



Mental Health/ Disability Services of the East Central Region

COVID-19 Relief Brain Health Support Project

DESCRIPTION

This application may be completed by any MH/DS provider or school district within the East Central Region. Projects with estimated costs >\$10,000 may be eligible for CARES Act funding through the East Central Region's allocation of this federal program.

Eligibility requirements:

- Projects must be for expenditures related to expenditures incurred due to the public health emergency with respect to COVID-19.
- Projects cannot be accounted for in the applicant's current budget approved before March 27, 2020 (date of CARES Act enactment).
- Expenses must be incurred between the period that begins March 1, 2020 and ends on December 30, 2020.
- Expenses for this project must not have been reimbursed by another source.
- In light of the fact that other funding via the CARES Act is available for a variety of uses, these projects should be focused within the scope of services and priorities of the ECR (Strategic Plan and Priorities available at www.ecriowa.org).
- Collaborative and coordinated projects that address needs in more than one or all nine counties of ECR will be given priority. Individual projects will also be considered.
- Applicants must be a public or private school district whose district office is located within the East Central Region's nine counties or any MH/DS provider whose main office is located within in the region and meets the following criteria:
 - Has a current contract with ECR
 - Employees >5 people
 - Provides the following MH/DS Services
 - Outpatient Mental Health Services
 - Crisis Response and Management
 - Support for Community Living
 - Support for Employment
 - Recovery Services
 - Sub-acute Services
 - Evidence-Based Services
 - Justice Involved Services
 - RCF Services



Mental Health/ Disability Services of the East Central Region

- VI. How is this project aligned with the scope of services and/or priorities of the East Central Region?
- VII. What are this project's expected outcomes?
- VIII. Describe any collaborations that will happen with this project: (encouraged but not required)
- IX. COVID-19 Relief Fund Amount Requested: _____
(Applicants must attach budget detail and budget narrative including line item costs for each allowable item/activity, date item/activity is expected to be filled or completed, and a detailed explanation of the item/activity)
- X. Has your agency or district drawn down other funds to relieve or replace costs incurred by the pandemic?
Yes – how were those funds used?
No – why not?
- XI. Monitoring, Review and Payment: **BY SIGNING THIS REQUEST:**
1) The recipient agrees to send monthly invoices to begin after notice of award to:
MH/DS of ECR Claims
210 5th Avenue NE, Independence, Iowa 50644
Or by email to: claims@ecriowa.us



Mental Health/ Disability Services of the East Central Region

- 2) The Recipient agrees to submit a final invoice and documentation of project status by December 11, 2020.
- 3) The Recipient shall keep detailed records and receipts for five years that demonstrate use of the funds.
- 4) The Recipient shall provide detailed records and receipts, if requested, to MH/DS of the ECR by the end of the next business day or sooner, if necessary, due to a state or federal audit.
- 5) The Recipient agrees to participate in on-site regional reviews, if any, as well as participate in a federal audit of the Office of Inspector General should one be conducted.
- 6) The Recipient agrees to return any authorized COVID-19 Relief funds should it be determined through the course of an audit that it was found to be an unauthorized use of such funds.
- 7) The Recipient agrees that any items purchased under this comprehensive project shall be done as efficiently and effectively as possible and every reasonable effort shall be made to ensure the commitment of public funds obtains the most value for the money spent.
- 8) The Recipient certifies that this funding is not duplicating other funding received for COVID-19 relief or CARES Act funds, or used for items/activities budgeted or executed prior to March 1, 2020.
- 9) The Recipient agrees to make every effort to expend funds received under this comprehensive project.
- 10) The Recipient agrees to return any funds authorized under this agreement but not spent by December 11, 2020 to MH/DS of the ECR no later than December 28, 2020.

Printed name Requesting/Responsible Party:

Signature of Requesting/Responsible Party:

Date of this application:
