FACT
FAMILIES & COMMUNITY TOGETHER

Appendix I – 2027 APPLICATION

Families & Community Together (FACT)
Community Resource Development Funds Application

Legal Name of Organization: _____

Date of Request: _____

Mailing/Business Address: _____

Contact Person for this Proposal: _____

Telephone: _____

Fax: _____

E-Mail: _____

1. Needs Statement:

- Understanding needs of Union County youth with emotional, behavioral, developmental, intellectual, and substance use needs especially regarding Medicaid and Evidence Based Practices (EBPs), promising practices, or best practices, where applicable.
- Understanding of referral needs for all NJ Children's System of Care Partners;
- General and specific knowledge of cultural competencies necessary to be successful in Union County.

  ** Important - Please cite data sources. Data sources referenced in this RFP and recommended data sources are listed in Appendix 1. Data sources are not limited to those listed in Appendix I.

2. Description of Agency and History of Service to Youth and Families:

- Organizational capability to initiate and sustain current and proposed programs, preferably Evidence Based Practices (EBPs), promising practices, or best practices, where applicable.

3. Description of Service(s) to be funded:

- Specific implementation plan, informed by a qualified purveyor of that best practice, promising practice, and EBP particularly around fidelity to the model when applicable.

- Activities and services to be provided during the funding period, and those to commence beyond the funding period.

4. Anticipated Outcomes

- Sustainability plan. All projects must demonstrate sustainability after initial funding. Demonstrate that the service is sustainable after the end of the effective term and provide a plan outlining relevant strategies. Please describe how these services will continue, including plans for third party reimbursement and/or client fees.
- Defined anticipated quantifiable deliverables, level of service, and/or outcomes.
- Affirmation of required periodic fiscal and or program reports to demonstrate compliance with the bid requirements.
- Background, qualifications, and justification of organization to provide work as part of this proposal.
- Agreement to serve Medicaid-eligible youth and their families.
- Agreement to serve all eligible NJ Children's System of Care youth (No eject - No reject).
- The effective period or term of the service or activity.

5. Evaluation Methods

- Evaluation of practice or program adherence/fidelity/effectiveness and participation in ongoing outcomes research, if applicable, to the practice or program proposed.
- Documentation of a quality assurance effort and outcomes monitoring plan.

6. Budget

- Exact amount of funds requested and detailed budget for the expenditure of these funds.

<u>The following must be included with this application:</u>

- List of Board Members
- Set of recent financial statements (at least six months)

Note: There may be further information required before a cooperative agreement can be executed.

All awards are contingent on the sufficiency and availability of state funding.
Completed proposals are due: 6:00pm Friday, January 9, 2026

Submit proposals to: Felicia Frazier, feliciaf@factnj.org

Proposals sent after the deadline and/or incomplete will not be considered for funding.

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Appendix II – SCORING /RATING SCALE

1. ***Needs Statement*** *(20 points)*
   - ✓ Are the needs of the community that this proposal aims to address well-articulated and based on reliable sources of information and data?
   - ✓ Do the needs cited in the proposal coincide with the criteria for usage of funds targeted to agencies serving youth and families experiencing serious emotional, behavioral, developmental, intellectual, and substance use needs?
   - ✓ Does the need address development of new services where service expansion is necessary because services cannot be secured through an existing agency; or is service availability non- existent?
   - ✓ Do the needs cited in the proposal coincide with service need priorities identified by local planning bodies?
   - ✓ Understanding of referral needs for all NJ Children's System of Care Partners?
   - ✓ General and specific knowledge of cultural competencies necessary to be successful in Union County.

2. ***Description of Agency and History of Service to Youth and Families*** *(15 points)*
   - ✓ Is the agency well equipped and experienced providing services to youth and families who are experiencing emotional, behavioral, developmental, intellectual, and substance use needs?
   - ✓ Is the agency duly prepared to operate the service or program element for which funding is applied?

3. ***Description of Service(s) or Program Element to be Funded*** *(20 points)*
   - ✓ Is the description of the service(s) or program element well-articulated, reasonably attainable and based on best practice models?
   - ✓ Is the service(s) described relevant to the statement of need?
   - ✓ Is there a clear plan on how to implement and start/expand the program?
   - ✓ Is there a description of the organization's background, qualifications, and justification to provide work as part of this proposal?
   - ✓ Include an agreement to serve Medicaid-eligible youth and their families; all eligible NJ Children's System of Care youth (No eject - No reject)?
   - ✓ Include effective period or term of the service or activity?

4. ***Anticipated Outcomes*** *(15 points)*

- ✓ Are the anticipated outcomes quantifiable deliverables, level of service, and/or outcomes realistic, measurable, observable, and verifiable?
- ✓ Are the outcomes relevant to the need(s) that the program aims to address and the services to be provided?
- ✓ Does the project demonstrate sustainability after initial funding?

5. ***Evaluation Methods*** *(10 points)*

- ✓ Does the proposal describe how services will be evaluated, including how case activity will be monitored and accountability will be assured?
- ✓ Is there an adequate description of administration and programmatic and fiscal oversight of the program or service?
- ✓ Does the proposal acknowledge the obligation to provide reports of activity to Families and Community Together (FACT)?
- ✓ Evaluation of practice or program adherence/fidelity/effectiveness and participation in ongoing outcomes research, if applicable, to the practice or program proposed.
- ✓ Documentation of a quality assurance effort and outcomes monitoring plan
- ✓ Affirmation of required periodic fiscal and or program reports to demonstrate compliance with the bid requirements

6. ***Budget*** *(20 points)*

- ✓ Is a complete and clear budget included?
- ✓ Is the budget reasonable based on established rates for services and the amount of funds available?
- ✓ Does the budget account for all staff, supplies, and services included in the description of service(s) or program element to be funded (either through fund request or match by other funding source)?
- ✓ Are other funding sources cited viable to be applied as a match to community resource development funds?
- ✓ Is the service for which funding is requested clearly a new service/program element or expansion of services/programs not otherwise funded by another source?

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Appendix III – DATA SOURCES

1. ***Union County DHS Needs Assessment 2020***
   Union County Needs Assessment Report 2020.pdf (nj.gov)

2. ***Union County Comprehensive Community Needs Assessment***
   Comprehensive-Community-Needs- Assessment-for-Union-County-New-Jersey.pdf (ucnj.org)

3. ***North Jersey Health Collaborative***
   Union_County_CHNA_FINAL.pdf (njhealthmatters.org)

4. ***Union County Overdose Fatality***
   NJ Cares Data by County - New Jersey Office of Attorney General (njoag.gov)

5. ***Union County Point-In-Time Report***
   Union PIT Report 2023 (monarchhousing.org)

6. ***2019-2020 HSAC/DCF Needs Assessment***
   HSAC-Synthesis-Overview-PPT.pdf

Other potential data sources not referenced above:

- CIACC Dashboards:
  https://www.nj.gov/dcf/childdata/interagency/index.html
- DCF Commissioner's Dashboard:
  https://www.nj.gov/dcf/childdata/continuous/index.html
- DCP&P Dashboard
  https://www.nj.gov/dcf/childdata/protection/index.html
- DCF Rutgers Data Hub and Portal
  https://njchilddata.rutgers.edu/
- NJ DOH COVID Data Dashboard: New Jersey COVID-19 Data Dashboard (nj.gov)
- Kids Count: New Jersey Kids Count 2020 | Advocates for Children of New Jersey (acnj.org)

Appendix IV – CARI CHECK INSTRUCTIONS & CERTIFICATION FORM

Rationale and Process for CARI checks

Any agencies funded by DCF, are subject to the Child Abuse Record Information (CARI) background check requirement mandated by N.J.S.A. 9:6-8.10f. As of October 1, 2019, the CARI Online Application System is available to DCF affiliated agencies to create an account and submit CARI applications. Please review the following information regarding the Online Application System and submission of your CARI applications for CRD 27 award recommended agencies. Some agencies may have an existing structure that already requires they submit CARI checks as part of their current operations or based on a separate law that preceded N.J.S.A. 9:6-8.10f. If that is the case, they do NOT need to submit additional CARI applications under this law. Please ask them to provide the CARI certification form within this document that states all staff who will work in direct contact with youth under 18 years of age have passed the CARI requirements.

Steps to register for CARI checks:

When CMO identifies an agency as the potential CRD awardee they will direct the awardee to follow the process as listed below.

1. The applicant will register as a business with the State of NJ and receive an Employee Identification number ($75.00 fee) and a tax ID number. The step-by-step process is provided at https://business.nj.gov/ where you can both register your business to receive your EIN and receive a tax ID number.
2. Once these numbers have been assigned, please visit https://www.njstart.gov/bso/ to create a record and acquire a vendor identification number. ($150.00 fee)
3. The final step will be to follow the instructions and register with the CARI unit and submit for CARI checks (see below).
4. CARI will notify the agency if their staff are clear or if they need to be terminated. CARI will require a signed verification that the unapproved staff are no longer with the organization.
5. Once the agency has completed this process, they will submit the CARI Certification form to the CMO, as it will need to be included in the submission of the Proposal and recommendation to CSOC. **(Certification form is included at the end of this guidance)
6. Fees associated with the registration process for CARI may be included in the agency's budget proposal.

Accessing the CARI System:

To access the CARI Online Application System, each agency will need to set up a facility account by visiting https://www.njportal.com/dcf/cari. Agencies will identify an administrator to create and maintain the facility account, and who will be responsible for submitting and receiving CARI applications and results.

The above-mentioned website will prompt the identified administrator to "Create a New CARI Account" and will provide tutorials for setting up the facility account. When creating an account, select "Department of Children and Families – Community Partners" from the drop-down selection of Program/Application

- Types. To set up a CARI account, the agency administrator will then need to provide their agency's Vendor
- Identification Number, which is the letter "V" followed by 8 digits.
- Next, the administrator will be prompted to create a My New Jersey account username. This will be the username and password used by the account administrator to log in to the Online Application System moving forward.
- The Online Application System will allow the account administrator to invite agency staff to complete an online CARI form and to check the status of submitted applications. Employees will be able to complete the electronic CARI application through an emailed link, or on-site at the agency. The employee can complete the application using a personal computer or smart phone; however, the email invitation link will expire after two weeks. All completed CARI checks are returned through the Online Application System, and the results will be emailed directly to the facility account administrator.

CRD CARI CHECKS ATTESTATION FORM

By my signature below, I attest I am authorized to sign this document on behalf of my organization. I agree that as of this date below my organization has met all the requirements of the CARI check process. Should my agency acquire any additional staff during this CRD award period, that staff will be required to submit CARI checks and be approved by the CARI unit.

If any staff within this organization are found to be ineligible for employment under this grant by the CARI Unit, they will not be allowed to work within the programming funded by the CMO CRD grant.

Signature: Date:

Printed Name:

Organization name: CMO Name: