

HEALTH FIRST INDIANA



Lake County Health Department
2900 West 93rd Ave., Crown Point, IN 46307 | Phone: 219-755-3655

HEALTH FIRST INDIANA GRANT APPLICATION

Under Indiana law, the Lake County Health Department (“LCHD”) is empowered to grant money from their allocated Health First Indiana (“HFI”) funds to external organizations which agree to complete Core Public Health Services (“CPHS”) and work toward completion of the required Key Performance Indicators (“KPIs”).

Health First Indiana Website: <https://www.in.gov/healthfirstindiana/>

Public health services are most effective when provided by local health departments (LHDs) that are positioned to meet the needs of their communities. These core services outline the initiatives and activities at the heart of public health that are the critical framework of any local health department. Some are required by law, and some are offered by many health departments. Every Hoosier deserves access to these foundational public health services no matter where they live.

LHDs, with support from partners and community stakeholders, determine needs of the community, and implement accessibility strategies, including addressing social determinants of health, in all aspects of planning, operations, and core services. The Indiana Department of Health surveyed each local health department to determine how these core services are provided across Indiana. Click below to see a snapshot of each core service.

Please fill out the attached proposal in its entirety and include any necessary and appropriate documents.

- The KPI’s listed throughout this proposal application are not comprehensive. They are current guidelines and metrics that have been enumerated by the Indiana Department of Health (IDOH), however, they are in flux.
- If your program fills the purpose as enumerated in the “Purpose” chart of Section 2 below, but the deliverables from Appendix A do not match up directly with your program metrics, list them separately under the “Deliverables” section of this application.

1. ORGANIZATION

1.1 Name of Organization: Mental Health America of Northwest Indiana

1.2 Contact Name and Title:: Andrea Sherwin, President & CEO

1.3 Address: 5311 Hohman Ave. Hammond, IN 46320

1.4 Phone: 219-937-7733 ext. 105

1.5 Fax: 219-736-7998

1.6 Email: ashwerwin@mhanwi.org

2. PROGRAM

2.1 Name of Program Proposal: Gun Safety Education for Families with Children

2.2 Program (Mission) Statement: The mission MHANWI is to transform our community through proven programs that educate, empower, and strengthen the way individuals and families function for life. MHANWI is committed to preventing firearm injuries and deaths through education and awareness strategies, and will partner with Griffith Police Department and the Lake County Communication to implement this pilot firearm safety project for families.

2.3 An estimated 45% of Hoosier children live in a home with a firearm and only 1/3 of those guns are properly and safely stored, according to the American Academy of Pediatrics. The majority of deaths (85%) from firearms in younger children (0-12 years of age) occur in the home. Anticipatory guidance regarding safer firearm storage is a crucial strategy for preventing child death and injury from firearms. For families with toddlers and older children, the focus is on the prevention of an unintentional shooting event. For families with adolescents and young adults, the focus also includes the prevention of suicide. The aim of this program is to equip parents and other care givers with the knowledge and skills necessary to ensure the safe handling and storage of firearms within their homes. By educating parents, we aim to reduce the risk of accidental shootings and promote responsible gun ownership.

2.4 Program and Scope for Selected Core Service - check one or more:

X	Item	Name	Scope
	A.	Tobacco and Vaping Prevention and Cessation	Preventing and eliminating risk of disease due to tobacco use and vaping.
X	B.	Trauma and Injury Prevention	Preventing harm due to injury and substance use and facilitating access to trauma care.
	C.	Chronic Disease Prevention	Preventing and reducing chronic diseases such as obesity, diabetes, cardiovascular disease, and cancer.
	D.	Maternal and Child Health	Services focused on the health and well-being of mothers, children, and families, including prenatal care.
	E.	Fatality Review	Analysis of data and potential causes of child deaths, fetal and infant mortality, and suicide/overdose fatality.
	F.	Lead Case Management and Risk Assessment	Ensuring all children have access to blood lead level testing and appropriate clinical and environmental services if necessary.
	G.	School Health Liaison	Assisting schools with resources to promote whole student health.
	H.	Access and Linkage to Clinical Care	Facilitating access to essential healthcare services for all members of the community.
	I.	Infectious Disease Prevention and Control	Monitoring and managing the spread of diseases within a community.
	J.	TB Prevention and Case Management	Preventing the spread of tuberculosis and ensuring appropriate access to care and resources for those who have TB.
	K.	Immunizations	Providing vaccinations to children and adults to prevent the spread of infectious diseases.
	L.	Health-Related Areas during Emergencies or Disasters	Planning and coordination for responding to public health emergencies and disasters.
	M.	Vital Records	Providing accurate documentation of births, deaths, stillbirths, fetal deaths, adoptions, and biological parentage.
	N.	Food Protection	Ensuring safety of food at the grower, wholesale, and retail levels.
	O.	Environmental Health	Ensuring the safety of the physical environment to protect public health.

2.5 Project Work Plan – attach a separate document, which includes an outline of how the program is created/adopted, implemented, and executed, and any relevant timelines.

2.6 Deliverables – attach a separate document, see Appendix A.

2.7 Reporting Format – attach a separate document, see Appendix A and sample below.

2.8 Reporting Frequency: If no required format and frequency is prescribed by LCDH, MHANWI will provide quarterly updates on deliverables as described in Section 2.6 as well as successes and challenges of the project in conjunction with required KPI reports to the Lake County Community Action Team, our CEO and Board of Directors, which occurs in April, July, October and January for each preceding quarter.

3. **FINANCIALS**

3.1 Total Amount Requested: \$10,000

3.2 Breakdown of Amount Requested – attach a separate document.

3.3 Proposed Schedule of Payments – attach a separate document.

APPENDIX A

(Edited by MHANWI Removing Core Service Categories Not Applicable to Our Program Scope)



A. Trauma and Injury Prevention

In Indiana, preventable injuries account for the leading cause of death in individuals aged 1-44 years (CDC WISQARS), notably poisonings and motor vehicle crashes. Identifying a leading cause of injury allows effective planning and prevention of those injuries and potential deaths.

KPI: Number of counties that identified a leading cause of injury and/or harm in their community and implemented a comprehensive, evidence-based program or activity for prevention.

KPI

Number of counties that identified a leading cause of injury and/or harm in their community and implemented a comprehensive, evidence-based program or activity for prevention.

LCHD is committed to identifying the leading cause of injury or harm in our community, and, subsequently implementing a comprehensive, evidence-based program(s) for the leading cause of trauma-related injury or death in Lake County, Indiana.

DELIVERABLES AND REPORTING: SAMPLE

Item	Name	Scope	
B.	Trauma and Injury Prevention	Preventing harm due to injury and substance use and facilitating access to trauma care.	
Deliverable		Metric: Training	Value
[Deliverable]		Number of people receiving Stop the Bleed training.	[Number of people]

TRAUMA AND INJURY PREVENTION METRICS

Metric: Training

- Number of people receiving Stop the Bleed training.
- Number of people receiving CPR training.
- Number of people educated and/or trained on vehicle passenger safety and seat belt use.
- Number of people educated or trained on RTV/ATV and golf cart passenger safety.
- Training & Education Number of people educated or trained on water safety (including swim lessons).
- Number of people educated about texting and safe driving (including impaired driving).
- Number of people educated about brain injury risks and safety practices.
- Number of people educated in fall prevention and home remedied for fall risks.
- Number of people educated and/or trained on substance use prevention.
- Number of people educated and/or trained on mental health and suicide prevention.
- Number of seniors participating in activities related to fall prevention.
- Number of certified peer recovery coaches in county with support of LHD.
- X* Other – -please add your own metric *only if it aligns with the scope and KPI of the Core Service.
 - Number of people educated or trained in Gun Safety and safer gun storage in the home.

TRAUMA AND INJURY PREVENTION METRICS- CONTINUED

Metric: Equipment

- Number of naloxone doses distributed
- Number of nalox-boxes in community
- Number of public-used sharps returns
- Number of child car seats distributed
- Number of bicycle helmets distributed

Metric: Equipment – Continued

- X Number of firearm locks provided to families
- Number of people provided with infant safe sleep education, including families and professionals
- Number of infant sleep sacks provided to families
- Number of portable cribs provided to families
- *Other – please add your own metric *only if it aligns with the scope and KPI of the Core Service.

Metric: Referrals

- Number of people referred/linked to substance use/mental health treatment
- Number of women and children referred for active domestic violence assistance
- Number of women and children provided safe, anonymous transport to shelter for victims of domestic violence and interim care/assistance provided
- Number of women and children referred for assistance with physical and mental health recovery from domestic violence
- *Other – please add your own metric *only if it aligns with the scope and KPI of the Core Service.

2.5 Project Work Plan – Includes an outline of how the program is created/adopted, implemented, and executed, and any relevant timelines.

Mental Health America of Northwest Indiana (MHANWI) is a non-profit organization dedicated to overall wellness through personal and family support while remaining committed to our core principle of advocating on behalf of those experiencing emotional challenges. We lead from a foundation built on **prevention and empowerment** of vulnerable adults and children through education, referral, and advocacy. As an affiliate of the national Mental Health America organization, we adopt the philosophy of **#B4Stage4**, which stresses the importance of preventing/addressing mental health issues and adverse experiences early in life. *Our goal is to act before or at the first sign of distress.* This philosophy informs our programming and supports mothers and fathers with evidence-based home visitation, standardized development and health screenings, psychosocial support and education groups, and resource connections.

Our mission is to transform our community through proven programs that educate, empower, and strengthen the way families and individuals function for life. We currently have 13 programs that serve the Northwest Indiana community (Lake and Porter County). Over 90% of these programs are offered at **no cost** to those who receive our services. We proudly serve some of the **most vulnerable homes and populations** in Northwest Indiana and are grateful to be able to do so through generous funding that ensures critical help for those most in need.

Each of our programs falls into one *or more* of five main categories of support: *Home Visitation, Infant and Maternal Health, School Programming, Adult Mental Health Support, and Workplace Mental Health.* With a strong foundation in **prevention and early intervention**, MHANWI programs stress the importance of preventing or addressing mental health issues *early in life* for the best possible outcomes (**#B4Stage4**). Much like a physical health condition, we don't want to wait until Stage 4, when there is much less we can do to heal the illness. *It is our goal to take action before or at the first sign of distress.* This philosophy informs our programs that support children and families through evidence-based **home visitation**, such as Healthy Families, Parents as Teachers, and Empowering Teens as

Parents; as well as through **support groups** such as Mothers & Babies. These programs seek to identify and help mitigate risk factors associated with **Adverse Childhood Experiences (ACEs)**. These are potentially traumatic events that occur in childhood, including violence, abuse, and growing up in a family with mental health or substance use problems. Toxic stress from ACEs can change brain development and affect how the body responds to stress. ACEs are linked to **chronic health problems, mental illness, and substance misuse** in adulthood. MHANWI's commitment to children and families has resulted in making us the **largest home visiting parent education agency in Northwest Indiana.**

Because the work we do so closely connects us with families of very young children, we feel strongly about our responsibility to support the State's efforts to **reduce firearm injuries and deaths in the home.** Our role is to educate families on maternal/infant health and safety and to provide support through programs that mitigate risks associated with abuse and accidental injury, including infant/child death.

Through our involvement in local community advocacy and awareness groups, MHANWI staff have seen the impact of firearm deaths in our community. MHANWI currently serves as the fiscal agent and lead coordinating liaison to IDOH for the Lake County Community Action Team (LCCAT), whose purpose is to improve health outcomes in Lake County through advocacy, education, and access to resources. LCCAT members volunteer their time and talents and represent a wide variety of community stakeholders, including first responders, healthcare providers, social service agencies, mental health providers, child welfare agencies, and hospital systems. LCCAT collaborates with Lake County's Child Death Review Team to understand local trends and identify strategic priorities to keep children safe, with multiple members serving on both teams. LCCAT continues to prioritize efforts on safe sleep education through community-based awareness programming. Additionally, the group has identified Gun Safety as a primary area of focus for 2024-2025.

MHANWI, in support of the Lake County Community Action Team and its partners, is requesting additional funds to help pilot an innovative approach to addressing gun safety within the home. MHANWI has secured commitments from the Griffith Police Department and Griffith Public Schools to use law enforcement officers, trained as firearms instructors,

to provide education to Lake County parents on the principles of gun safety.

MHANWI will work with Griffith PD social workers to provide **quarterly Gun Safety sessions for parents and other household members**. We will host two in-person sessions in the centrally located town of Griffith and two virtual sessions. All sessions will be open to parents living in Lake County. Both organizations will promote the events with our respective partners and participants. The sessions will be focused on the best practices of gun safety and storage. Studies show that children are naturally curious, even about a firearm they've been warned not to touch and that children as young as 3 are strong enough to pull a trigger! Kids are safer when firearms are locked and ammunition is stored separately. Parents will learn how to prevent firearm injury and receive a free gun lock, if needed.

In addition to community-based gun safety training for parents, MHANWI will also train their staff of 50+ home visitors in techniques to address gun safety in the course of their work with families.

MHANWI has a proven track record of engaging families who are at risk in our local community and throughout the state as a whole, which include residents who identify as Black, Indigenous, Persons of Color (BIPOC) and/or LatinX, residents earning low to moderate income levels, and multi-language learners. Further exploration of MHANWI's service population indicates 84% of participating families are members of **communities of color** (Black: 45%, Hispanic: 32%, Other/Multi-racial: 7%, White, 23%), which is significantly higher than the population of the county as a whole. Our organization will partner with Griffith PD to ensure equitable access to training and materials.

Trauma and Injury Prevention Team Credentials:

Erica Rios is a Police Social Worker at Griffith Police Department (GPD) with 10 years of social work experience in child welfare and public service. Erica earned her Bachelor of Social Work in 2013 from Indiana University Northwest. Erica graduated with a Master of Social Work in 2017 with honors from Indiana University Northwest. She completed her mental health and addiction concentration practicum through a pilot internship with the Griffith Police Department. Erica began her work with the Griffith Police Department in January 2018 as Indiana's first embedded Police Social Worker. Erica is a licensed social worker providing officers and their families with

mental health training, access to wellness resources, and education on trending social issues. She facilitates community-focused training and education on mental health, substance abuse, child/elder abuse, intimate partner violence, and human trafficking. She also works directly with Griffith Public Schools identifying at-risk students requiring additional support at home and school and providing staff, students, and their families with tiered prevention programs addressing drug and alcohol use, bullying, and suicide prevention. Erica represents Griffith Police Department on several coalitions and multi-disciplinary teams to foster positive collaboration with government, non-profit, and local human service agencies in Lake County.

Griffith Police Officers are Certified Firearms Instructors by Indiana Law Enforcement Training Board and will assist in providing the training.

Timeline: Gun Safety for Families

Quarter 1

- Convene Gun Safety Planning Meeting with GPD Social Workers
- Pulling together evidence-based content
- Develop marketing materials
- Purchase supplies
- Create schedule of events
- Identify partners in promotion through LCCAT, CDRT, etc.
- Train home visitors in addressing guns
- Participate in local CDRT/FIMR reviews and share efforts with partners
- Train home visitors on safe gun storage/addressing with parents

Quarter 2

- Host in person/virtual gun safety training
- Collect/analyze evaluation data from initial training
- CQI to address any issues identified
- Participate in local CDRT/FIMR reviews and share efforts with partners
- Planning for virtual sessions
- Promote schedule of events with partners

Quarter 3

- Host in-person/virtual gun safety training
- Collect/analyze evaluation data from initial virtual training
- CQI to address any issues identified
- Promote schedule of events with partners
- Convene partners for sustainability planning
- Participate in local CDRT/FIMR reviews and share efforts with partners

Quarter 4

- Host in-person/virtual gun safety training
- Collect/analyze evaluation data from initial virtual training
- CQI to address any issues identified
- Promote schedule of events with partners
- Manage inventory/supplies
- Collect data required for evaluation/reporting
- Train new staff, as needed in promoting gun safety
- Participate in local CDRT/FIMR reviews and share efforts with partners
- Complete any year end reporting

3.2 Breakdown of Amount Requested -Gun Safety for Families

Trauma EDUCATION:

MHANWI - Health First Indiana Funding Request to Lake County Health Department	Proposed
Firearm Program Expenses:	Amount:
Trainer Stipends \$500 X 5	\$2,500
Program Materials/Supplies	\$ 5,000
Marketing/Outreach	\$ 3,000
Admin/Space	\$1,500
Total	\$ 10,000

Budget Narrative - Gun Safety for Families Programming:

Trainer Stipends (\$2,500) : Provides funding to offset the costs of police officer and social worker team providing training, estimated at 4 hours of staff time for each session presentation plus preparation facilitating 4 community sessions and 1 home visitor provider training session plus mileage reimbursement.

Program Materials/Supplies (\$5,000): Cost of consumable office and program supplies, handouts, participant incentives, snacks and water for sessions, gun lock boxes to be distributed as door prize give-aways at information sessions, at least 250 gun locks estimated at \$10 each to be distributed at education sessions to each participant completing the program.

Marketing/Outreach (\$3,000): Purchase of promotional items, brochures, rack cards, business cards, community messaging, vendor table supplies and other Gun Safety messaging signage, website messaging updates.

Administrative/Space (\$1,500): includes a 5% administrative fee for time dedicated to the project for fiscal and program management and reporting oversight, as well as \$1,000 for potential rental fees for vendor tables and space for workshop sessions.

3.3 Proposed Schedule of Payments:

MHANWI would work with whatever the preferred schedule of payments is most convenient for Lake County Department of Health. MHANWI has worked with upfront funded grants that require periodic spenddown reporting as well as reimbursement grants that require back-up of expenditures and invoices for costs already incurred against a contract total amount. Per board policy, MHANWI holds a small operating surplus of general funds in order to cover operational costs in the occurrence of delay of payment from a funding source to ensure program sustainability.

Ideally, quarterly or bi-annual upfront payments with spenddown tracking would be ideal in order to more efficiently manage cash flow and implementation of planned activities without the potential cash flow delay of a reimbursement payout arrangement. Our internal controls for fiscal management of this grant will include monthly spenddown tracking regardless of the payment arrangement to ensure good fiscal stewardship. We will work within whatever guidelines and systems prescribed by the Lake County Department of Health for this funding.

2.6 DELIVERABLES AND 2.7 REPORTING:

The proposed Gun Safety Education for Families program addresses metrics in the following Core Public Health Service Category:



Trauma & Injury Prevention

Item	Name	Scope
B.	Trauma and Injury Prevention	Preventing harm due to injury and substance use and facilitating access to trauma care.
	Deliverable	Metric: Training
	Gun Safety Classes	Number of parents/caregivers receiving Gun Safety education (in-person, virtual or home-based)
	Gun Safety professional development provided	Number of professionals receiving Gun Safety education.
	Safe Firearm Storage	Number of firearm locks provided to families
	Participants implement safe firearm storage practices	Percentage of participants indicating they intend to use safe firearm storage practices they learned in training.
		Value
		500
		50
		250
		85%

**Review of Metrics lifted from Appendix A in Application Document:
 Selected Deliverables and related Metrics Address TRAUMA AND INJURY PREVENTION METRICS:**

Metric: Equipment – Continued

- X Number of firearm locks provided to families
- X*Other – please add your own metric *only if it aligns with the scope and KPI of the Core Service.

2.7 REPORTING FORMAT:

Evaluation has been integral to the success of MHANWI programming since its inception. MHANWI uses its considerable programmatic expertise with families and their children, as well as support from national, evidence-model organizations, to achieve measurable results. Parent and Child Evaluation protocols and outcomes matrix are already in place through our current evidence-based models and can provide a baseline for gauging the impact of the proposed interventions on child safety.

Data for this project will be collected at service intervention for each participant and will include gathering of demographic information including residence, race and ethnicity, and income status. Participants receiving firearm safety education will also complete a feedback survey to capture overall satisfaction as well as reported intention of participants to implement learned strategies.

Data will be collected, correlated and presented by the Senior Program Director and VP of Operations for KPI impact tracking and performance outcomes analysis. Information is utilized to inform reporting to funders as well as program CQI (Continuous Quality Improvement) planning. Reporting on deliverables outlined in the table provided above in Section 2.6 will be provided to the Lake County Department Health First Indiana as per funder directive. If no required format and frequency is prescribed by LCHD, then MHANWI will provide quarterly updates on deliverables, successes and challenges of the project in conjunction with required KPI reports to our CEO and Board of Directors, which occurs in April, July, October and January for each preceding quarter.