

**CMSP Local Indigent Care Needs Grant Program
Required Form: Planning Project Grant Proposal**

1) APPLICANT NAME:

2) PROJECT TITLE:

3) TECHNICAL ASSISTANCE NEEDS

Select the **TOP 3** Technical Assistance needs you have regarding undertaking a Planning Project and developing a framework for an Implementation Program.

- Data development and analysis Identifying best practices Collaboration
- Budgets and finance
- Developing program goals, objectives, and metrics for program evaluation
- Determining organizational capacity
- Other (please describe):

4) TARGET POPULATION

Planning Project Grants must focus on identified needs of one or more target populations within the community that meet the criteria required by the RFP. Please indicate below which one or more uninsured or under-insured target population(s) planning efforts will be focused on:

- Adults that need follow up specialty services and/or other support services following an inpatient hospital stay
- Adults receiving inpatient hospital care that have limited home or community support to facilitate healing and recovery
- Adults with complex health or behavioral health conditions that have housing and/or transportation challenges that impede their ability to obtain necessary health care services
- Adults with health and/or behavioral health conditions that have been released incarceration

Program activities may choose to further narrow the focus of efforts to one or more of the following sub-groups within the target population(s). Please indicate if proposed planning efforts will focus on any of the following sub-populations. If no sub-groups will be identified, please select "No sub-groups identified":

- Homeless adults
- Adults with chronic health or behavioral health conditions
- Adults in need of pain management support
- No sub-groups identified

Provide a description of the proposed target population(s) and what the project currently knows about the target population(s). Include background information relating to the proposed CMSP county or counties to be served, unique features of the community or communities, and other pertinent information that helps explain the problem or need within the community.

5) PLANNING QUESTIONS

What questions does the Planning Project hope to answer about the target population(s), service delivery, and/or resources through the planning process? Please include a minimum of 3 Questions.

QUESTION 1:

QUESTION 2:

QUESTION 3:

ADDITIONAL QUESTION(S):

6) PLANNING GOALS

Clearly identify the goals of the project's planning process. Include a minimum of 3 Goals.

GOAL 1:

GOAL 2:

GOAL 3:

ADDITIONAL GOAL(S):

7) PROPOSED PLANNING ACTIVITIES

Broadly discuss the proposed activities to be performed in the Planning Project. This section should be used to describe planning efforts to be effectively completed that will produce a framework for an Implementation Program Grant proposal. Please use the Work Plan and Timeline in Item 8 to provide details on essential steps.

As a part of your expected planning process, identify which one or more of the following core required LICN program components you anticipate will be incorporated into the Planning Project:

- Local-level Care Management
- Continuity of Care
- Linkages to Enabling Services
- Disease Management

8) WORK PLAN AND TIMELINE

Download the Planning Project Work Plan and Timeline template on the [CMSP website](#). Create a Planning Project Work Plan and Timeline for completion of implementation, contracting, consultant/staff recruitment, evaluation, reporting, and sustainability planning activities. The Work Plan should not exceed twelve (12) months. If you are awarded a Planning Grant, the Technical Assistance Contractor will work with you to further refine the Work Plan. **Submit the Work Plan and Timeline as a separate document alongside the application.**

9) PROJECT PARTNERS

Please list the proposed key project partners and briefly describe their intended roles.

10) ORGANIZATION AND STAFFING

Describe the lead applicant's organizational capability to bring local stakeholders together to undertake a planning process that leads to the development of a framework for an Implementation Program proposal. Clearly delineate the roles and responsibilities of the applicant organization(s) and key partner(s). Identify a project manager with day-to-day responsibility for key tasks such as leadership, monitoring ongoing progress, preparing project reports, and communicating with other partners. Describe any relevant prior efforts undertaken by the lead applicant and/or partners. Describe the lead agency and all key partners' roles within the delivery system. Identify additional organizations and/or agencies with which the lead agency wishes to establish relationships with through the implementation process.