. Do not include your overall organization's financial statements.

The City of St. Charles 708 Mental Health Board requests an itemization of expenses. Example: total request amount \$22k; Anticipated expenses- \$12k clinical salaries (240 hrs. at \$50 hr.), \$3k facilities- rent, utilities, \$3k materials, handouts, etc., \$2k administrative support/overhead, \$1k tests (drug or whatever), \$1k MD services. Individuate expense items- more specificity is desirable. Include other sources of anticipated revenue (client co-pays, insurance, foundation-grants).

14. Provide percentage of amount the program/priority represents of your total organization budget.
15. Provide percentage of amount the program/priority request represents of your organization's total cost for that program/priority (e.g., 10%, 100%- show how computed).
16. List other funding sources and anticipated revenue for this program/priority (may be noted in #13 for current year funding sought) but we're looking at your exploring future funding sources as well.

Guidance for completion of Section 4: Allocation Expenditure Summary

Provide a summary report of actual funding received the previous year documenting how your organization spent funds on the designated program or priorities listed in the application: The City of St. Charles 708 Mental Health Board requires an accounting of funds received. When completing this section, tell us how you spent the money. Look at your application from the previous year; section 4, item 10, budget., list and match up the expense categories with what you requested and what you spent. List each priority separately and budget for each priority in this section. Example: Designated Program/Priority 1. Funds actually received \$15k, funds were spent as follows: \$11k clinical salaries: 40 hrs. RN at \$50, 100 hrs. social work at \$30 hr., 20 hrs. MD at \$100 hr, 200 hrs. staff aides at \$20 hr.; \$2k on office rent, utilities, phone., etc.; \$2k on computer resources, handouts, training Tell us how many St. Charles clients were served, service hours provided and an overall narrative of the results of this program/priority. We are interested in best practices; what is "working" and are the residents accessing and benefitting from high-quality programs and services.