BlueCross BlueShield of North Carolina Foundation

1. **How can I access the grant portal to apply?**

   Here is the direct application link: Partnerships Supporting Parent/Caregiver Mental Health & Well-being Application. After clicking the link, you will be prompted to log in or create an account if you do not already have one. The application should then appear on the next page.

2. **Are we able to submit more than one application?**

   Organizations may only submit one application as the lead applicant.

3. **Will there be a Q & A for this application via Zoom or just on a document?**

   There is no live question and answer session for this opportunity.

4. **Could you clarify whether the lead applicant is responsible for submitting the entire application package, including the project narrative, budget, and organizational financials, while partner organizations only provide their letters of support?**

   The lead applicant is responsible for submitting all required documents and uploading letters of support from partner organizations.

5. **Are the partner organizations expected to submit their own organizational financials or any additional application materials?**

   Partner organizations should provide the lead applicant with a letter of support as indicated in the RFP. Only lead applicants need to provide organizational financials. No additional application materials are needed from partner organizations for the application.

6. **Does our existing grant with the Blue Cross NC Foundation create any eligibility or conflict concerns for this particular opportunity?**

   Current and past Foundation grantees are welcome to apply, and your existing grant does not preclude you from applying. Proposals will be evaluated according to the criteria outlined in the RFP. There are no additional considerations beyond what is described in the RFP.

7. **While the funding opportunity does not focus on child care providers, could the grant support a partnership with a child care center to support parents with mental health and well-being needs?**

   We encourage cross-sector partnerships. This includes but is not limited to partnerships with child care centers and early learning settings provided that the focus is on parents and caregivers as defined in the RFP.

8. **Could you clarify the threshold for "trusted community-based organization"?**

   organization as one that is embedded within and accountable to the community it serves with demonstrated trust and credibility among parents

and caregivers of young children (prenatal to age five). For the purposes of this RFP, trust is defined by: Consistent, direct engagement with caregivers through programs, services, or community-based activities; evidence that caregivers view the organization as a reliable and accessible source of support; culturally responsive and relationship-centered approaches to engaging families; meaningful incorporation of caregiver voice, leadership, or feedback in shaping services and strategies. Organizations that primarily operate at a systems, policy, or institutional level (e.g., universities, government entities) without direct, ongoing relationships with caregivers are unlikely to be competitive as lead applicants but may serve as partners.ons that primarily operate at a systems, policy, or institutional level (e.g., universities, government entities) without direct, ongoing relationships with caregivers are unlikely to be competitive as lead applicants but may serve as partners.

9. **Are local governments eligible to apply?**

   Organizations that primarily operate at a systems, policy, or institutional level such as universities and government entities without direct, ongoing relationships with caregivers are unlikely to be competitive as lead applicants but may serve as partners.

10. **We are not a nonprofit organization but will be partnering with churches and other non-profits. Are we eligible to apply?**

    Lead applicants must be a 501(c)3 or a fiscally sponsored program. However, a for profit entity could serve as a partner organization to the lead applicant.

11. **Are formal, signed letters of support from all partner organizations required by the August 24 deadline, and is there a specific template or level of formality (such as a signed MOU) required?**

    Signed letters of support from the organization(s) you propose to partner with for this grant are required. All materials including letters of support must be submitted by the August 24 deadline. There is not a specific template for the letters of support, and formal MOUs are not required.

12. **The RFP states that funding is not intended to start new programs but to integrate/enhance existing ones. If a partnership aims to expand the reach or capacity of a current service, does this meet the Foundation's intent?**

    Yes, expanding reach and capacity of a service that is currently available is allowable.

13. **Can you share more about the structure of the learning and evaluation technical assistance? For example, what is the expected time commitment for grantees to engage with the consultant?**

    We are currently in the process of selecting and contracting the learning and evaluation technical assistance (TA) partner, so some details are still being finalized. Our intention is for TA support to be customized, flexible, and responsive to the unique needs, goals, and learning priorities of each grantee. We anticipate the engagement will be more intensive during the early stages as the TA partner builds relationships, gains an understanding of the organization's work, and co-develops a support plan with grantees. Over time, the level of engagement may decrease as priorities become clearer and grantees advance their efforts. While the exact structure will depend on each organization's needs, we currently estimate that grantees should plan for approximately 2–4 hours per month of engagement on average. We will share additional details about the TA model, expectations, and available supports once the partner has been selected.

14. **The RFP notes an anticipated grant start date of November 1, 2026. Is this date fixed, or is there flexibility depending on the partner's internal contracting processes?**

    Our intent is for grants to start November 1, 2026. We will consider alternate start dates on a case-by-case basis.

15. **Given the three-year grant period, what is the Foundation's expectation for project sustainability once the funding ends?**

    The Foundation recognizes that long-term sustainability looks different across organizations and partnerships. Rather than expecting applicants to fully replace grant funding at the end of the three-year period, the Foundation is looking for partnerships that use the grant period to build stronger, more connected, and more durable systems of support for caregivers that can continue beyond the grant. Strong applications will demonstrate a thoughtful plan for how the partnership and its benefits to caregivers can continue and evolve beyond the grant period. Examples of sustainability can include:

    - *Ongoing collaboration among organizations.*
    - *Continued referral and coordination processes between partners.*
    - *Integration of successful approaches into existing programs and operations.*
    - *Enhanced organizational capacity, staff skills, and infrastructure.*
    - *Policy and practice improvements that strengthen support systems for caregivers over the long term.*

16. **Is there a list of organizations that have been awarded this funding in the past?**

    This is a new funding opportunity, and no previous awards have been made related to this initiative.

17. **We serve families from across North Carolina but operate from one location. Does this align with the Foundation's local partnership model?**

    Operating from a single location while serving families from across North Carolina does not automatically make an applicant ineligible or less competitive. The Foundation uses the term "local partnership" to emphasize partnerships that are grounded in and responsive to the communities they serve, rather than requiring a specific geographic footprint or limiting service delivery to a particular county or region. Applicants should clearly describe the communities they serve, how they maintain trust and accountability with caregivers, and how the partnership will strengthen connections among supports and services available to those families.

18. **Our organization serves multiple ages. Can we apply if we focus on parents and caregivers of children over age 5?**

    This funding opportunity is specific to parents and caregivers of children from prenatal to age five. In addition, lead applicant organizations must be a trusted community-based organization that is embedded within and accountable to the community it serves with demonstrated trust and credibility among parents and caregivers of young children (prenatal to age five). Applicants that do not focus on the target population and/or do not meet the eligibility requirements are unlikely to be competitive for this opportunity.

19. **Are there any informal expectations regarding the percentage of funding allocated to lead applicants versus partner organizations?**

    We do not have specific expectations about the percentage of funding allocated to partner organizations.

20. **Can grant funds be used to provide rental assistance for parents and caregivers?**

    Funds are intended to support the programmatic infrastructure and staff time necessary to build and strengthen a partnership that will sustain beyond the grant period. Proposed activities/budgets should also support family engagement and leadership in improving available supports and services and in identifying policy and practice barriers and opportunities. Some examples include staff time, planning, and implementation efforts to connect, streamline, and/or integrate services; stipends for caregiver leadership engagement; building shared data and/or communication systems; relevant staff training, skill building, and coaching; and ongoing

coordination efforts. Funding must also be used in alignment with the focus on mental health and well-being which includes strengthening social connection and a sense of community among caregivers to reduce parent/caregiver isolation; fostering open dialogue around stress and mental health to reduce stigma, promote awareness, and build parent/caregiver coping skills; and strengthening connections to clinical mental health care for caregivers through trusted settings. Rental assistance is beyond the scope of this RFP.

21. **Is it acceptable for the grant budget to support staffing (such as a Resource Navigator, or Family Services Manager) if those positions primarily coordinate partnerships, referrals, and caregiver engagement?**

    Yes, staffing to support the partnership and engagement of caregivers is allowable.

22. **Would developing standardized screening tools, referral protocols, and follow-up processes be considered an appropriate use of grant funds?**

    Development of screening and referral processes with the partner organization(s) is allowable provided that their purpose aligns parent/caregiver mental health and wellbeing.

23. **Are indirect costs for universities allowable?**

    No. We are unable to pay for university overhead costs. These are the costs associated with providing facilities and administrative support for sponsored activities and include operating and maintaining buildings and grounds, equipment, libraries, and providing administration at the university, college, and department levels.

24. **What organizational or partnership characteristics will reviewers prioritize when assessing proposals?**

    Reviewers will utilize the criteria listed under the Assessment of Applications section on page 5 of the RFP to assess proposals.

25. **What outcomes or indicators would the Foundation consider most meaningful?**

    The Foundation is interested in tracking the outcomes listed on page 5 of the RFP (see Anticipated Outcomes). Awarded organizations will track progress toward grantee-defined outcomes that align with one or more of the above outcomes as relevant to their proposed work. Not every outcome will be applicable to every proposed partnership.

26. Will the Foundation provide standardized evaluation metrics, or should we propose our own?

For the proposal process, applicants should propose outcomes and indicators they are interested in tracking or already tracking under question 7a. Awarded grantees will work with a Learning & Evaluation consultant to further refine metrics for their partnership.

27. Will each grantee be expected to produce formal policy recommendations, or would documenting local barriers and successful partnership suffice?

Grantees will work with a Learning & Evaluation consultant who will help identify and document policy and practice opportunities. This will be done in collaboration with the consultant. Grantees are expected to engage with the consultant as part of the grant.

28. How does the Foundation define "meaningful caregiver leadership"?

Meaningful caregiver leadership involves caregivers having an authentic and ongoing role in shaping priorities, influencing decision-making, guiding implementation, and helping identify opportunities for improving services, systems, policies, and practices that affect families. The Foundation is interested in partnerships where caregivers are treated as experts in their own experiences and where their perspectives help drive the direction of the work. Examples of meaningful caregiver leadership may include:

- *Serving on advisory councils, steering committees, or leadership teams with real influence over decisions.*
- *Co-designing strategies, activities, or approaches to caregiver well-being.*
- *Participating in planning, implementation, learning, and continuous improvement efforts.*
- *Helping identify policy and practice barriers and opportunities for change.*
- *Receiving stipends or other supports that enable their participation and leadership.*

The Foundation recognizes that caregiver leadership can take many forms and does not require a specific structure. Applicants should demonstrate how caregivers' voices, needs, and interests will inform decisions and actions throughout the partnership, rather than being consulted only periodically.

29. What is the difference between "implementation of direct services" and "cost of treatment services for individuals"?

Grant funds may be used to support the coordination, integration, enhancement, and delivery of activities that directly benefit caregivers. This includes the staff time, infrastructure, partnership coordination, training, community engagement, peer support activities, navigation services, and other implementation costs needed to deliver or strengthen services and supports for caregivers. However, grant funds may not be used to pay for the treatment costs of individual caregivers. Treatment costs refer to expenses associated with providing clinical care to a specific person, such as therapy sessions, psychiatric services, diagnostic assessments, medications, or other billable behavioral health treatment services. The Foundation intends for grant funds to strengthen the systems, partnerships, infrastructure, and supports that help caregivers access and benefit from services, rather than paying for the clinical treatment services received by individual caregivers

30. **Are there specific populations or communities you are particularly interested in supporting?**

This opportunity is focused on parents and caregivers of children (prenatal to five) in North Carolina. Parents and caregivers include individuals providing primary caretaking for a child (inclusive of biological, step, adoptive, kinship, foster and other types of caregivers). The opportunity is available statewide and is not limited to a specific community or geographic area.

31. **How much flexibility will grantees have to refine activities and budget allocations over the 3-year period based on caregiver feedback and learning?**

We understand and expect that activities and budget allocations will evolve and be refined over the grant period. Awarded grantees can work with their Program Officer to make adjustments as needed.

32. What are some examples of high-level budget line items?

Examples of high-level budget line items are Personnel, Stipends for Caregiver Engagement, Consultants, etc.

33. May we include childcare stipends or on-site child supervision when needed to enable caregiver leadership and connection activities?

Yes, supporting caregivers with stipends, transportation, and child care assistance to enable their leadership and participation is allowable.

34. **Does the five-page narrative limit include a cover page or references, and are tables permitted within the narrative? Are there specific formatting requirements or word limits?**

    Applicants should use the narrative template provided in the grant portal. The narrative template does not include a cover page. Tables and references may be included but are not necessary. Beyond the five page limit, there are no word count limits. We do not require any specific font size, margin size, or other formatting.