

El documento se está traduciendo actualmente al español y esa versión se publicará el 19 de junio.

Since the release of this opportunity, we received several questions from potential applicants. While we are responding individually to each received question, below we have also compiled answers to some of the most commonly received inquiries in order to promote a consistent sharing of information more broadly among the potential applicant pool.

Application

- Links to the application and budget template can be found on page 6 of the funding opportunity announcement which you can see by clicking [here](#). When you have reviewed the entire funding announcement, you can click [here](#) to find the application materials.
- Letters of intent, project abstracts, and/or statements of need are not part of the application process, therefore please reply only with what is outlined under the How to Apply section starting on page 6 of the RFP document.
- Individual organizations can apply as the prime awardee in one application as well as a sub-awardee in another application.
- The Foundation will not be providing feedback on applicant proposals before final submission.

Budget

- No matching funding is required for this opportunity.
- Grant funding can be used to enhance and/or grow services already in place.
- Activities covered by this funding opportunity are not intended to cover the cost of treatment.
- Funds cannot be used to enhance the specialty trained behavioral health workforce, such as hiring an additional therapist.
- While we encourage all applicants to take into account sustainability considerations for a project or program as necessary or appropriate, we do not require a documented sustainability plan as a condition of the RFP.
- The Foundation does not cover overhead or indirect expenses in a university setting.
- For further clarity around capital and other budget expenses, please refer to the “restrictions” section in our organization’s general FAQ which can viewed by clicking [here](#).

Funding and Payment

- Up to \$5M has been allocated to support this funding initiative.
- As this is a new funding opportunity there is no list of organizations that have previously received this type of funding.
- Given the varying dollar amount for potential applications, we do not have a set number for award selection.
- Payment of grant funds will be made annually. Applicants should use their budget submission to describe a payment structure (e.g., equal payments over three years, or different payment amounts each year) that reflects the needs of the project.
- At this time, there is no expected commitment to extend funding beyond this current initiative.

Eligibility, Funding Priorities, and Preferences

- Grantees do not have to be a direct service organization; however, the organization must meet the eligibility criteria shown on page 4 of the RFP.
- This opportunity is specifically designed to reach the youth population, for which ages 12-26 can be generally included.
- Funds will not prioritize direct intervention/services over capacity building or vice versa.
- We are open to funding a mix of programs/practices - both evidence-based and evidence informed.
- We defer to the expertise of those in the field, leading and engaging in the work daily, to select evidence-based approaches or promising practices that resonate with the communities they serve and have not prioritized or developed a preference for any specific approach.
- Public health models, such as Mental Health First Aid/QPR trainings or Community Resilience Models (CRM), are applicable approaches; however, the Foundation does not consider one to be more desirable than the other.

Learning, Evaluation, and Outcomes

- The learning and evaluation activities led by the Foundation are intended to look across all funded projects and better understand what projects are accomplishing, their challenges, and lessons related to what it takes to expand access to mental and behavioral health services. We anticipate this learning will inform future activities within our Access to Care focus area and supplement what grantees may be learning through their own internal evaluation efforts, if applicable. The evaluation partner will be selected after projects are identified, and evaluation questions will be developed in partnership with grantee partners. **We recommend grantee partners plan to spend approximately one hour per month participating in learning and evaluation activities led by the Foundation.** This may include individual activities, engaging with the evaluator, or cross-learning with other grantees.
- Grantee partners are welcome to conduct individual (i.e., grantee-led) evaluation activities that would advance their efforts. These activities would not be covered through the Foundation-led evaluation; however, partners are invited to designate grant dollars toward project specific monitoring and evaluation efforts in their project budget. There are no set parameters for evaluation budgeting. Budgets will be reviewed based on the scope of the project described.
- Grantee partners are expected to propose outcomes based on their individual project goals. The outcomes will then be reviewed and refined with Foundation staff, if necessary. Please see pages 5-6 of the RFP for examples of potential outcomes. Progress toward outcomes will be discussed with the Program Officer during annual learning calls. There are no specific reports required; however, grantee partners are welcome to share supporting documentation, if desired. Applicants are encouraged to consider the use of both quantitative and qualitative data at levels most appropriate for their projects. This may include individual, community, and/or organization-level data; however, the Foundation does not require the use or inclusion of specific data.
- We invite applicants to consider the following questions as they consider possible outcomes and metrics for demonstrating success:
 - What are the goals and intended results of the project?
 - What does success look like for the project overall?
 - How will we recognize success and/or progress toward success throughout the project?

- What might it take to achieve the intended results?

Definitions

- **Short-term impact:** Achievement of key milestones mentioned within the RFP within the lifespan of this 1-3 year grant.
- **Community Health Worker:** The CHW Section of the American Public Health Association defines a community health worker as a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served. This trusting relationship enables the worker to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery. A community health worker also builds individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as outreach, community education, informal counseling, social support, and advocacy.
- **Culturally and linguistically responsive approaches:** approaches that integrate cultural and linguistic practices relevant to the communities that are being served to promote inclusive supportive, and engaging environments.
- **Trained workforce:** refers to professionals that have received training, from evidence-based programs or promising models, to identify, understand, and respond to the signs/symptoms of distress, trauma, mental health changes or substance use and provide initial support and connection to resources for youth. **These professionals may include a variety of health and other professionals that are already working in careers or roles such as, but not limited to**
 - community health workers
 - dental clinicians
 - school nurses
 - school counselors
 - school administrators and staff
 - peer support specialists
 - religious and spiritual leaders or personnel
 - professionals within youth serving organizations
 - guardians, trusted peers, and adults
 - others who regularly work with or on behalf of youth

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