

Massachusetts Children’s Behavioral Health Innovation Awards

Description of the award: The Massachusetts Children’s Behavioral Health Innovation Award, co-sponsored by the Blue Cross Blue Shield of Massachusetts Foundation and the Massachusetts Association for Mental Health (MAMH),¹ is a one-time grant of \$10,000 awarded to a non-profit children’s behavioral health or social service organization in recognition of its effort to:

- Fill an unmet need or gap in the children’s behavioral health care delivery system; or
- Respond to a “wicked” problem facing the children’s behavioral health field through creation of an innovative program or practice.

The award is intended to recognize and catalyze an ***existing*** program or practice. This could mean a project that is in an early stage of development such as a pilot or something that is currently in operation at a small scale (e.g. one staff person or at a single program or site) but shows promise and potential for replication or scale-up. It is ***not*** intended to test an idea that has not yet been put into operation.

Award purpose and goals: For many human service agencies it can be challenging to take a great idea “to the next level.” Because human services operate on tight budgets and are focused on day-to-day operations and care of children and families, they frequently do not have the time or personnel to pursue and/or write grants or engage in marketing activities. With that context in mind, the MA Children’s Behavioral Health Innovation Award funding can be used for one or more of the following purposes:

- Hiring a consultant grant writer or fundraiser
- Training or coaching activities
- Strategic planning activities through the services of a consultant
- Production of marketing or outreach materials; and/or
- Evaluation activities to generate research evidence/support for the innovation.

¹ The Blue Cross Blue Shield Foundation and the MAMH are funding this award. No award funding is coming from the Massachusetts Department of Mental Health. The Commonwealth of Massachusetts and its agencies and subdivisions make no representations as to the ultimate taxability of the Award payment and the Award recipient is responsible for all tax liabilities, penalties, and interest for failure to timely pay estimated or other tax liabilities resulting from the Award.

This “kick-starter” funding and designation as the winner of the MA Children’s Behavioral Health Innovation Award affords the following opportunities:

- Ability to leverage the award to secure a larger grant award or funding.
- Greater exposure for the innovation on a statewide level through a presentation at the Children’s Behavioral Health Knowledge Center’s Annual Symposium. The Symposium is attended by over 150 people including policy makers, youth and family members, advocates, members of the philanthropic community, academics, service providers, and practitioners.
- Ability to “market” or “brand” the innovation as the winner of the MA Children’s Behavioral Health Innovation Award.

Eligibility criteria: Non-profit children’s behavioral health (mental health and/or substance use) organizations, community health centers, schools, or other community-based human/social service providers located in Massachusetts that serve youth and young adults are encouraged to apply. This could include organizations that do not provide behavioral health services as a primary activity as long as the proposed activity is clearly connected to children’s behavioral health.

Funds are awarded to an entity and not to a specific individual. Eligible entities must be either a 501(c)3 not for profit organization or in the case of a school district, an incorporated city/town/municipality.

2018 Innovation focus areas: The focus areas for this year’s MA Children’s Behavioral Health Award funding are:

- 1) Behavioral health care provision in schools
- 2) Improving access to children’s behavioral health care including creative delivery approaches or use of innovative technology
- 3) Behavioral health staff recruitment and retention strategies

Within the three topic areas above, the proposed innovation area can focus in on (or target) any children’s behavioral health age category from infant/early childhood up through transition age youth and young adults.

Application submission process: Applications must be submitted **online** at: <https://www.surveymonkey.com/r/CBHinnovate> no later than **Wednesday, March 14th at 5 pm**. No paper applications will be accepted. Late submissions will NOT be reviewed. For your application to be considered complete, you **MUST** send via electronic mail attachment: a) a budget for how the funds will be spent if awarded AND b) a copy of the organization's 501(c)(3) tax certificate (unless the applying entity is a city/town/municipality as would be the case for a school). In



addition it is an **option** to attach **ONE** supplemental document (e.g. an outcomes report, brochure, letter of support, etc.). All attachments must be received by the deadline and sent to Jessica Horton at: jhorton@donahue.umassp.edu When sending the attachments please note in the subject line your organization's name and CBH Innovation Award App (e.g. XYZ Incorporated CBH Innovation Award App).

Be aware that once you begin the online application **you must complete it in one sitting, there is no option to save your work and return later.** It is recommended that you review the sample application questions located on the [Knowledge Center's website](#) and complete your responses in a word processing document from which you can cut and paste into the online application.

*By submitting an application you are agreeing to present your innovation (if selected) at this year's Children's Behavioral Health Knowledge Center Symposium on **June 1, 2018** at the Worcester Recovery Center and Hospital.*

Review committee: A committee will review all applications that meet the minimum submission criteria and select three “finalists” to present their innovation at the Symposium. Review criteria are below. In addition to the criteria below the Committee is looking to achieve a balance across the projects in areas such as: geography, population of focus, type of issue addressed, organization type and size.

1. How well defined and clearly operationalized is the innovation?

Extremely clear – *The innovation is extremely well defined and operationalized. I do not have questions about how it operates or works. I could easily explain what it is to someone else.*

Very clear – *The innovation is well defined and operationalized. I have one or two questions about how it operates or works. I could explain it to someone else.*

Moderately clear – *The innovation is moderately clear. I have a few questions about how it operates or works. I could explain the basic idea to someone else but would have trouble with specifics.*

Slightly clear – *The innovation is slightly clear. I have many questions about how it operates or works. I would have difficulty explaining it to someone else.*

Unclear – *The innovation is not well defined or clear. I do not understand how it operates or works or what its' purpose is. I could not explain what it is to someone else.*

2. Is the proposed innovation a novel, unique, and potentially “disruptive” innovation in the children’s behavioral health care field?

Extremely novel or unique – *This isn't something I've heard of before (or never heard of it used or applied in the behavioral health care context).*

Very novel or unique – *I’ve heard of this before but not in our state/ community context. It is a very novel or unique approach to the issue.*

Moderately novel or unique– *I’ve heard of this before and am aware of a few others who are using this approach. It is a moderately novel or unique approach to the issue.*

Slightly novel or unique - *I’ve heard of this before and am aware of several others who are using this approach to address the issue. It is only slightly novel or unique.*

Not novel or unique – *This is something many others are doing. It is not a novel or unique approach to addressing the issue.*

3. What is the potential for replication/dissemination or “scale-up” of the innovation? At the program/site/organization and/or at other programs or organizations across the state?

High potential – *This innovation could be easily replicated or disseminated to other sites/organizations/programs OR could be easily scaled-up at the current site to serve additional people. It would not take large sums of money and/or significant human resources to implement this innovation broadly.*

Moderate potential – *This innovation could be replicated or disseminated to other sites/organizations/programs OR could be scaled-up at the current site to serve additional people. It would take a moderate amount of money and/or human resources to implement this innovation broadly.*

Limited potential – *This innovation has limited potential for replication or dissemination to other sites/organizations/programs OR it has limited potential to serve additional people. It would take large sums of money and/or significant human resources to implement this innovation broadly.*

No potential – *This innovation cannot be replicated or disseminated to other sites/organizations/programs OR cannot be scaled-up at the current site to serve additional people. There is something unique about the current implementation environment that cannot be replicated.*

4. Does the proposal for how funds will be used meet the “allowable” criteria (e.g. training, consultant, marketing, etc.)? If yes, is the proposal for how funds will be used feasible given the budget and the organization’s capacity to implement the proposal?

Extremely feasible – *The proposed use of funds is extremely feasible. There is no question that the project can be accomplished given the proposed budget and available time and resources.*

Very feasible – *The proposed use of funds is very feasible. It is very likely the proposal can be accomplished given the proposed budget and available time and resources.*

Moderately feasible – *The feasibility of the proposed use of funds is moderately feasible. It is more likely than not that the proposal can be implemented given the proposed budget and available time and resources.*

Slightly feasible – *It is unlikely (but possible) that the proposal can be implemented given the proposed budget and available time and resources.*

Not feasible – *The proposal for the use of funds cannot be accomplished within the available budget or within a reasonable amount of time or with given resources. **OR** The proposal for how funds will be used does NOT meet the “allowable” criteria.*

Finalist presentation and award selection process: The three finalists will have 18-20 minutes to present their innovative program or practice at the CBHKC Symposium. Attendees will be given criteria to evaluate each “pitch” and using criteria such as innovativeness, potential for impact, and readiness for scale-up or replication/dissemination. Symposium attendees will then vote to select the winner of the 2018 CBH Innovation Award using a text voting feature.

The final selection process is an innovation in and of itself in that it actively engages Symposium attendees in what is being presented AND it allows a broad stakeholder audience inclusive of providers, advocates, family members, and policy makers to endorse those programs or practices that they believe have the greatest potential for impact here in Massachusetts.

Post-award requirement: The winner of the MA CBH Innovation Award will be required to submit a brief report describing the outcome or impact of the award approximately one year post-award.