## RFA 0-5-MBH-001

RFA	RFA 0-5 / Maternal Behavioral Health			
	RFA Section Reference	Question	Commission Response	
1	N/A	Does our agency use the templates that is provided in the RFA? Example attachment 4: and so on?	Yes, use the Attachments for all of your responses. Include them in sequential order and reference any other document included in the Application.	
2	N/A	Upon submitting the RFA, would our agency submit only our part of the RFA? Or do you want your entire packet resubmitted?	Section 9.A. lists the required documents for your application. You do not need to resubmit anything else in the RFA.	
3	N/A	Could you please define "CBO" with respect to eligible applicants for this grant? Are applicants only eligible if they are registered nonprofits with 501(c)(3) status, or are local government agencies also eligible to be the primary grantee?	A CBO is a Community Based Organization.  For the purposes of this RFA, the lead is required to be a 501(c)(3) non-profit.	

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4	N/A	Would you please confirm whether or not a government agency such as County Office of Education could partner with a lead CBO for this grant? I understand for a large county, the lead CBO would enter agreements with other CBO's to support the work. Would a County Office of Education (COE) be able to partner as one of those secondary "CBOs" reflected in the grant application? Whether or not the COE was included in the grant application itself, would the lead CBO be able to contract with a COE to support the work? Thank you for any clarification you can provide.	A local government agency may be a partner to the lead CBO.  Section 6.B. Grantee Responsibility states, "Partner with county Behavioral Health Departments and other local government agencies; and with other CBOs that are delivering healthcare, behavioral healthcare and support services to the Population."	
5	N/A	Can grant funds be used to support an existing program, service, and/or partnership?	An existing program, service, and/or partnership may be proposed to be expanded since the grant funds cannot replace the existing funding source.	
			Section 5.C.4.a)2) states, "Grant funds may be used to supplement, but not supplant, existing financial and resource commitments of the applicant for their proposed program unit."	

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	RFA Section Reference	Question	Commission Response
6	N/A	What is meant by "reduce school failure" in the context of the population of focus being 0-5 year olds?	Services provided should benefit the child in a way that prepares them for successfully entering school. The applicant should define how their services support future school successes.
7	N/A	Just to clarify, a partnership with the county behavioral health and/or family and children services do not count towards the count of CBOs, correct? Is there any clarification that can be provided around the parameters and purpose of the partnership?	<ul> <li>A partnership must include the minimum number of CBOs.</li> <li>Additional partners above the minimum could include local government agencies.</li> <li>Section 7.B.2.a.</li> <li>a. Each Grantee is required to partner with another local CBO(s).</li> <li>1) Small county designation requires partnering with at least one (1) local CBO.</li> <li>2) Medium county designation requires partnering with at least two (2) local CBOs.</li> <li>3) Large county designation requires partnering with at least three (3) CBOs.</li> </ul>
8	N/A	Do the partnerships with CBOs need to be new, or can they be existing ones?	An existing partnership may be proposed, but it needs to comply with the requirements in this RFA.

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	RFA Section Reference	Question	Commission Response	
9	N/A	My question is whether a CBO that is a local government agency is eligible to apply	For this RFA, a local government agency cannot be the Applicant/Grantee.	
		The goals and description of the grant seem like a great fit with our organization and our collaborative partnerships, but we are not a non-profit organization, we are an independent local government agency		
		this is true for most County First 5s around the state, so I think your response we will be important to many potential applicants.		
10	N/A	Was this conference recorded? If so, may I have a link to the recording?	The procurement process is a confidential process. Therefore, the Bidders Conference was not recorded.	

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	1	- Questions and it	
11	N/A	As written, the RFA is a lost opportunity for this (and future) funding to be deployed more effectively to the target populations and allow more communities to participate. Rather than CBO applicants "coordinate" with First 5s, we recommend that First 5s be eligible lead applicants and require First 5s to coordinate with CBOs. This shift in eligibility will ensure greater focus of community expertise, efficiency, and equity. A further consideration for this and future investments is naming local First 5s as intermediaries and direct partners with BHSOAC for prenatal to 5 behavioral health service delivery.	There will be no changes to the RFA requirements as to who can apply for the grant.
		• Experience: First 5's have the voter mandate to establish and strengthen the early childhood system in California. For over two decades, First 5s in every county in California have pioneered the interventions listed in the BHSOAC RFA including developmental screenings, referral services, home visiting, infant and early childhood mental health, and maternal supports. Examples of long running and aligned First 5	

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efforts include Welcome Baby services in Yolo, Siskiyou, and Ventura, Help Me Grow systems in over 30 counties, and home visiting coordination throughout the state.

- **Efficiencies** As local early childhood experts and convening hubs for local early childhood systems, First 5s have long established community relationships with CBOs, local government and parents and caregivers. As such, other state investments are taking advantage of this 58-county network of First 5s to create better efficiencies and effectiveness in program delivery, e.g. CYBHI and CalAIM. First 5s have an effective track record of coordinating local CBO's, evaluating community impact, and ensuring accurate financial and program reporting to the state.
- **Equity** Related to the second bullet above, in most communities local First 5s are

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	expected to be the central	
	coordinating hub for policy and	
	funding implementation from the	
	state. This is particularly true in	
	smaller and rural communities	
	where no coordination agency	
	exists, or if they do, they do not	
	have the expertise and capacity	
	to respond to state RFPs,	
	evaluations, and reporting	
	requirements. By not letting First	
	5s be named as lead applicants	
	on behalf of their community	
	partners, we are concerned with	
	the equitable distribution of	
	resources to throughout the	
	state – especially to small, rural	
	communities with less capacity,	
	as they simply will not be able to	
	participate in this investment.	
	Given this, would you consider	
	expanding the RFA to allow applications	
	from county First 5 commissions and	
	require the First 5s to coordinate with	
	CBOs?	

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RFA	RFA 0-5 / Maternal Behavioral Health			
	RFA Section Reference	Question	Commission Response	
12	Section 6: Scope of Work B1 (p 12)	Is there a certain number of youth & families we need to serve annually, per grant requirements? Does the number vary per county size?	There is no requirement for a specific number of youth and families being served annually.	
13	Section 6: Scope of Work B2 (p 12)	Is there a certain amount the CBOs need to be paid? Does it required to have a financial relationship with all CBOs?	There is no requirement that a certain amount be paid to each CBO. The financial relationship is decided between the grantee and partner CBOs.	
14	Section 6: Scope of Work B2 (p 12)	Are the partnerships with CBOs and other partners supposed to expand the geography or increase the depth of services provided?	There is no specific requirement to either expand geography or to increase the depth of services. The grant will provide funding to serve children aged 0-5 and their families by providing direct services and connecting them to available resources.	
15	Section 6: Scope of Work C2 (p 13)	Regarding evaluation, what specific data will be required to collect. I see it mentions it will be defined by the commissioner/TA provider but do not see specifics.	Specific Data will be defined for grantees post award.	
16	Section 6: Scope of Work B1 (p 12)	Is there a specific geography the applicant/grantee is required to work with? For example, as a CBO located in Los Angeles- would we be required to work with the entirety of Los Angeles County, or can we support a sub-section of the county to provide services to, due to the large scope?	There is no specific geography requirement. The intent is for the Applicant to provide services to the areas that you can support.	

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RFA	RFA 0-5 / Maternal Behavioral Health			
	RFA Section Reference	Question	Commission Response	
17	Section 6: Scope of Work B1 (p 12)	Is there a certain number of youth & families we need to serve annually, per grant requirements? Does the number vary per county size?	There is no requirement for a specific number of youth and families being served annually.	
18	Section 6: Scope of Work A1 (p 11)	What would the referral process be for services- is this up to us and the individuals we partner with? I do not see specifications per the grant.	The partnership should develop their own referral process.	
19	N/A	For the 0-5/Maternal Behavioral Health Initiative RFA 0-5/MBH-001 bidder conference would you be able to have a recording available?	The procurement process is a confidential process. Therefore, the Bidders Conference was not recorded	
20	Rubric Proposed Workplan (p 34)	D.3 Calc: Can you clarify- will applicants receive more points the more partnerships with CBOs or other entities we have?	Yes, there are incentive points available for additional CBO partnerships 7.D.6.c. states, "Proposing CBOs beyond the minimum required for each population designation will receive incentive points."	
21	Section 6: Scope of Work A2 (p 12)	I see one of the goals of the grant is to leverage services provided through the state funded children and youth behavioral health initiative- if we are not a provider of this, how do we align/do we need to be a CYBHI provider?	There is no requirement that you need to be a CYBHI provider, but you should be aware of the services being offered through the CYBHI to address the needs of the population.	

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RFA	RFA 0-5 / Maternal Behavioral Health		
	RFA Section Reference	Question	Commission Response
22	Attachment 6: References (p 44)	Are we as applicants, required to send these reference documents to our references, or is this something the commission does upon providing contact information? Will the commission follow up with references separately?	The Applicants are responsible for sending the reference documents out to your references and including the completed document in your application. The Commission reserves the right to contact the reference to verify the information.
23	Administrative	Is there a page limit, or character/word count limit to the application?	There are no restrictions for Word counts other than the overall Word limitations.  Section 8.A. states, "Applications are to be prepared in such a way as to provide a straightforward, concise explanation of capabilities to satisfy the requirements of this RFA."
24	Administrative	Do we submit the budget as a separate excel document and everything else in word or pdf?	An Excel, Word, or PDF document is acceptable.
25	Section 5: Grant Term & Funding B1 (p7)	How are payments made? Is this a reimbursement grant or receive upfront funds for activities?	Section 5.B. states, "Funds will be allocated during the planning phase in two (2) installments, \$100,000 at contract execution and \$100,000 mid-way through the planning phase. The remaining funds will be allocated in quarterly payments for the program operations phase. Grant disbursements will be subject to the Grantee's compliance with the RFA requirements as submitted through their application, which will be incorporated into the contract."

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	RFA Section Reference	Question	Commission Response	
26	Scope of Work	What is the source of referrals for this RFA? Are the Grantees responsible for obtaining their own referrals	The source of referrals should be local services that can serve the needs of the population including, but not limited to government services, CBOs, CYBHI affiliated providers, etc.  Grantees should develop their own referral process for their partnership.	
27	5 C. GRANT APPORTIONMENT	How much can one CBO receive?	The grant amount is based on where the CBO is located. Small population designation will receive \$2,000,000. Medium designation \$3,000,000. Large designation \$4,000,000.	
28	6 B. SCOPE OF WORK	Can you provide an example of what a partnership with referral sources may look like in a larger county?	A lead CBO may partner with a CBO(s) to meet an identified need or provide a specific service that is not a service provided by the lead applicant or other partner organizations. In that case, they should have a process in place to refer to another entity for that need.	
29	6 B. SCOPE OF WORK	Is the lead CBO responsible for distributing funds to partners? If so, can you provide an example of what that might look like?	The lead CBO is responsible for distributing the funds to their partners as the Commission only contracts with the lead CBO.  The Lead and partners need to agree on roles and responsibilities and payments between each other.	
30	6 B. SCOPE OF WORK	Are there limits or guidelines on how much is distributed to partners who fall under the main CBO?	There are no limits on how much can be distributed to the partners.	
31	N/A	Are there concerns that federal cuts will affect funding at any time?	No. These are state funds that are being awarded.	

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RFA	RFA 0-5 / Maternal Behavioral Health			
	RFA Section Reference	Question	Commission Response	
32	N/A	Are agencies who do <u>not</u> have managed care plan (MCP) exp still competitive or are you preferring MCP experience?	Section 10. explains how each requirement is going to be scored.	
33	Section 5-C #2 (page 8)	Is the provider required to serve the entire county or can they select a set city/region to serve? Given there are various grant sizes based on the entire county that makes me think that are expected to serve the entire county.	There is no requirement to serve the entire county. Applicants must decide the area they can serve whole meeting all of the requirements in the RFA.	
34	Section 6-B	In talking about collaboration and set partnerships, it mentions a formal agreement/mou and the expectation we would pay the other agencies. Are we paying the partners for their services to mothers/young children for their partnership? Are we essentially a broker?  It is also not clear what services we are expected to provide that a re not already covered by Medi-Cal	The Applicant should enter into an agreement/MOU for services provided by the partners in addition to providing direct services themselves. Available resources such as Medi-Cal, WIC, managed care plans should be leveraged to expand service reach and provide avenues of sustainability. Families and children should be connected to all available services to meet their need.	

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RFA	RFA 0-5 / Maternal Behavioral Health			
	RFA Section Reference	Question	Commission Response	
35	1. Introduction	The RFA states that CBH is "awarding grants to local Community Based Organizations (CBO) that meet the behavioral health needs of birthing people and children aged 0-5/Maternal Behavioral Health population. The term Population used herein is inclusive of birthing people, children aged 0-5 and their parents and caregivers."	Services should be offered to birthing people, children aged 0-5, and their parents/caregivers. CBOs should provide complimentary services that serve the entire family unit to create a better environment for the child.	
		Does this mean programming should support only females (mothers), or can programming also support males (fathers)?		
		It is unclear based on the terms "birthing people," which implies mothers, and "parents and caregivers," which implies any gender.		
36		Are any of the funds associated with this procurement are federal funds?	No. These are state funds that are being awarded.	
37	Section 6: Scope of Work B1 (p 12)	Specific to LA county- can there be a few cities within the County we work with, or does the work need to be County-wide?	There is no requirement to serve the entire county. Applicants must decide the area they can serve whole meeting all of the requirements in the RFA.	

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RFA	A 0-5 / Maternal Behavioral Health		
	RFA Section Reference	Question	Commission Response
38	6.A.1	Is there a list of specific CYBHI-funded initiatives that we can reference when developing our workplan? The linked website does not provide specific resources that can be leveraged	The CYBHI program is at <a href="https://cybhi.chhs.ca.gov/">https://cybhi.chhs.ca.gov/</a>
39	Section 5 – Grant term and funding.  C – Grant apportionment (page 7)	Confirming that we apply for the county level (small, medium or large) based on our organization's <u>corporate address</u> (the address filed with the state)?	Physical location indicates the county in which they should apply for.
40	5 – Grant term and funding. C -3 – Grant apportionment (page 10)	As we define the service area we propose to serve, is there an expectation to serve the entire county in which we are located? Or do we propose the geographic area, such as a portion of a large county?	The focus should be on population, not geography.
41	Attachment 4 – Proposed Work Plan	Is there definition about what eligible activities are during the operational period of the grant? Direct behavioral health services to 0-5 and birthing parents and/or caregivers? Are behavioral services to other caregivers eligible? For example, if there is a 0-5 client whose caregiver is other than the parent (for example, grandparent)?	Services should be directed to birthing people, children aged 0-5, and their parents/caregivers.

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	RFA Section Reference	Question	Commission Response
42	Attachment 4 – Proposed Work Plan	Is the preference that partnerships are formed to serve a large geographic area within a county or to add services to fill in gaps to enhance services (but not duplicating or supplanting anything existing)?	Service delivery should focus on serving the population not geography.
43	Attachment 4 – Proposed Work Plan	Can one of the partners be a trainer that all partner agency would use? Or does this go into the budget as training/technical assistance? Do all the partners need to be service agencies?	The Applicant should be able to describe how the services provided by each partner meet the goals of the RFA.
44	Attachment 4 – Proposed Work Plan	For the required partners, can one be a specialty provider that serves the entire project (lead and other partners) with a specific service?	Partnerships should provide complimentary services to serve the identified population.
45	Section 5 -Grant Term and Funding. B.2, page 7	It is stated that grantee monthly check-in meetings may be in person. Do we put travel expenses in the budget? What about mileage, such as for home visitation?	"Monthly check-ins" will be conducted virtually.

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RFA	0-5 / Maternal Behavioral Health		
	RFA Section Reference	Question	Commission Response
46	Attachment 2 Minimum Qualifications B.1 and B.2	This requires proof of our organization's length of existence and experience in providing services related to the population and RFS goals. The instructions state to reference the location in the application where the services are provided. Are you asking for substantiation of our length of existence as a CBO and experience of services? Can you provide examples of what would we include to substantiate this (501 c 3, Articles of Incorporation, contract face page for related services)? Also, do we list this in the table of contents and attached a the end of the proposal?	Applicants should provide documentation that demonstrates the length of time they have been in existence. Please answer the question in the narrative section and attach the documented proof.
47	Attachment 2 – Minimum qualifications B.2	This requires our "active status" certification from the State. Do we list this in the table of contents and attach at the end of the proposal?	There is no requirement where the attachment should be placed in your application as long as it is clearly referenced.  This could be right after the response Attachment or somewhere else in the application.
48	Attachment C – Applicant background	This requires references from each organization listed confirming our collaboration with the instruction to reference where in the application it is located. Is it acceptable to list these in the table of contents and attach as Attachment 5?	Yes, as long as it is clearly referenced where the references can be located in the application.

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	RFA Section Reference	Question	Commission Response
49	Attachment 3 C.3	Does the following question for our 0-5 program or entire agency? The question is "staff employed by your organization? This does not include volunteers or contractors."	Please indicate staff that will work on the initiative.
50	Attachment 4 – Proposed Work Plan	This requires letters of commitment from each participating organization, with the instruction to "reference the location in the application where the letter of commitment is located." Is it acceptable to list these in the table of contents and note that these are in attachment 5?	Yes, as long as it is clearly referenced where the Letters of Commitments can be located in the application.
51	Attachment 8 - Budget	In the budget, there are lines to list each subcontractor. Do we just provide the total amount per contractor (#1, #2, etc.) – this is what is shown in the example) and then provide more information in the budget detail?	Yes. List the amount for each contractor and provide the explanation of the cost in the Proposed Budget Narrative (Attachment 9)

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RFA	A 0-5 / Maternal Behavioral Health		
	RFA Section Reference	Question	Commission Response
52	Attachment 13	Attachment 13 is titled "Payee Data Record," but the information and link in the attachment seem to be the same as for the "Bidder Declaration form" (another attachment).  Could you provide the correct link,	See Addendum 1 for correction
		please?	
53	9 - Submission Instructions – B. Required proposal format	Is there a word count/limit for the narrative responses? Also, is there a required or preferred type font and size? Single spaced?	There is no word count/limit. Please provide complete information as succinctly as possible. There is no format requirement.
54	9 - Submission Instructions – B. Required proposal format	At the proposers conference and on page 27, it was stated that a proposal could be submitted in multiple emails if the file is too large. How would you like us to designate each email – adding #1 of 2 to the required subject line? Or other preference? And identifying in the email body? We see it is our responsibility to follow up to make sure that all emails are received. Will we receive a response on the day we submit so we can ensure that all emails and our application were received?	Please number the emails as 1 of 3, 2 of 2, etc. You will receive a response after the follow-up email is received.

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RFA Section Reference	Question	Commission Response
55	I have a question about funding eligibility as related to equity. Many small counties lack community organizations that are 501c3 with capacity to apply for or implement a grant with this level of coordination requirements. How will the funds be distributed so that they serve the children from the counties with the highest rates of foster care placement, when those are the very counties that lack sophisticated community based organizations with the capacity to serve as a lead agency. Why were First 5s not included as eligible agencies to receive funding? Is it too late to reconsider? Has there been consideration of regional approaches so that multiple counties can apply since in rural communities many families access services in multiple counties due to the scarcity of resources.	There will be no changes to the RFA requirements as to who can apply for the grant.  There is no geographic restriction to service delivery. The intent is to create partnerships of direct service providers.

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RFA	RFA 0-5 / Maternal Behavioral Health		
	RFA Section Reference	Question	Commission Response
56	Section 3. Background, page 5	When will the Technical Assistance, Landscape Analysis and Evaluation (TA Provider) solicitation be released and what entities will be eligible to apply?	The details will be in that RFA, which is forthcoming.
57	Section 6. Scope of Work, A. Goals and Objectives	How do you envision measuring the goals to "reduce school failures" and "prevent out-of-home placements"?	Data metrics will be developed and shared with grantees once the TA provider is in contract.
58	Section 5. Grant Term and Funding, B. Grant Cycle	When do you expect the Planning Phase to begin?	Upon contract execution.
59	Section 10. Scoring Process, Application Scoring, Assessment Scoring Detail, Proposed Workplan D.4.c.	Is there an expected number or percentage of the 0-5 population to be served annually?	There is no requirement or expectation that a certain number or percentage of the population be served annually.
60	Section 5. Grant Term and Funding, C. Grant Apportionment	Will all counties with a Large Designation be apportioned the same amount of funding or will funding be determined based on the actual population size of awardees?	All grantees from a Large Population designation will be awarded \$4,000,000.

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RFA	RFA 0-5 / Maternal Behavioral Health		
	RFA Section Reference	Question	Commission Response
61	Section 2. Purpose	Does the statement "serve the behavioral health needs of the Population through the provision of support services to birthing people during pregnancy and to the family through infancy and early childhood" (RFA page 3) mean that pregnant people are the primary target population or can services begin when children are anywhere from 0-5?	The target population includes birthing people, children aged 0-5, and their parents/caregivers. Services may begin when children are between 0-5.
62	Page 16, Section B (Minimum Qualifications)	Can a Lead CBO applicant use a fiscal agent, such as a local First 5, to distribute payments to subcontractors?	Payments will go to the Applicant/Grantee for distribution.  Payments may be distributed by the grantee to a fiscal agent.
63	Page 16, Section B (Minimum Qualifications)	Can First 5 San Diego be a lead applicant?	The lead applicant must be a non-profit 501(c)(3).
64	Page 18, Section E, #3 (References)	Can the family reference be from a program that we coordinate but don't provide direct services for? (We serve as a backbone organization that supports other organizations that provide direct services.)	The reference should be from a client that received services from the organization.

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	RFA Section Reference	Question	Commission Response
65	Page 59, #2; Page 73, #24; Page 78, #52	Does the CBO fiscal agent need to have the same level of insurance as the CBO(s) providing direct services?	Workers' Compensation Insurance is a requirement for all employers in the State. It is unclear what is meant by level of insurance. There is no requirement for a specific level of insurance.
66	Page 3, Section 2 (Purpose)	Please provide more information on the criteria related to "reduce school failures" and "prevent out of home placements."	Services provided should benefit the child in a way that prepares them for entering school and being successful. The Applicant should define how their services tie into future school successes and how families are supported to keep children with their family.
67		Will county First 5 organizations be eligible to apply? First 5s are uniquely matched to the goals of this funding opportunity, but rarely have 501(c)3 entities associated with their small government entities. Most First 5s are small independent, not-for-profit "government" agencies who hold strong relationships with community CBOs across multiple systems, focused on maternal health and the 0-5 population. Is there any flexibility to allow First 5s to apply?	There will be no changes to the RFA requirements as to who can apply for the grant.  The Applicant must be a non-profit 501(c)(3).

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RFA	RFA 0-5 / Maternal Behavioral Health		
	RFA Section Reference	Question	Commission Response
68	MINIMUM QUALIFICATIONS (ATTACHMENT 2) p. 11, 17 and 43	Would a 501c3 nonprofit with extensive experience supporting the services directly provided by Community-based Organization (CBOs) that meet the goals of this grant be an eligible lead applicant?	<ol> <li>The Applicant must meet all of the minimum requirements</li> <li>Be an established CBO which has been in operation for at least two (2) years and has experience providing services that reduce out-of-home placement or other negative outcomes of behavioral health illness for birthing people and children ages 0-5.</li> <li>Be a non-profit organization, registered to do business in California.</li> </ol>
69	. SCOPE OF WORK p. 11	If the lead applicant is a fiscally-sponsored CBO, can the fiscal sponsor be the responsible party for initiating and developing the partnerships as required in this proposal as well as entering into subcontracts or Memorandums of Understanding with the partner organizations	The lead Applicant must be a 501(c)(3) non-profit and meet the Minimum Requirements.

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	RFA Section Reference	Question	Commission Response
70	N/A	Will county First 5 organizations be eligible to apply? First 5s are uniquely matched to the goals of this funding opportunity, but rarely have 501(c)3 entities associated with their small government entities. Most First 5s are small independent, not-for-profit "government" agencies who hold strong relationships with community CBOs across multiple systems, focused on maternal health and the 0-5 population. Is there any flexibility to allow First 5s to apply?	There will be no changes to the RFA requirements as to who can apply for the grant.  The Applicant must be a non-profit 501(c)(3).
71	N/A	I am emailing you to inquire about the eligibility requirements for this RFA. The solicitation states that the grant is earmarked for Community Based Organizations. Can you please define this? Would this mean only 501(c) organizations can apply, or can small businesses that are community-based (such as a mental health agency) be eligible to apply?	The Applicant must be a non-profit 501(c)(3)

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72	N/A	. Many small and rural counties lack community organizations that are 501c3 with capacity to apply for or implement a grant with this level of coordination requirements. For example while we have multiple 501c3 partners they each rely on either First 5 Tehama, the county office of education or county public health to provide interagency I infrastructure. This would be easily seen in the CYBHI round 1,2,3 recipients in our county and then the list of paid partners. Seeing as though it is only 501 C 3 who are eligible to apply- it is of great concern to us that the funds be distributed so that they serve the children from the counties with the highest rates of foster care placement, when those are the very counties that lack sophisticated community based organizations with the capacity to serve as a lead agency. If this is the goal of the commission we request information on the following questions:  -Why were First 5s not included as eligible agencies to receive funding?  -Is it too late to reconsider?  - Has there been consideration of regional approaches so that multiple	There will be no changes to the RFA requirements as to who can apply for the grant.  The Applicant must be a non-profit 501(c)(3).
		counties can apply since in rural communities many families access	

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RFA Section Question Commission		Commission Response		
		services in multiple counties due to the scarcity of resources.		

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RFA	RFA 0-5 / Maternal Behavioral Health			
	RFA Section Reference	Question	Commission Response	
73	N/A	Based on the documents I've reviewed and information shared at the bidders' conference, it appears that only 501(c)(3) organizations are eligible to apply as lead agencies. This is concerning, as First 5s across California—especially in Marin—play a critical role in coordinating systems of care for birthing families and young children. Our role is clearly outlined in Section 130100 of the Proposition 10 Statute, which emphasizes the creation of an integrated, comprehensive, and collaborative system to support early childhood. Many First 5's are independent public entities which is the case for First 5 Marin.  Given this, I respectfully request that the Behavioral Health Services Oversight and Accountability Commission consider allowing First 5s to serve as lead agencies if local partners are in agreement. We deeply appreciate this opportunity to support birthing families and young children and look forward to your consideration.	There will be no changes to the RFA requirements as to who can apply for the grant.  The Applicant must be a non-profit 501(c)(3).	

#### RFA 0-5-MBH-001

RFA	RFA 0-5 / Maternal Behavioral Health			
	RFA Section Reference	Question	Commission Response	
74	Section 5. Grant Term and Funding (Subsection C Grant Apportionment)	The section indicates "Population is per county based on headquarters/main location of the Applicant.  - Our HQ is based in San Francisco; however we do not provide direct services within that county. We service various counties across California. Are we able to select another county as the main location rather than our HQ?	The county location will determine the level of grant funding available, it does not restrict service delivery geographically.	
75	Section 6 Scope of Work (Subsection B Grantee's responsibilities)	The section indicates "Each Grantee is required to partner with another local CBO(s)"  - For the purposes of this application, are we simply identifying other CBOs or expected to have agreements in place prior to submission? If other CBOs are not willing to partner, are we able to utilize the partnerships with other local government agencies and count them as one of the designated partners for medium or large counties?	The lead Applicant is required to partner with a minimum number of CBOs to form partnerships. Additional partners above the minimum may include local government agencies	

#### RFA 0-5-MBH-001

RFA	RFA 0-5 / Maternal Behavioral Health			
	RFA Section Reference	Question	Commission Response	
76	Section 6 Scope of Work (Subsection D Reporting)	Will there be reporting templates provided for the quarterly, annual and final reports?	Yes. Templates will be provided to the grantees	
77	Section 6 Scope of Work (Section E References)	The section indicates that a "reference is required from each county agency that has collaborated with the Applicant." We have multiple counties and agencies that we work withare we expected to have a reference for all partners or only for those within the county we are applying?"	References are to support the response to the Applicant's Background.	
78	Section 6 Scope of Work (Section E References)	The section indicates that "2 references are required from a family member and/or parent of a child aged 0-5 who received services from the Applicant" Is there a reference template that families can use? Many of our families are not comfortable with speaking or writing Englishare they able to use a template or write in another language?	References can be provided in the language of choice. We do not have an alternate template.	
79	6.B.2.c.1	What is the minimum amount a partner CBO must be allocated in the grant budget? Per year? For the full term?	There is no requirement that a minimum amount must be allocated to a specific partner CBO.	

#### RFA 0-5-MBH-001

RFA	RFA 0-5 / Maternal Behavioral Health			
	RFA Section Reference	Question	Commission Response	
80	7.D.3	Are there specific requirements or attachments that must be included in the application to demonstrate that the proposed partnerships have been preliminarily agreed upon, such as a Letter of Commitment or a draft Memorandum of Understanding? If not, can we include attachments to prove the proposed partnerships to strengthen our application?	A Letter of Commitment is required to be submitted with the Application.  Section 7.D.6.a. For each proposed Local CBO or public agency, provide a signed Letter of Commitment that if awarded the grant, the CBO or public agency will enter into a formal agreement to partner in support of this grant	
81	Section 7, A1a.	If as an Agency we want cover two counties, do we need two separate complete applications?	You may only submit one application, and your organization address will determine the funding level that you are applying for. There are no geographical location restrictions as to where you can provide services with this grant	
82	Section 6 D.3. Calc Partnership	What is the difference between the partner agencies and the CBOs we will be contracting with for the RFA?	CBOs provide direct services to the population. Partner agencies can support these partnerships with additional resources or assistance with referrals.	

#### RFA 0-5-MBH-001

RFA	RFA 0-5 / Maternal Behavioral Health			
	RFA Section Reference	Question	Commission Response	
83	Section 5 B.1	What is the reimbursement structure of this grant? Is payment based on milestones or on reported costs?  Specifically, with regards to the quarterly payments during the program operations phase.	During the planning phase, \$100,000 will be paid upon contract execution and \$100,000 mid-way through the phase. All other funds will be paid quarterly during the operations phase.	
		priase.	Section 5.B.3. The Commission may withhold funds from a Grantee who fails to meet the reporting requirements, falls behind schedule, has unexpended funds, or modifies the scope of the program. If a Grantee finds itself in this position, the Grantee shall immediately contact the Commission and provide a mitigation plan to address the contractual program deficiency. The Commission may withhold funds until an agreed upon mitigation plan is submitted and accepted by the Commission	
84	Attachment 8 - Budget	If we are applying for multiple counties do we need a separate budget per county?	Only one budget is required. The budget is for the overall grant program and not based on geographical location.	
85	Section 6 B2c 1.	Are there any requirements as to the amount of funds allocated to the local CBOs/Subcontractors?	There is no requirement as to the amount of funds allocated to the local CBOs/Subcontractors.	

#### RFA 0-5-MBH-001

RFA 0-5 / Maternal Behavioral Health			
	RFA Section Reference	Question	Commission Response
86	6.B. 2(c)(1): The expectation is that the Grantee will pay the Local CBO during the grant term	Are there restrictions on whether the funds can be used for direct service provision, staffing, administrative costs, infrastructure, or capacity-building activities within the partnering organizations? Or is it expected that they be structured as fee-for-service agreements?	Section 5.C.4.a.1)c) limits administrative costs to 15% of the grant.
87	RFA 0-5/MBH-001	Do the CBO partnerships have to be new? All of them?	No. CBO partnerships do not need to be new.
88	RFA 0-5/MBH-001	If our CBO works with DCFS referrals (children in the county foster care/child welfare system), but the referrals come through a different body (for example, through DMH), is this considered collaborating with child welfare and/or a county agency?	The requirements are for CBOs to partner together to form wrap-around services for the population. The partnership may choose to work with other social services or government agencies for resources or referral services.