

# Proposal Cover Sheet

## Proposal Request Information

**Grant**

City of Columbia ARPA-Mental Health Access (4-23) (Initial Staff Review)

**Organization Name (will auto-populate)**

Burrell, Inc.

**Fund Source**

City of Columbia ARPA-Mental Health Access (Apr 2023)

**Funder**

City of Columbia

**Funding Cycle**

April 2023

**Name of Program or Project**

Columbia Behavioral Crisis Center

## Program Information

**Program Website (will default to Organization website)**

http://www.burrellcenter.com

**Program Address (will default to Organization Physical Address)**

**Address**

2885 West Battlefield Road

City	State	County
Springfield	Missouri	Greene County
<b>Zip</b>		
65807		

**Program Mailing Address (will default to Organization Mailing Address)**

**Address**

2885 West Battlefield Road

City	State	County	Zip
Springfield	Missouri	Greene County	65807

**Program Administrator Name**

Marissa VanDover

**Phone Number**

573-777-7509

**Program Administrator Title**

Director, Behavioral Crisis Center, Rapid Access Unit

**Email**

marissa.vandover@burrellcenter.com

## Link to Organization Profile Record

**Link to Organization Records**

Organization Profile | Link Info

Organization Name (the offi...	Organization Mailing Address:	Head of Organization	Record ID	Active	Delete	Date
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Burrell, Inc.	2885 West Battlefield Road	C.J. Davis	15293	<input checked="" type="checkbox"/>		Added on 10/10/2023
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Total Active Links:1, Total Deactivated Links:0, Current Active Links:1, Current Deactivated Links:0

**Federal EIN Number (will auto-populate)**

43-1081715

Linked 'Reporting - Narratives, Budget, and Demographics (V4.1)' Records

**HMUW 2023 Financial Stability Proposal**

Linked 'Reporting - Program Outcomes and Services (V4.1)' Records

**HMUW 2023 Financial Stability**

Linked 'Agreement Form (City ARPA) Outcomes & Services' Records

**Link Instructions\_**

Linked 'Agreement Form (City ARPA) Budget & Demographics' Records

**Link Instructions\***

Linked 'Supplemental Funding Request - V4.1' Records

**Link Instructions**

Linked 'FACE Performance Measures Agreement (V2)' Records

**Link Instructions**

## Program Overview (City ARPA)

### Program Proposal Form Information:

**The purpose of the Program Overview form is to provide detailed information regarding the program and proposed service(s).**

#### Guidelines:

**Information should be based on the proposed contract/agreement period.**

**Information provided should be for the entire program, not just the portion proposed to be contracted/funded by the City of Columbia.**

**Each narrative response should be clear and succinct.**

**Information provided in the Program Overview form must correspond with the information provided in the Program Personnel and Budget and Program Outcomes and Services forms.**

**All sources of information should be properly cited using the American Psychological Association (APA) Style of author-date method of in-text citation. All sources that are cited must appear in the reference list at the end of this form.**

#### Resources:

**Boone Indicators Dashboard (<http://booneindicators.org>)**

**For detailed information regarding the APA Style, please visit the APA Style web site:<http://www.apastyle.org/> ARPA Funding Toolkits**

**ARPA Final Rule Overview**

**\* Indicates Required Field**

#### Record Lock

1

### Nondiscrimination Affirmation

**I will not discriminate on the basis of race, color, sex, religion, national origin, ancestry, marital status, age, disability, sexual orientation, gender identity, gender expression, receipt of governmental assistance, alienage or citizenship status, status as a survivor of sexual or domestic violence, or order of protection status, or veteran status either in its employment practices or in its policies and procedures concerning access to services.**

I agree

### Statement of the Issue Being Addressed

**The Statement of the Issue Being Addressed responses should use data to provide evidence that the problem exists, demonstrate the size and scope of the problem, and document the effects of the problem on the target population and the larger community.**

**ARPA funds must be used to respond to the far-reaching public health and negative economic impacts of the pandemic, provide premium pay for essential workers, or invest in sewer, water and broadband infrastructure.**

**What ARPA Category does the Proposal Address? Reference the ARPA Final Rule Overview (above) for more information.**

Public Health & Economic Impacts (Public Health Response)

#### Primary funding source

Mental Health Access

**Which enumerated use does your program address? ARPA guidelines require funded proposals to fall with an enumerated use and/or provide justification. Reference the ARPA Final Rule Overview (above) for more information.**

Behavioral health facilities & equipment

**Please note: Subrecipients are entities that receive a subaward from a pass-through entity to carry out part of a federal program. Subrecipients do not include an individual that is a beneficiary of such award. A subaward creates a federal assistance relationship with the subrecipient and subjects the subrecipient to federal compliance requirements. Characteristics which support the classification of the non-federal entity as a subrecipient include when the non federal entity: (a) determines who is eligible to receive what federal assistance; (b) measures performance based on meeting objectives of federal program; (c) is responsible for programmatic decision making; (d) is responsible for ensuring federal requirements outlined in the award are followed; and (e) uses the federal funds to carry out a program as opposed to providing goods or services.**

The following is applicable only to offerors who propose to be subrecipients:

Consistent with 2 CFR Section 200.332(b), City staff will evaluate each potential subrecipient's risk of noncompliance with Federal statutes, regulations, and the terms and conditions of the subaward for purpose of determining appropriate subrecipient monitoring, which may include consideration of such factors as: (1) subrecipient's prior experience with the same or similar subawards; (2) the results of previous audits whether or not the subrecipient receives a Single Audit in accordance with Subpart F of this part, and the extent to which the same or similar subaward has been audited as a major program; (3) Whether the subrecipient has new personnel or new or substantially changed systems; and (4) the extent and results of Federal awarding agency monitoring.

**Funding can be awarded to beneficiaries, subrecipients or contractors. The definitions are as follows; a beneficiary is an individual who is the end user of the assistance (direct aid to the individual or entity needing the benefit). A subrecipient is an entity that receives a subaward from a pass-through entity to carry out part of a federal program. A contractor is an entity that enters into a legal instrument by which a recipient/subrecipient purchases goods or services needed to carry out the project or program under a federal award. I am applying as a:**

Subrecipient or Contractor (Receives a subaward from a pass-through entity to carry out part of a program, these organizations would implement programs that benefit others)

**Every effort should be made to utilize information from the Boone Indicators Dashboard, including the equity analysis, for both responses.**

**a. Describe the nature and scope of the problem in our community that the program will address (e.g. homelessness, child abuse and neglect, substance use, suicide, etc.). (1500 character limit)**

The effects of the COVID-19 pandemic on mental health in Central Missouri necessitates expanded crisis services in the City of Columbia. According to Missouri DMH, mental health diagnoses in Boone County increased from 2,842 in 2019 to 4,011 in 2021. Most clients were diagnosed through Emergency Room services, with most recent data from the Boone County Indicators showing high mental health/substance use hospitalization rates of 13.5 per 1,000 residents. The increase in mental illness and need for immediate treatment has put a strain on local emergency departments and law enforcement. The cost of mental healthcare also poses a disproportionate barrier to low-income residents. Most recent data shows that 7.8% of residents in both Boone County and the City of Columbia are uninsured, and 16.9% of Boone County residents are considered in poverty (Boone County Indicators). The lack of accessible mental health crisis care leaves emergency room services as the primary resource for residents in crisis situations, forcing them to choose expensive ER services or refrain from treatment. The Burrell Crisis Center model provides appropriate mental health services at a much lower cost than hospital emergency services, reducing the financial burden on uninsured clients.

**b. Describe any community-level equity issue(s) that will be addressed by the proposed program and its goal(s). (1000 character limit)**

The pandemic has disproportionately affected the health of communities of color. Non-Hispanic Black adults (48%) and Hispanic or Latino adults (46%) are more likely to report symptoms of anxiety and/or depressive disorder than Non-Hispanic White adults (41%) (Kaiser Family Foundation, 2020). Despite this, ethnic minorities are still chronically underserved; only 37.1% of Black and 35.1% of Hispanic adults with mental illness pursued treatment in 2020, compared to the national average of 46.2% (NAMI, 2020). The cost of mental healthcare also poses a disproportionate barrier to low-income residents. Most recent data shows that 7.8% of residents in both Boone County and the City of Columbia are uninsured, and 16.9% of Boone County residents are considered in poverty (Boone County Indicators).

## Proposal Goal and Overview

**a. State the goal(s) of the proposed program. The program goal(s) should correspond to the organization's mission statement and major goal(s), as stated in the Organization Profile. (500 character limit)**

Burrell's vision for local change is reflected in the BCC's project goals of: 1) increasing 24/7 rapid access treatment for those experiencing Serious Mental Illness or Substance-Use Disorder; 2) decreasing wait times for first responders connecting clients with care; 3) decreasing community wait times in Emergency Departments; and, 4) diversion of a significant number of clients from the county jail.

**b. Provide a detailed description of the proposed program that includes information for all program services offered, regardless of the funding source. Include information on how program services relate to proposed outcomes. (3000 character limit)**

Burrell's Crisis Center (BCC) will provide a 23-hour crisis receiving and stabilization program, accessible 24/7 to the public through the Rapid Access Unit, in addition to longer social-setting detox services and an Adult Crisis Stabilization Unit (ACSU) for more intensive stabilization services. The Rapid Access Unit is a Walk-in Crisis Center and access point for individuals in need of immediate psychiatric care, Medication-Assisted Treatment for opioid use, psychiatric assessment, initial assessment eligibility determination, brief therapy, peer support services, 23-hour observation, referral to appropriate follow up treatment and more. The goal of this service is to provide a supportive, safe environment during the uncomfortable and potentially dangerous detox process. The Social Setting Detox Program at Burrell is a non-medical, residential service that lasts for three days. Detoxification is the process of interrupting the momentum of compulsive drug and/or alcohol use in an individual with a substance use disorder. The detoxification process involves recovery from the effects of alcohol or other drugs and the treatment required to manage withdrawal symptoms and promote recovery. Burrell's trained staff provide 24-hour monitoring, observation, and support in a supervised environment so that clients can achieve initial recovery from the effects of alcohol or another drug. Social setting detox is characterized by its emphasis on peer and social support. It also provides care for clients whose intoxication or withdrawal signs and symptoms are sufficiently severe to require 24-hour structure and support, but the full resources of a medically monitored inpatient detox are not necessary. In the event any client exceeds our criteria for personal physical well-being, that client is immediately transferred to a local hospital for medical stabilization. The Adult Crisis Stabilization Unit provides another layer of services available to clients that do not require a locked hospital setting. Services include a nursing assessment, psychiatrist evaluation, medication education, therapy and psycho-educational groups in a safe environment. Eligible individuals include those who are 18+, able to tend to activities of daily living independently, voluntary admitted and needing further stabilization.

**c. Please explain how the proposal goals align with the City of Columbia's 2020-2025 Strategic Plan. Link to plan: <https://www.como.gov/strategic-plan/>**

The goals referenced above in section a, align with the following City of Columbia Strategic Plan goals: 1) Provide equitable community-centered public health and safety services to ensure the city is safe for all by increasing access to 24/7 behavioral health care and decreasing the amount of time first responders spend with clients in behavioral crisis; 2) Improve services to the City's most vulnerable populations by de-stigmatizing behavioral health services through increased access and education and: 3) Improve outcomes associated with the City's community safety function by decreasing wait time for first responders connecting clients to care and decreasing community wait times in emergency departments.

## Program Access--

**a. Provide details on the location, days/hours of operation (e.g. Monday-Friday, 8 a.m.- 5 p.m.), and any other logistical information for the proposed program. (600 character limit)**

The Behavioral Crisis Center, a walk-in crisis center, is open 24/7, 7 days a week, 365 days a year, and is currently housed 1805 E. Walnut in Columbia, Missouri. The Rapid Access Unit is a Walk-in Crisis Center and access point for individuals in need of immediate psychiatric care, Medication-Assisted Treatment for opioid use, psychiatric assessment, initial assessment eligibility determination, brief therapy, peer support services, up to 24-hour observation, referral to appropriate follow up treatment and more. This is an 18-and-up facility.

**b. Describe the eligibility criteria (e.g. income, age, etc.) to be utilized for determining eligibility for the proposed program. (600 character limit)**

The population of focus (POF) will be defined as adults (18+) experiencing a mental health crisis.

**c. Will consumers be charged a fee for the proposed program service(s)?**

Yes

**Provide a description of and rationale for the program fee. (600 character limit)**

Fees for service are charged to ensure sustainability of services. BBH has competitive rates and a payment policy in place. Part of that is making sure access to services is timely and easy. In order to serve our clients' behavioral health needs and to see them quickly, we need to be able to schedule initial and follow-up appointments. If a client does not have insurance, it is our promise to work diligently with the client to help them apply for financial assistance, place the client in our affordable Sliding Scale Fee program, and set up payment plans.

**d. Will the proposed program utilize a sliding fee schedule?**

Yes

**Provide rationale for the use and structure of the sliding fee schedule. (600 character limit)**

The sliding scale is a payment option based on household income, household size and standards established by the federal poverty guidelines. If a client does not have insurance, or has insurance that is not accepted by Burrell, the client may complete a sliding scale application and provide proof of income to determine their cost of services. If a client does not have any income, they will need to submit a written statement stating they do not have any income.

**Upload the sliding fee schedule. This must be the sliding fee schedule provided to program consumers. Please upload these documents in a PDF format.**

/document/download/filename/1700252994\_67940\_SlidingScaleSchedulefee.pdf/

## Program Consumers--

**a. Describe how the proposed program benefits impacted or disproportionately impacted households, communities or businesses. Refer to p. 19 of the ARPA Final Rule Overview for more information. (1000 character limit)**

The Columbia BCC will directly serve clients from low-income households and communities, a disproportionately impacted community as referenced in the ARPA Final Rule Overview. By providing 24/7/365 access, the BCC breaks down barriers to behavioral health services and meets clients where they are at with the appropriate services they are in need of. The BCC positively impacts the community by increasing access to care, specifically services that may not have been available to clients before, providing affordable access to care, destigmatizing behavioral health care through education and awareness, and providing inclusive services for all disproportionate communities within Columbia.

**b. Why will these particular consumers be served? (1500 character limit)**

Low-Income household and communities will be served as it is statistically supported that low-income individuals and families experience higher levels of behavioral health needs due to poverty. For example, Fang et al. conducted a study during the COVID-19 pandemic among 2,714 low-income participants in the United States and observed that food insecurity was associated with a 257% higher risk of anxiety and a 253% higher risk of depression (Perspectives in Poverty and Mental Health, 2022. NIH). Other factors that increase the need for behavioral health services include housing insecurity, lack of income, Adverse Childhood Experiences, chronic disease, higher mortality, and lower life expectancy.

**c. Describe any impediments or challenges in serving these consumers. (600 character limit)**

Impediments or challenges in serving these clients include, lack of transportation, mental health stigma, lack of access to available services, financial barriers, racial barriers as people are less likely to seek help if they think their doctor can't understand or empathize with their background, cultural differences, and experiences, and wait times. As stated in section a, the BCC positively impacts the community by increasing access to care, specifically services that may not have been available to clients before, providing affordable access to care, destigmatizing behavior.

### Program Consumer Demographics Instructions

**Complete the Residence, Race, Ethnicity, Gender, Income and Age sub-sections below to the best of your knowledge. The purpose of this section is to provide detailed demographic information for consumers to be served by your proposed program service(s) over the period of time as defined in the RFP. The totals for all sections should be identical. No individual should be counted twice under any sub-section. All counts are for unduplicated individuals. Information provided in the consumer demographics sub-section should correlate with the information provided in the rest of the proposal.**

### Residence

<b>Boone County (includes City of Columbia residents)</b>	<b>City of Columbia</b>
1000	0
<b>Cooper County</b>	
0	
<b>Howard County</b>	
0	
<b>Other Counties</b>	
0	
<b>Residence Total</b>	
1000	

### Race

<b>White (alone)</b>
750
<b>Black or African American (alone)</b>
140
<b>Multiple Races</b>
0

**Asian (alone)**

60

**Native Hawaiian or other Pacific Islander (alone)**

0

**Native American Indian or Alaskan Native (alone)**

10

**Some Other Race**

40

**Race Total**

1000

**Ethnicity****Hispanic or Latino (of any race)**

40

**Not Hispanic or Latino**

960

**Ethnicity Total**

1000

**Gender****Female**

530

**Male**

450

**Non-Binary, Trans, Other**

20

**Gender Total**

1000

**Qualified Census Tracts (QCTs)**

**To determine whether your program serves individuals living within a qualified census tract, please reference this website and select the following:**

**Select Missouri from the dropdown (upper right) Select Boone County from the dropdown (upper right) Click "Go"  
Select Color QCT Qualified Tracts under "Map Options" (left) Ensure 2023 is selected (left)**

**Use this map to provide a best estimate of individuals your program serves that reside inside or outside of Qualified Census Tracts.**

**Inside Qualified Census Tracts**

250

**Outside Qualified Census Tracts**

750

**Total**

1000

**Check if any of your Targeted Populations are Enrolled in the Following:**

SNAP-Food Stamps  
 TANF-Temporary Assistance for Needy Families (cash assistance)  
 WIC-Women, Infants & Children  
 LIHEAP-Energy Assistance  
 SSI-Supplemental Security Income  
 Pell Grants  
 Section 8 Vouchers  
 Medicare Part D-Low Income Subsidies

**Income****At or below 300% of Federal Poverty Level**

200

**At or below 185% of Federal Poverty Level**

150

**Income Total**

350

**Age****Under 5 years**

0

**5-19 years**

10

**20-59 years**

960

**60 years and over**

30

**Age Total (1)**

1000

**Program Quality--****a. Describe any external requirements of the proposed program and/or program service(s), such as licensing, minimum standards, etc. (600 character limit)**

Burrell's flagship Behavioral Crisis Center (BCC) in Springfield has demonstrated state and regionally recognized success regarding crisis stabilization and community impact and has, in fact, resulted in Burrell becoming the Technical Assistant for Missouri in regard to the development and implementation of Behavioral Health Crisis Centers across the state. Burrell BCC's follow DMH certification standards, 9 CSR30-7.010.

**b. Is the proposed program and/or service(s) currently accredited by a recognized accrediting body?**

Yes

**Provide the name of the accreditation agency. (300 character limit)**

DMH and CARF (Certified Accreditation for Rehabilitation Facilities)

**Provide the most recent dates of accreditation, including expiration date. (300 character limit)**

Burrell is CARF (Certified Accreditation for Rehabilitation Facilities) accredited, as well as the region designated Community Mental Health Center for DMH. Current accreditation 2023-2026.

**Provide a description of the accreditation process. (600 character limit)**

The accreditation decision is based on a review by a team of CARF surveyors on Burrell's compliance to CARF standards. CARF Surveyors review physical facility locations, guidelines/policies/procedures for service delivery, staff training and quality improvement and electronic health records.



**c. Are there best practices and/or standards for the delivery of the proposed program and/or program service(s)? Best practices and standards should be cited from reputable sources.**

Yes

**If Yes - Indicate, cite, and describe the available best practices and/or standards. (600 character limit)**

Burrell Behavioral Health strives to align our model of crisis stabilization in our Behavioral Crisis Centers with the guidelines cited by SAMSHA and specifically referenced in the National Guidelines for Behavioral Health Crisis Care Best Practice Toolkit.

The following EBPs are utilized in the Burrell BCC setting:

- 1) Cognitive Behavioral Therapy (CBT) and CBT Trauma Focused (CBT-TF),
- 2) Motivational Interviewing (MI)
- 3) Medication Assisted Treatment
- 4) Certified Missouri Peer Support Specialists

**d. Is there evidence to support the efficacy of the proposed program and/or program service(s)? Evidence must be up-to-date and scientifically-based and should be cited from scholarly research reports published in peer-reviewed journals or from credible government sources.**

Yes

**If Yes - Indicate, cite, and describe the evidence. (1500 character limit)**

Cognitive Behavioral Therapy: 1) NREPP; 2) EBPs for Substance Use Disorders, Workshop Proceedings, National Quality Forum, 2005. P.8; and, 3) Cognitive Therapy and Research, Vol. 36, October, 2012, pp. 427-440.

Medication Assisted Treatment: 1) NREPP; 2) National Quality Forum identifies MAT as effective in the treatment of SUDs.

Motivational Interviewing (MI): 1) NREPP; 2) National Quality Forum; and, 3) SAMHSA-HRSA Center for Integrated Health Solutions "Motivational Interviewing."

**e. Describe the quality improvement process utilized for the proposed program. Quality improvement is defined as systematic and continuous actions that are used to measurably improve services and program consumer outcomes. Include information on how consumer feedback will be collected and utilized to enhance service(s) and program outcomes. (1500 character limit)**

The Burrell Continuous Quality Improvement Department will partner with the BCC and staff to monitor all required data and outcomes. Referrals and enrollments into the BCC will be collected and monitored on a continuous basis. Evidence-backed outcome measures will be utilized to determine efficacy and client functioning; clients and caregivers will have regular opportunities to provide feedback through ongoing client satisfaction surveys and feedback mechanisms. Through these activities and data streams, periodic and ad hoc reports will be provided to project staff, based on the needs and input of the audience of these reports.

## Program Partnerships and Collaborations--

**a. Describe any partnership or collaborations that advance community-level solutions for the issue(s) the proposed program is intended to address, as indicated in the response to the Statement of the Issue Being Addressed. (1000 character limit)**

Burrell has existing service contracts with the Boone County Sheriff's Office, Columbia Police Department and the University of Missouri Psychiatric Center, where Burrell provides Certified Mental Health Liaison to assist in addressing the behavioral health needs of individuals. These relationships are continuing to develop and strengthen and will prove to be crucial partners in the successful implementation of the BCC. As previously stated, the buy-in of local law enforcement and medical providers is crucial for successful BCC referrals and promoting community awareness and trust. Local law enforcement and psychiatric center staff will receive training on the BCC resources and appropriate referral criteria, and BCC staff will also work with local psychiatric services when appropriate to address clients' long-term needs after initial stabilization and promote a continuum of care.

**b. Describe any partnerships or collaborations that enhance access to and/or the quality of proposed program. (1500 character limit)**

Burrell currently partners with Preferred Family Healthcare (PFH). PFH is a community-based health care organization that offers a range of SUD, mental health, developmental disability, employment and medical services across four states. PFH and Burrell entered a joint venture in 2022 which both remain intact under a single parent company, Brightli. In Columbia this means that Burrell partners alongside Clarity, a federally qualified health center, that is owned by PFH and ensures clients are provided with a full continuum of care that can include referrals to primary care, dental and vision care. Burrell is the designated 988 Call Center for Boone County and operates a continuum of crisis care that includes: mobile crisis response and co-responder model response in partnership with the Columbia Police Department.

**If MOUs or contracts/agreements related to the proposed program and/or service(s) are in place, please upload these documents in a PDF format (1):**

**If MOUs or contracts/agreements related to the proposed program and/or service(s) are in place, please upload these documents in a PDF format (2):**

**If MOUs or contracts/agreements related to the proposed program and/or service(s) are in place, please upload these documents in a PDF format (3):**

## References

**All in-text citations in this section of the proposal must be listed in the Reference List below, using the American Psychological Association (APA) Style. For detailed information regarding the APA Style, please visit the APA Style web site: <http://www.apastyle.org/> (5,000 character limit)**

Marbin D, Gutwinski S, Schreiter S, Heinz A. Perspectives in poverty and mental health. Front Public Health. 2022 Aug 4;10:975482. doi: 10.3389/fpubh.2022.975482. PMID: 35991010; PMCID: PMC9386343.

Artiga, S., Corallo, B., & Pham, O. (2020). (issue brief). Racial Disparities in COVID-19: Key Findings from Available Data and Analysis. Kaiser Family Foundation. Retrieved from <https://www.kff.org/racial-equity-and-health-policy/issue-brief/racial-disparities-covid-19-key-findings-available-data-analysis/>.

### System Fields

Record ID	Modification Date	Modified By	Creation Date	Created By	Assigned Programs
27830	11/21/2023 8:49 AM CST	Apricot Subsystem	10/10/2023 4:38 PM CDT	Jordan Bales City ADMIN	- Organizations

### Linked 'Agreement Form (City ARPA) Outcomes & Services' Records

**Link Instructions1**

### Linked 'Agreement Form (City ARPA) Budget & Demographics' Records

**Link Instructions2**

# Program Personnel and Budget (City ARPA)

## Program Personnel and Budget Form Information:

**The purpose of the Program Personnel and Budget form is to provide detailed information regarding the program personnel and budget.**

**Guidelines:**

**Information should be based on the proposed contract/agreement period.**

**Information provided should be for the entire program, not just the portion proposed to be contracted/funded by City of Columbia ARPA funds.**

**The "Program Budget - Revenue" section includes requested ARPA funds Each narrative response should be clear and succinct. Information provided in the Program Personnel and Budget form must correspond with the information provided in the Program Overview and Program Outcomes and Services forms.**

**All sources of information should be properly cited using the American Psychological Association (APA) Style of author-date method of in-text citation. All sources that are cited must appear in the reference list at the end of this form.**

**\* Indicates Required Field**

**Record Lock**

1

## Purchase of Service or Project Based Funding

**Instructions: Check the box that is applicable to current service/program funding. Terms are explained below: Purchase of Service: Select this option if you have a current purchase of service contract for the proposed program, and/or if you are applying as a contractor Project-Based: Select this option if your proposal includes a building project or if you are applying as a subrecipient Contractor: A Contractor is an entity that enters into a legal instrument by which a recipient or subrecipient purchases goods or services needed to carry out the project or program under a federal award. Contractor characteristics of a procurement relationship between the recipient /subrecipient and a contractor are when the contractor receiving federal funds (a) provides goods or services within their normal operations; (b) provides similar goods or services to other purchasers/entities; (c) normally may operate in a competitive environment; (d) provides goods or services that are ancillary to the operation of the federal program; and (e) is not subject to the compliance requirements of the federal program as a result of the arrangement (but may be subject to any federal requirements included in the contract as applicable to the contractor). Contractors are procured using either competitive bids or requests for proposals for a scope of service. Subrecipient: Subrecipients are entities that receive a subaward from a pass-through entity to carry out part of a federal program. Subrecipients do not include an individual that is a beneficiary of such award. A subaward creates a federal assistance relationship with the subrecipient and subjects the subrecipient to federal compliance requirements. Characteristics which support the classification of the non-federal entity as a subrecipient include when the non federal entity: (a) determines who is eligible to receive what federal assistance; (b) measures performance based on meeting objectives of federal program; (c) is responsible for programmatic decision making; (d) is responsible for ensuring federal requirements outlined in the award are followed; and (e) uses the federal funds to carry out a program as opposed to providing goods or services.**

**Select the option that is applicable to current service/program funding**

Project Based: Select this option if your proposal includes a building project or if you are applying as a subrecipient

## Program Budget - Revenue

Program Revenue	Proposed 2024	Proposed 2025	Proposed 2026	% of Proposed Total

**For each source of revenue, describe how funding will be utilized in the proposed program. Please note, requested ARPA funding is included in section 2. Government Contracts/Support, box G.**

1. Direct Support

<b>A. Heart of Missouri United Way (300 character limit)</b>	<b>1A</b>	<b>1F</b>	<b>1K</b>	<b>1A%</b>
	\$0.00	\$0.00	\$0.00	0
<b>B. Other United Ways (300 character limit)</b>	<b>1B</b>	<b>1G</b>	<b>1L</b>	<b>1B%</b>
	\$0.00	\$0.00	\$0.00	0
<b>C. Capital Campaigns (300 character limit)</b>	<b>1C</b>	<b>1H</b>	<b>1M</b>	<b>1C%</b>
	\$0.00	\$0.00	\$0.00	0
<b>D. Grants (non-governmental) (300 character limit)</b>	<b>1D</b>	<b>1I</b>	<b>1N</b>	<b>1D%</b>
	\$0.00	\$0.00	\$0.00	0
<b>E. Fund Raising &amp; Other Direct Support (300 character limit)</b>	<b>1E</b>	<b>1J</b>	<b>1O</b>	<b>1E%</b>
	\$0.00	\$0.00	\$0.00	0

2. Government Contracts/Support

<b>A. Boone County - Children's Services Funding (300 character limit)</b>	<b>2A</b>	<b>2L</b>	<b>2Z</b>	<b>2A%</b>
	\$0.00	\$0.00	\$0.00	0
<b>B. Boone County - Community Health Funding (300 character limit)</b>	<b>2B</b>	<b>2M</b>	<b>2AA</b>	<b>2B%</b>
	\$0.00	\$0.00	\$0.00	0
<b>C. Boone County - Other Funding (300 character limit)</b>	<b>2C</b>	<b>2N</b>	<b>2AB</b>	<b>2C%</b>
	\$0.00	\$0.00	\$0.00	0
<b>D. Funding from Other Counties (300 character limit)</b>	<b>2D</b>	<b>2O</b>	<b>2AC</b>	<b>2D%</b>
	\$0.00	\$0.00	\$0.00	0
<b>E. City of Columbia - Social Service Funding (300 character limit)</b>	<b>2E</b>	<b>2P</b>	<b>2AD</b>	<b>2E%</b>
	\$0.00	\$0.00	\$0.00	0
<b>F. City of Columbia - CDBG/Home Funding (300 character limit)</b>	<b>2F</b>	<b>2Q</b>	<b>2AE</b>	<b>2F%</b>
	\$0.00	\$0.00	\$0.00	0
<b>G. City of Columbia - Requested ARPA funding (300 character limit)</b> Burrell, Inc. requests \$3,000,000 to offset construction costs associated with building a new BCC.	<b>2G</b>	<b>2R</b>	<b>2AF</b>	<b>2G%</b>
	\$3,000,000.00	\$0.00	\$0.00	100
<b>H. Funding from Other Cities (300 character limit)</b>	<b>2H</b>	<b>2S</b>	<b>2AG</b>	<b>2H%</b>
	\$0.00	\$0.00	\$0.00	0
<b>I. Federal (Medicaid, Title III, etc.) (300 character limit)</b>	<b>2I</b>	<b>2T</b>	<b>2AH</b>	<b>2I%</b>
	\$0.00	\$0.00	\$0.00	0
<b>J. State (Purchase of Service, Grants, etc.) (300 character limit)</b>	<b>2J</b>	<b>2U</b>	<b>2AI</b>	<b>2J%</b>
	\$0.00	\$0.00	\$0.00	0
<b>K. Other (Schools, Courts, etc.) (300 character limit)</b>	<b>2K</b>	<b>2V</b>	<b>2AJ</b>	<b>2K%</b>
	\$0.00	\$0.00	\$0.00	0
<b>3. Program Service Fees (300 character limit)</b>	<b>3.</b>	<b>3A</b>	<b>3B</b>	<b>3%</b>
	\$0.00	\$0.00	\$0.00	0
<b>4. Investment Income (300 character limit)</b>	<b>4.</b>	<b>4A</b>	<b>4B</b>	<b>4%</b>
	\$0.00	\$0.00	\$0.00	0
<b>5. Other Revenue Items (300 character limit)</b>	<b>5.</b>	<b>5A</b>	<b>5B</b>	<b>5%</b>
	\$0.00	\$0.00	\$0.00	0

Total Program Revenue **Total Revenue**  
3000000

### Expenses - Project Based

**Personnel:** include salary expenses for project-related staff employed by the applicant (costs for project staff who are not employees of the applicant should be included in the Contracted Services/Other Compensation section). **Benefits and Payroll Taxes:** include - employer portion of federal, state, and local taxes health, life, and disability insurance related to the programs funded employee(s) retirement (only 401(k), 403(b) or pension) related to the programs funded employee(s) **Contracted Services/Other Compensation:** include costs for contractors/consultants or compensation to project partners, including estimated hours, hourly rate, travel, or other direct project expenses. **Note:** Contracted Services for this project must adhere to federal budget guidelines. **Travel:** Travel can be included for project staff only. If conference travel is requested, travel must adhere to City travel policy which includes coach airfare, per diem and standard mileage not to exceed established federal rates. **Equipment:** includes anything tangible that has a useful life of over one year and a value of \$5,000 or more. **Other Direct:** Include any other expense that can be directly traced to the project. Contractors or compensation to project partners should be included in the Contracted Services/Other Compensation section. **Indirect Expense:** Include organizational expenses shared among projects and/or functions, such as executive management, accounting, grants management, human resources or administrative and other support services, office equipment and supplies, telecommunications, occupancy, insurance, utilities, facility maintenance, etc. The City will consider indirect expenses for the portion of employee compensation funded only by ARPA (includes salary and benefits & payroll taxes).

	Proposed 2024	Proposed 2025	Proposed 2026	% of proposed total
<b>1. Personnel - salary, benefits and payroll taxes (300 character limit)**</b>	<b>1. **</b>	<b>1.1</b>	<b>1.2</b>	<b>1. ** %</b>
	\$0.00	\$0.00	\$0.00	0
<b>2. Contracted Services &amp; Other Compensation (300 character limit)**</b>	<b>2. **</b>	<b>2.1</b>	<b>2.2</b>	<b>2. **%</b>
Costs associated with construction of a BCC at 70 E Lindsay Ln.	\$3,000,000.00	\$0.00	\$0.00	100
<b>3. Travel (300 character limit)**</b>	<b>3. **</b>	<b>3.1</b>	<b>3.2</b>	<b>3. **%</b>
	\$0.00	\$0.00	\$0.00	0
<b>4. Equipment (300 character limit)**</b>	<b>4. **</b>	<b>4.1</b>	<b>4.2</b>	<b>4. **%</b>
	\$0.00	\$0.00	\$0.00	0
<b>5. Other Direct Expenses (300 character limit)**</b>	<b>5. **</b>	<b>5.1</b>	<b>5.2</b>	<b>5. **%</b>
	\$0.00	\$0.00	\$0.00	0
<b>6. Indirect Expenses (300 character limit)</b>	<b>6. **</b>	<b>6.1</b>	<b>6.2</b>	<b>6. **%</b>
	\$0.00	\$0.00	\$0.00	0
<b>Total Project Expenses</b>	<b>Total Project Expenses</b>			
	3000000			

### Program Budget Narrative/Justification

**Revenue Budget Narrative/Justification:** The budget narrative gives the item by item breakdown for each category and shows the calculations used to derive the revenue. The budget narrative should explain how the revenue was estimated.

To see an example, please follow this link: [Revenue Narrative](#)

List any earned revenue that will be generated as a direct result of ARPA funding of this project and/or other funding sources for this project. Do not include ARPA requests in this section. (500 word limit)

Costs associated with providing client services at a BCC are bundled into Burrell's CCBHO PPS daily rate for covered and billable CCBHO services. Therefore expected revenue is zero at this time.

**Expense Budget Narrative/Justification:** The budget narrative gives the item by item breakdown for each category and shows the calculations used to derive the costs. The budget narrative should explain how the costs were estimated and justify the need for the cost.

To see an example, please follow this link: [Expense Narrative](#)

**Salary:** Salary expense is for project-related staff employed by the applicant (costs for project staff who are not employees of the applicant should be included in the Contracted Services/Other Compensation section). Provide title, name or to be hired (TBH), annual salary, and FTE for this project.

**Benefits and Payroll Taxes:** For each employee listed in the Salary section above, benefits and payroll taxes may **ONLY** be requested for: employer portion of federal, state, and local taxes

health, life, and disability insurance related to the programs funded employee(s)

retirement (only 401(k), 403(b) or pension) related to the programs funded employee(s)

**Note:** The City reserves the right to negotiate an agreed upon rate.

**Contracted Services/Other Compensation:** Provide a detailed budget for contractors/consultants or compensation to project partners, including estimated hours, hourly rate, travel, or other direct project expenses. **Note:** Contracted Services for this project must adhere to federal budget guidelines.

**Travel:** Travel can be included for project staff only. If conference travel is requested, travel must adhere to City travel policy which includes coach airfare, per diem and standard mileage not to exceed established federal rates.

**Equipment:** includes anything tangible that has a useful life of over one year and a value of \$5,000 or more.

**Other Direct:** Provide a breakdown of any other expense that can be directly traced to the project. Contractors or compensation to project partners should be included in the Contracted Services/Other Compensation section.

**Indirect Expense:** Indirect expenses are organizational expenses shared among projects and/or functions, such as executive management, accounting, grants management, human resources or administrative and other support services, office equipment and supplies, telecommunications, occupancy, insurance, utilities, facility maintenance, etc. The City will consider indirect expenses for the portion of employee compensation funded only by ARPA (includes salary and benefits & payroll taxes).

**List expenses, ONLY include expenses related to requested ARPA funds in this section. (1000 word limit)**

Burrell will utilize City of Columbia ARPA funding to build a new BCC at 70 E Leslie Ln. This property is owned by BBH. Construction costs associated with this funding will be allowable under ARPA and follow all ARPA funding stipulations and restrictions. A detailed budget will be available within 90 days. This building is anticipated to open by Winter 2025.

## Partial Funding

**The City of Columbia is asking whether or not the proposed program would be viable with partial funding. Would your program be feasible if only partial funds were awarded?**

No

**If yes, please explain how your project would be affected by receiving partial funding.**

## Exceptions

**The City of Columbia reserves the right to reject any or all applications and/or proposals received in response to the RFP, or to cancel the RFP if it is in the best interest of the City of Columbia to do so. Failure to furnish all information requested in this RFP may disqualify the applications and/or proposal. Any exceptions to the requirements specified must be identified in the application and/or proposal. If your project includes exceptions, please upload the draft agreement document with edits, preferably via redlining. To find this document, please access "my shared files".**

**Attach Doc**

### System Fields

<b>Record ID</b>	<b>Modification Date</b>	<b>Modified By</b>	<b>Creation Date</b>	<b>Created By</b>	<b>Assigned Programs</b>
27831	11/21/2023 8:49 AM CST	Apricot Subsystem	10/10/2023 4:38 PM CDT	Jordan Bales City ADMIN	- Organizations

### Linked 'Agreement Form (City ARPA) Outcomes & Services' Records

**Link Instructions1**

### Linked 'Agreement Form (City ARPA) Budget & Demographics' Records

**Link Instructions2**

## Program Outcomes and Services (City ARPA)

### Purchase of Service vs. Project Based

**Are you applying as purchase of service/contractor or project-based?**

Project Based

### Program Outcomes and Services Form Guidance-Project Based

**The purpose of the Program Outcomes and Services form is to provide detailed information about the proposed program.**

#### **Instructions**

**Information should be based on the proposed contract/agreement period.**

**Information provided should be for the entire program, not just the portion proposed to be contracted/funded by the City of Columbia ARPA funds.**

**Information provided in the Program Outcomes and Services form must correspond with the information provided in the Program Overview form.**

**Each narrative response should be clear and succinct.**

#### Resources ARPA Enumerated Uses

**The following key documents can be accessed in "My Shared Files" and on the Boone Impact Group (BIG) website:**

**<http://www.booneimpact.org>**

**-Taxonomy of Services -Common Outcomes \*Indicates Required Field**

#### **Record Lock**

1

### Program Outcomes Instructions-Project Based

**Using the logic model below, provide detailed information about the performance measures for the proposed program.**

**Goal: Final impact or outcome that you wish to bring about. Goals are generally broad and may or may not be measurable**

**SMARTIE Objective: SMARTIE stands for specific, measurable, attainable, realistic, time-bound, inclusive and equitable.**

**SMARTIE Objective Example: 75% of participating parents report increased knowledge of parenting skills after 6 weeks in the program, with skills approved by target community members and results reported back to the community within 1 week of end of program.**

**Activity: Actual events or actions that take place as part of the program.**

**Method of Measurement: The instrument or technique used to gather the information needed to measure the outcome indicator. List/describe the type of measurement tool(s) that will be used to determine if the proposed indicator is met.**



Program Aims and Supports-Project Based

**\*\*Please scroll to the right, there is more information to fill out. The scroll bar can be found at the bottom of this section**

<b>Objective 1:</b>	<b>Does this objective reach ARPA populations? (Impacted or disproportionately impacted)</b>	<b>Which enumerated use does this goal address?</b>	<b>Activity 1.1.1</b>	<b>Activity 1.2.1</b>	<b>Activity 1.3.1</b>	<b>Please describe any additional activities here 1</b>	<b>Method of Measurement 1</b>
By February of 2024 Burrell will purchase a new piece of property to be added to the existing plat at 70 E Leslie Lane.	Yes	Behavioral health facilities & equipment	Engineering Surveys and Services (ES &S) will work with Burrell on all steps associated with re-platting our existing location	The City of Columbia will review to approve, this will likely go through multiple rounds of approval.			Burrell is successful in the purchase of property and re-platting is approved by The City of Columbia.
<b>Objective 2</b>	<b>Does this objective reach ARPA populations? (Impacted or disproportionately impacted) 2</b>	<b>Which enumerated use does this goal address? (2)</b>	<b>Activity 1.1.2</b>	<b>Activity 1.2.2</b>	<b>Activity 1.3.2</b>	<b>Please describe any additional activities here 2</b>	<b>Method of Measurement 2</b>
: By February of 2024 Burrell will develop building and floor plans for the new BCC.	Yes	Behavioral health facilities & equipment	Planning and develop meetings will occur with Burrell stakeholders and Engineering to complete building and floor plans.				A detailed and complete plan is approved by February 2024
<b>Objective 3</b>	<b>Does this objective reach ARPA populations? (Impacted or disproportionately impacted) 3</b>	<b>Which enumerated use does this goal address? (3)</b>	<b>Activity 1.1.3</b>	<b>Activity 1.2.3</b>	<b>Activity 1.3.3</b>	<b>Please describe any additional activities here 3</b>	<b>Method of measurement 3</b>
By Spring/Early Summer of 2024 construction of the new BCC is anticipated to start.	Yes	Behavioral health facilities & equipment	: Procurement bids will be released, vetted and approved according to ARPA guidelines.				A vendor will be selected for construction.
<b>Objective 4</b>	<b>Does this objective reach ARPA populations? (Impacted or disproportionately impacted) 4</b>	<b>Which enumerated use does this goal address? (4)</b>	<b>Activity 1.1.4</b>	<b>Activity 1.2.4</b>	<b>Activity 1.3.4</b>	<b>Please describe any additional activities here 4</b>	<b>Method of measurement 4</b>
By the end of 2025 the Columbia BCC will be complete.	Yes	Behavioral health facilities & equipment	Construction will begin 60-90 days from the date of bid award.				The new Columbia BCC will be fully operational.
<b>Objective 5</b>	<b>Does this objective reach ARPA populations? (Impacted or disproportionately impacted) 5</b>	<b>Which enumerated use does this goal address? (5)</b>	<b>Activity 1.1.5</b>	<b>Activity 1.2.5</b>	<b>Activity 1.3.5</b>	<b>Please describe any additional activities here 5</b>	<b>Method of measurement 5</b>
	Yes						
<b>Objective 6</b>	<b>Does this objective reach ARPA populations? (Impacted or disproportionately impacted) 6</b>	<b>Which enumerated use does this goal address? (6)</b>	<b>Activity 1.1.6</b>	<b>Activity 1.2.6</b>	<b>Activity 1.3.6</b>	<b>Please describe any additional activities here 6</b>	<b>Method of measurement 6</b>
<b>Objective 7</b>	<b>Does this objective reach ARPA populations?</b>	<b>Which enumerated use</b>	<b>Activity 1.1.7</b>	<b>Activity 1.2.7</b>	<b>Activity 1.3.7</b>	<b>Please describe any</b>	<b>Method of measurement 7</b>

	<b>(Impacted or disproportionately impacted) 7</b>	<b>does this goal address? (7)</b>				<b>additional activities here 7</b>	
<b>Objective 8</b>	<b>Does this objective reach ARPA populations? (Impacted or disproportionately impacted) 8</b>	<b>Which enumerated use does this goal address? (8)</b>	<b>Activity 1.1.8</b>	<b>Activity 1.2.8</b>	<b>Activity 1.3.8</b>	<b>Please describe any additional activities here 8</b>	<b>Method of measurement 8</b>
<b>Objective 9</b>	<b>Does this objective reach ARPA populations? (Impacted or disproportionately impacted) 9</b>	<b>Which enumerated use does this goal address? (9)</b>	<b>Activity 1.1.9</b>	<b>Activity 1.2.9</b>	<b>Activity 1.3.9</b>	<b>Please describe any additional activities here 9</b>	<b>Method of measurement 9</b>
<b>Objective 10</b>	<b>Does this objective reach ARPA populations? (Impacted or disproportionately impacted) 10</b>	<b>Which enumerated use does this goal address? (10)</b>	<b>Activity 1.1.10</b>	<b>Activity 1.2.10</b>	<b>Activity 1.3.10</b>	<b>Please describe any additional activities here 10</b>	<b>Method of measurement 10</b>

### Program Performance Measures Narrative-Project Based

**a. Describe how each outcome is attributable to the program goals(s), as stated in the Program Overview section. (1,000 character limit)**

Burrell’s Crisis Center (BCC) will provide a 23-hour crisis receiving and stabilization program, accessible 24/7 to the public through the Rapid Access Unit, in addition to longer social-setting detox services and an Adult Crisis Stabilization Unit (ACSU) for more intensive stabilization services. The Rapid Access Unit is a Walk-in Crisis Center and access point for individuals in need of immediate psychiatric care, Medication-Assisted Treatment for opioid use, psychiatric assessment, initial assessment eligibility determination, brief therapy, peer support services, 23-hour observation, referral to appropriate follow up treatment and more. The goal of this service is to provide a supportive, safe environment during the uncomfortable and potentially dangerous detox process. The Social Setting Detox Program at Burrell is a non-medical, residential service that lasts for three days. Detoxification is the process of interrupting the momentum of compulsive drug and/or alcohol use in an individual with a substance use disorder. The detoxification process involves recovery from the effects of alcohol or other drugs and the treatment required to manage withdrawal symptoms and promote recovery. Burrell’s trained staff provide 24-hour monitoring, observation, and support in a supervised environment so that clients can achieve initial recovery from the effects of alcohol or another drug. Social setting detox is characterized by its emphasis on peer and social support. It also provides care for clients whose intoxication or withdrawal signs and symptoms are sufficiently severe to require 24-hour structure and support, but the full resources of a medically monitored inpatient detox are not necessary. In the event any client exceeds our criteria for personal physical well-being, that client is immediately transferred to a local hospital for medical stabilization. The Adult Crisis Stabilization Unit provides another layer of services available to clients that do not require a locked hospital setting. Services include a nursing assessment, psychiatrist evaluation, medication education, therapy and psycho-educational groups in a safe environment. Eligible individuals include those who are 18+, able to tend to activities of daily living independently, voluntary admitted and needing further stabilization.

Burrell’s vision for local change is reflected in the BCC’s project goals stated in the above section. By providing appropriate and needed crisis care to patients at the BCC, Burrell expects community outcomes that will strengthen behavioral health services in Columbia, provide efficient and effective avenues of referral, remove barriers to receiving the right services at the right time, and play a supportive role in broader efforts to develop workforce competency to better serve the target population.

**b. Provide a rationale for the measurement level percentage(s) for each indicator. (1,000 character limit)**

As these are construction-based goals there is not a measurement level percentage. Burrell will report on progress for each step throughout the life of the award.

**c. Describe how data is collected for each method of measurement indicated in the performance measures.(1,000 character limit)**

Data is collected through meeting construction deadlines and project management deadlines.

**d. Describe and document any external factors or variables which may affect the proposed outcome(s) and data collection.(1,000 character limit)**

Risk or external variables and factors that may affect construction include: 1) Regulatory approvals and permits from local authority; 2) material availability and lead times; 3) labor availability and skills; 4) Site conditions; 5) Design changes and 6) Force Majeure (unforeseen natural disasters or pandemics). Burrell will utilize experienced project managers to anticipate and mitigate these and other risks during the duration of the project to limit impact on the construction schedule.

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