

**AMENDMENT NO. 3  
RFA NO. 2021HCA2**

**Substance Use Disorder Prevention (SUD Px) and Mental Health Promotion Project (MHPP)  
Community-Based Organization (CBO) Enhancement Grants**

Date Issued: March 8, 2021

To: RFA Applicants

From: Heidi Jones, RFA Coordinator

Purpose: Link to Webinar Recording, Week 2 Q&A, Webinar Transcript

This amendment hereby modifies the RFA to provide the link to the March 1, 2021 webinar, HCA's responses to Week 2 questions, including questions posed during the webinar, and to provide the unofficial transcript of the webinar.

The link to the webinar can be found on YouTube using the following link: <https://youtu.be/g1nsc-NFfe0>.

All other terms, conditions and specifications remain unchanged.

**RFA - 2021HCA2 - MHPP and SUD Px/MHPP CBO Grants**  
Week 2 Questions, Including Webinar

#	Section	Applicant Questions	HCA Responses
1	Application Location	Where do we find the application?	<p><a href="https://www.hca.wa.gov/about-hca/bids-and-contracts">https://www.hca.wa.gov/about-hca/bids-and-contracts</a></p> <p>Search for RFA 2021 HCA 2</p> <p>The RFA and all associated documents are also posted on Washington's Electronic Bid System (WEBS). Applicants are strongly encouraged to register as a vendor in WEBS at <a href="https://fortress.wa.gov/ga/webs/">https://fortress.wa.gov/ga/webs/</a> and to download a copy of this RFA from WEBS, in order to view and Amendments that are issued by HCA which may modify the terms of this RFA.</p>

**RFA - 2021HCA2 - MHPP and SUD Px/MHPP CBO Grants**  
 Week 2 Questions, Including Webinar

#	Section	Applicant Questions	HCA Responses
2	High Need/CPWI Communities	When will the amended High Need communities and CPWI communities be made available?	There are no amendments to Attachment D, High Need Communities List, at this time. Applicants are strongly encouraged to register as a vendor on Washington's Electronic Bid System (WEBS), at <a href="https://fortress.wa.gov/ga/webs/">https://fortress.wa.gov/ga/webs/</a> and to download a copy of this RFA from WEBS, in order to view any Amendments that are issued by HCA which may modify the terms of this RFA.
3	Background, Applicant Types	Did you mention that want a balance between Type A and Type B applicants? Was this done previously and, if so, what did the ratio look like from the past?	This has not been done previously. This is a new feature in the application.
4	Mentoring	Can you expand on qualifying mentoring strategies?	The question in the webinar was regarding community versus school based mentoring programs. Only community-based mentoring programs are allowable with DMA funding. We, at this time, cannot support school based mentoring with our Dedicated Marijuana Account funding. The primary difference is that community based mentoring happens outside of school hours. So, school based mentoring will happen, like during lunch or recess and that the community based mentoring is happening outside of the school setting. School based and community based mentoring are allowed with MHPP funding.
5	Funding Amounts	So, the MHPP is up to \$65K per year, as well?	Yes, MHPP is up to \$65K per year
6	MHPP Programs	I am not seeing YMHFA or MHFA on the list of programs for suicide prevention and mental health promotion, did I read that right? It was on there in past years.	Applicant must implement at least one Youth Mental Health First Aid (YMHFA) training per year, a minimum of two YMHFA trainings during the project period.
7	Multiple Applications	Can applications include programming from both funding sources and therefore apply for both funding sources through one application?	No, separate applications must be submitted per funding source.

**RFA - 2021HCA2 - MHPP and SUD Px/MHPP CBO Grants**  
 Week 2 Questions, Including Webinar

<b>#</b>	<b>Section</b>	<b>Applicant Questions</b>	<b>HCA Responses</b>
<b>8</b>	Partnerships	For an application that includes a CBO/CPWI in partnership with a university, who should submit the application, CPWI/CBO or University?	Either may apply so long as the entity meets the eligibility list. If the CPWI/CBO is not its own 501c3 or other eligible entity, the University must be the lead applicant.
<b>9</b>	Multiple Applications	Can one agency submit for both DMA and MHPP grants?	Yes, one agency may submit an application for both DMA and MHPP grants, one application for each funding source.
<b>10</b>	Webinar Technical Difficulties	Sorry, I am not getting audio	If you are still not getting audio, we will be providing you with a recording of the webinar.
<b>11</b>	Program Eligibility	Would Guiding Good Choices count as a Mental Health Promotion program as it addresses family education programs e.g., increasing child parent bonding, child transitions, communication skills, problem solving skills, disciplinary skills?	Guiding Good Choices is on the list of EBP programs for MHPP programs- find the list in the MHPP Project Narrative
<b>12</b>	Program Eligibility	Would Mental Health First Aid workshops be allowable activity for Mental Health Promotion?	Youth Mental Health First Aid is a requirement for the MHPP grant. A community could decide to also provide Adult Mental Health First Aid to the community in addition to the Youth Mental Health First Aid offering
<b>13</b>	Multiple Applications	If we are approached by multiple organizations who want to partner with our coalition, can more than one organization affiliated with our coalition/high needs community apply for a grant?	HCA will recognize a coalition as a single organization, understanding that they may need to use a fiscal agent to receive grant funds. An organization that acts a fiscal agent for multiple coalitions is allowable, however each coalition may not receive multiple awards from single funding sources.
<b>14</b>	Technology Purchases	Do either funding source all the purchase of tablets/hotspots for participants to be able to join EBPs or workshops virtually?	Funding for supplies to host virtual programming is likely allowable, so long as it fits within HCA's allowable funding guidelines and meets the goals and intention of the evidence-based program implementation.
<b>15</b>	Funding Line Items	Is that \$5,000 total per year for MH First Aid or \$5000 per workshop and you can do multiple workshops?	A maximum cost of \$5,000 per year of the grant can go towards the YMHFA training. You can do multiple workshops so long as the total cost does not exceed \$5,000.

**RFA - 2021HCA2 - MHPP and SUD Px/MHPP CBO Grants**  
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#	Section	Applicant Questions	HCA Responses
16	Program Eligibility	Under Mental Health Promotion Mentoring: School based by teachers or staff - is allowed?	Yes. School Based Mentoring by teachers or staff is allowed under MHPP funding.
17	Instructions	Where do we find a list of approved evidence based programs?	These are listed in the funding packets, B1 and B2.
18	Funding Amounts	What is the maximum amount per DMA & MHPP?	Maximum of \$65,000 for DMA and \$65,000 for MHPP funding
19	Funding Amounts	The amount we receive is to be reflected in a 3 year budget, correct?	It is a two-year grant; the first fiscal year is July 1, 2021 to June 30, 2022 and the second fiscal year is July 1, 2022 to June 30, 2023.
20	Funding Amounts	\$65,000 in total OR \$65,000 each from DMA and MHPP?	Up to 65K for each DMA and MHPP
21	Type B Help	I represent a Type B applicant. Did you say that names of participants are to be entered into Minerva?	Yes, it is requirement that participant information is recorded on a monthly basis. The Minerva Knowledge Base <a href="https://theathenaforum.org/MKB">https://theathenaforum.org/MKB</a> and <a href="https://www.theathenaforum.org/description-required-reporting">https://www.theathenaforum.org/description-required-reporting</a> can provide more information on required reporting.
22	Program Eligibility	Can there be several EBP programs chosen for multiple locations under one proposal?	Yes, you can select multiple EBPs if it is beneficial to serving multiple high-need communities.
23	Funding Line Items	How much funding for staff is available/allowable in the MHPP grants?	Maximum of \$65,000 for MHPP funding
24	Rural Communities	While you say high numbers of individuals served, many small rural communities may not have high numbers, but high need or lack of resources to services. How will that be weighed? Some communities may have less than 1,000 people, but the dollar amount for the potential program is the same.	HCA understands that smaller, rural communities may not have the same reach or number of individuals involved due to living in a smaller community. This will be taken into consideration as we review applications.
25	Instructions, Letters of Support	Limit for letters of support?	Maximum of 6 letters of support.

**RFA - 2021HCA2 - MHPP and SUD Px/MHPP CBO Grants**  
 Week 2 Questions, Including Webinar

#	Section	Applicant Questions	HCA Responses
26	Webinar Technical Difficulties	I did not hear the question and answer from Joe as it cut out. Can it be repeated?  Joe's question was: I'm wondering if I can request MHPP funding to do both mental health promotion and suicide prevention on the same grant? Or, or are those still segregated?	It's and/or. You could do a mental health promotion option and/or suicide prevention program.
27	Multiple Applications	Are mental health promotion and suicide prevention permissible in the same application, or is it one or the other (MHPP or Suicide Prevention)?	Attachment B-2 indicates that it is an "and/or": A. Mental Health Promotion Program Options and/or B. Suicide Prevention Program Options
28	Applicant Eligibility	Are institutions of higher education eligible?	Yes
29	Program Eligibility	Is the grant limited to these programs?	Yes, the grant is limited to the programs on both on the DMA and MHPP lists.
30	Funding Amounts	Is the maximum funding of \$65,000 per funding source or per applicant combining both DMA & MHPP?	Per funding source, so maximum of \$65,000 for DMA and \$65,000 for MHPP funding
31	Applicant Eligibility	Applicant defined by CWPI Coalitions or by fiscal agent?	HCA will recognize a coalition as a single organization, understanding that they may need to use a fiscal agent to receive grant funds. An organization that acts a fiscal agent for multiple coalitions is allowable, however each coalition may not receive multiple awards from single funding sources.
32	Funding Amounts	Is it a max total of \$130K per site if they choose to apply the max for DMA and MHPP? Language is confusing	Yes, if you plan to apply for both DMA and MHPP, it is up to 130,000 that may be awarded per year.
33	Multiple Applications	If we are a fiscal agent for multiple sites, is only one coalition able to apply for these funds?	HCA will recognize a coalition as a single organization, understanding that they may need to use a fiscal agent to receive grant funds. An organization that acts a fiscal agent for multiple coalitions is allowable, however each coalition may not receive multiple awards from single funding sources.

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#	Section	Applicant Questions	HCA Responses
34	New Coalitions	If it is a new community without a CPWI coalition, will they need to create a coalition for this grant?	It is not a requirement to create a CPWI coalition with this RFA. One of the strategies in the grant is implementing Communities that Care, which is a coalition-based model that CPWI was developed from. This may be an option for those looking to begin a coalition.
35	Funding Amounts	65K per year or for the two-year period?	Up to \$65,000 per year
36	Webinar Recording Link, Application Location	<p>I am interested to know if programs for youth prevention have been developed so that teens and other young adults can anonymously submit for support of a peer showing signs for concern over opioids amongst other drug use. I recall the natural helper program once available at my own school. My brother and I attended at a time when divorce brought about addiction in our family members. Together at the retreat, my brother and I returned with sense of belonging and some tools for coping with the increased stress in our environment. I am very passionate about the concept and have some grant writing experience, however missed the preparation course offered Mar 1<sup>st</sup>. Is there a recording available online for those of us who missed out? Would you assist me in finding either an existing program's contact or if not yet available, the criteria for consideration of this submission? More important than the time and skillset to deploy a statewide program of this nature is my passion to prevent this epidemic from claiming more lives.</p>	<p>The 3-1-2021 webinar was recorded. The YouTube link is as follows: <a href="https://youtu.be/g1nsc-NFfe0">https://youtu.be/g1nsc-NFfe0</a>. The transcript is also available as part of this amendment.</p> <p>The Requestion for Applications (RFA) documentation can be found at: <a href="https://www.hca.wa.gov/about-hca/bids-and-contracts">https://www.hca.wa.gov/about-hca/bids-and-contracts</a></p> <p>Search for: RFA 2021HCA2</p> <p>The RFA and all associated documents are also posted on Washington's Electronic Bid System (WEBS). Applicants are strongly encouraged to register as a vendor in WEBS at <a href="https://fortress.wa.gov/ga/webs/">https://fortress.wa.gov/ga/webs/</a> and to download a copy of this RFA from WEBS, in order to view and Amendments that are issued by HCA which may modify the terms of this RFA.</p>

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#	Section	Applicant Questions	HCA Responses
37	Webinar Recording Link	Might there be a recording of the webinar for the Substance Use Disorder Prevention and Mental Health Promotion Project CBO Enhancement grants from 3/1?	The 3-1-2021 webinar was recorded. The YouTube link is as follows: <a href="https://youtu.be/g1nsc-NFfe0">https://youtu.be/g1nsc-NFfe0</a> . The transcript is also available as part of this amendment.
38	Webinar Recording Link	I am looking at this grant opportunity and was wondering if the pre-application webinar was recorded and if so, if I could get a link to watch it.	The 3-1-2021 webinar was recorded. The YouTube link is as follows: <a href="https://youtu.be/g1nsc-NFfe0">https://youtu.be/g1nsc-NFfe0</a> . The transcript is also available as part of this amendment.
39	Webinar Recording Link	I missed the pre-application webinar. Is there a way to see it? We are interested in applying for grants for our service.	The 3-1-2021 webinar was recorded. The YouTube link is as follows: <a href="https://youtu.be/g1nsc-NFfe0">https://youtu.be/g1nsc-NFfe0</a> . The transcript is also available as part of this amendment.
40	Webinar Recording Link	I am looking for a link to the recording of yesterday's webinar? We just came across this funding opportunity and are very interested- I'm sure the webinar would provide valuable informatin and background for us.	The 3-1-2021 webinar was recorded. The YouTube link is as follows: <a href="https://youtu.be/g1nsc-NFfe0">https://youtu.be/g1nsc-NFfe0</a> . The transcript is also available as part of this amendment.
41	Application Location	I attended the webinar for ERSP yesterday and I forgot to ask how do we obtain the application? Is it sent to us?	<p>The Requestration for Applications (RFA) documentation can be found at: <a href="https://www.hca.wa.gov/about-hca/bids-and-contracts">https://www.hca.wa.gov/about-hca/bids-and-contracts</a></p> <p>Search for: RFA 2021HCA2</p> <p>The RFA and all associated documents are also posted on Washington's Electronic Bid System (WEBS). Applicants are strongly encouraged to register as a vendor in WEBS at <a href="https://fortress.wa.gov/ga/webs/">https://fortress.wa.gov/ga/webs/</a> and to download a copy of this RFA from WEBS, in order to view and Amendments that are issued by HCA which may modify the terms of this RFA.</p>
42	Fiscal Agent, Multiple Coalitions	So, my question is in regards to fiscal agent, if we have two CPWI Coalitions, they apply for these funding separately or their own entities, but would we, as an organization, wanted to apply ourselves, would that be an applicant, A or B, is my question.	Yep, I would say A because your county already has an existing HCA or DBHR grant. OK, but it is possible then for you to also separately apply for these funds.

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#	Section	Applicant Questions	HCA Responses
43	Multiple Locations	<p>Hi, this is Katya. I can't tell if my question is showing up in the question section, so, I figured, I'd ask online. So, I was wondering for MHPP, we're considering applying, as you know, we have multiple locations that are all coordinated by the State...Association. Would our individual locations be able to choose? There's a list of evidence based programs. And so, I'm wondering if we could have a handful of organizations using one program, and then others maybe 3 or 4 using another? And so, having a combination of several EBPs, um, under one. Is that OK?</p>	<p>Yes, I think that would be acceptable. It could be a combination of evidence based programs that are proposed.</p>
44	Mentoring	<p>I'm just wondering about mentoring practice. So we run a school based and community based model, and I'm hoping that we can work alongside you, guys, to qualify that. And that, it sounds like DMA funded school based mentoring does not qualify. What, what qualifications does, community based, or what qualifies as, a community based model? I have community based, community based mentors, like, you said, business leaders, mechanics, folks down the road, that are doing mentoring on the property with students that qualifies as a school based program.</p>	<p>I would say the primary difference between community and school based. And it's kind of an evolving conversation our agency continues to have. The primary difference is that community based mentoring happens outside of school hours. So, school based mentoring will happen, like during lunch or recess and that the community based mentoring is happening outside of the school setting. And some other things that may distinguish the differences, too, are at how individuals may be recruited, are aware that mentors are coming from, and sometimes it is business leaders and community partners that are the mentors. That community side versus high school to elementary school students. Those are kind of how that's classified, so. We cannot support school based mentoring at all with DMA funding, but it is allowable under MHPP funding.</p>



## Pre-Application Webinar Transcript

The following is the auto-generated transcription of HCA's Pre-Application Webinar for RFA 2021HCA2 that took place on Monday, March 1, 2021, from 2:30 – 3:30 p.m., Pacific Time. This transcript is unofficial, due to the possibility of transcription errors.

0:00

The broadcast is now starting. All attendees are in listen only mode.

0:07

Hello, Good afternoon. We are getting ready to start here at about 2 30.

0:13

For the pre application webinar for RFA, 20 21, ..., so, we will get started in just a couple of minutes. Thanks for joining. We'll be right back.

1:40

Yeah, OK.

2:17

Muted.

2:24

Hello, Good afternoon. It is 2:30, so we're gonna go ahead and get started, though, I still see some folks joining.

2:31

So, I will do a slow introduction while people get on.

2:35

I thank you for joining today's pre application webinar for RFA 2021HCA2. This is for the Community Based Organization Grant, for both the Dedicated Marijuana Account and the Mental Health Promotion grant.

2:50

As a quick reminder, applications are due on March 26th at 2:00PM.

2:55

And I am Alicia Hughes.

2:57

I am a supervisor here in our substance use disorder and mental health promotion section in the Division of Behavioral Health and Recovery at the Health Care Authority. In my role, I oversee our community based organization or CBO grant initiative, and my peer supervisor Jen Hogue also oversees our mental health promotion and suicide prevention work and she is not on the call today, but we will be answering any questions in her absence. Today, we'll do a quick overview of the technology. So, we'll go to the next slide as we get started.

3:38

Next slide, please.

## Pre-Application Webinar Transcript

3:56

Heidi, please move to the technology slide.

3:59

one moment.

4:00

Sorry about that, folks.

4:13

All right, we're getting the PowerPoint back up. One moment, everyone.

4:17

And as I can do a quick overview, and so, for technology, it's always a good idea to close other windows, if you're calling into the webinar via phone, make sure you click the telephone button and enter your unique audio pin if you have not already so that you can raise your hand and be unmuted if you have a question at the end.

4:38

And if you have any issues or the webinar today, please e-mail Heidi Jones and her e-mail is [heidi.jones@hca.wa.gov](mailto:heidi.jones@hca.wa.gov).

4:49

And as a quick reminder, this webinar is being recorded and will be posted on the HCA website as for this RFA.

4:59

And, and so because of that, please do not share any confidential information.

5:04

We will also, again, we have the Q and A session at the very end after we go through some slides on the actual RFA, and we will get to as many questions as we can when we do get started. However, we know we won't be able to get to all of them.

5:22

And we will make sure that anything that we don't, do not get to in this webinar will be added to the Q and A that goes out in the amendment posted later this week.

5:44

Having some issues at the PowerPoint, Sorry, folks.

6:43

Apologies, everyone, we're trying to get the PowerPoint back that we lost.st.

6:55

OK, I think, we are back up, Thank You, Heidi. And next slide, please.

## Pre-Application Webinar Transcript

7:03

So, for some webinar controls, you have a Grab tab that allows you to open and close the control panel, mute, or unmute your audio.

7:10

And as well as raise your hand, we'll talk about raising our hand on the next slide.

7:15

And then there's also a questions pane, and that allows you to submit questions and review any answers on our end, and then we'll be reading those at the end, like I mentioned.

7:25

Next slide.

7:27

How to raise your hand? We can all take a quick practice at this.

7:31

You'll see your little hand, and you can hit that green button, and it will go up.

7:36

Everyone wants to practice that.

7:38

I see a bunch of greenhands coming, nicely done, nicely done, then put them all back down, and that means you do not have a question.

7:48

So, we know that many of you will have questions as we get to the end.

7:52

You can leave your hand down for now until we get to that portion after the slides today.

7:58

Next slide.

8:01

And then just to make sure we can hear you, if you do want to come off mute, make sure you go to the audio and use your unique audio pin.

8:15

Alright, next slide, please.

8:22

Thank you. So, for today's webinar, we will go over the intention and the RFA and what our goals are for funding the site.

## Pre-Application Webinar Transcript

8:28

I will explain the two funding sources: the state Dedicated Marijuana Account, the Mental Health Promotion Project, suicide prevention money, we'll go through the required sections for what is needed for the RFA, as well as do a Question and Answer session at the end.

8:48

Purpose and background, our goal here is to increase capacity to implement direct and environmental alcohol, tobacco, opioid, and other drug prevention services in high need communities, and then with our Mental Health Promotion Project, we want to make sure that we can do some of the additional direct service work through the Mental Health Promotion and Suicide Prevention project.

9:10

We do encourage organizations and applicants to partner with existing Community Prevention and Wellness Initiative Coalition or other Community Coalition as a goal there, too.

9:23

Ensure there's a collaboration within a community, avoid duplication of services, and leverage the existing prevention resources that exist in a community.

9:34

HCA does reserve the right to negotiate with the apparent successful applicant, or ASA as you notice in the RFA, for both your project's scope, which might mean the number of proposed individuals served, as well as funding amount, will go into that in a little bit later.

9:49

We will also have consideration around community geographic location to make sure that we have a solid distribution of projects statewide that were taking into account the high needs of each community that is proposed in each application. And then take into account any past performance of HCA or DBHR contracts, if you are an existing contractor with us.

10:17

Here's our current timeline. And the applications were released on the 22nd. And, as we mentioned, they are due on March 26th at 2 PM, at 2 PM. Reminder is, is different than usual for times at the end of the day, so a reminder it is 2 PM.

10:33

Questions are due each week by Thursdays at four, during the whole RFA period. So, we had some questions due on the 25th and March fourth, March 11th, and March 18th. That means you may ask questions only in writing to the HCA Procurement coordinator, which is Heidi.

10:51

And we will respond to those the following Monday by 5 p.m. So, this Monday, we'll answer any questions that came through by last Thursday.

11:00

Any questions we do not get to today will be posted by March eighth, and so forth.

## Pre-Application Webinar Transcript

11:05

Today is our pre application conference. Applications are due on the 26th.

11:09

There'll be a period where our team evaluates applications and then we'll be talking with the apparent successful applicants and notifying them via e-mail, as well as the unsuccessful applicants by the end of April.

11:23

There'll be a few weeks there where we're working on contracts and holding debriefing conferences, if requested.

11:29

And, all of these grants, both the DMA and the MHPP, will end on, oh sorry will start on July first.

11:40

And, and I do want to mention, we had some questions come in last week that we are, like I said, will be, will be posted by the end of the day today, one of those was around an error on the CPWI community list with the existing CPWI sites, we know that there's a couple of errors on that and that will be corrected.

12:00

I wanted to point that out.

12:03

OK, next slide.

12:08

Alright, so here are eligible entities, and, as a reminder, we do encourage entities applying to partner with an existing CPWI Coalition.

12:16

We will fund tribal government, urban Indian programs, government organizations, like county governments, cities, local government, special district governments, law enforcement agencies.

12:29

There's a group under educational organizations a, school districts, educational service districts, public and state-controlled entities of higher education. I did see a question in the chat box, so hopefully that answers that question for you.

12:41

And private institutions of higher education as well.

12:45

Then non-profit organizations that have a 501 C 3 status from the IRS, and those are, you know, youth service agencies, hospitals, faith-based organizations, et cetera.

## Pre-Application Webinar Transcript

12:59

And, we did have a, I will also answer a question that came in last week regarding, well, let's connect with that in the Q&A section.

13:08

Thank you, so type A applicants.

13:10

So, in an effort to work through some of our, our challenges that we've heard from feedback and prior RFAs, HCA made a change to have two types of applicants.

13:23

We have Type A and Type B applicants.

13:29

And, and Type A applicants are those who have an existing Community Prevention and Wellness Initiative, or CPWI, or community based organization grant with HCA/DBHR.

13:42

They are already existing in our system, and you may be an existing subcontractor under an existing CPWI or CBO.

13:50

or you may have held a contract with HCA or DBHR, maybe it wasn't specific to CPWIs CBO, but you have y understand that the DHBR contracting system you've been in in our online reporting system before, you know, kind of all the bells and whistles of our contract.

14:10

And, therefore, you're a Type A applicant.

14:12

And then we also have type B application.

14:16

And the Type B folks. Next slide.

14:22

The type B folks are those who do not have an existing contract or subcontract. You are new to applying for an HCA/DBHR grant.

14:30, and/or you may also be a tribal government or urban Indian Program, and have that agreement with HCA.

14:40

And the goal here is that we want to try to equally distribute the funds between type A, and type B applications, and we do reserve the right to find applications more than one type, and over the other, based on or, and other factors that we deem appropriate.

## Pre-Application Webinar Transcript

14:55

But we do try to have the as much as we can, we'll try to split the funding amounts between both Type A and type B, and to allow some equity in new organizations and entities applying for HCA/ DBHR grants.

15:12

As you will notice, uh, sorry, Type B slide, please.

15:19

Thank you. And, as you will notice, when you go through the application, there are some slight adaptations to those who are applying as a Type B, for example.

15:28

Your action plan that you will complete for this application has a little bit of differences than the type A application. The primary point being that if you're type B, and you're new to our system, you don't necessarily understand all of our fancy language that we used for some of our prevention work.

15:47

And so, we will work with you to get your paperwork and action plans and budgets, in a certain order, as soon as you come on board if you're notified as an apparent successful applicant. But you will notice that there are a few changes there, just to make it more equitable for those who applying for that.

16:05

And so, I'm going to pause for just a second, we're going to do a poll, and I want to see if you can say you are a type A applicant, or a type B applicant, and so Heidi is going to launch that one moment.

17:01

OK, Heidi, you can probably close the poll.

17:06

If We've had a good number, Thank you.

17:12

Alright, we can move on to the next slide.

17:17

The general overview of our project and for the both, for the CBO grants, and we do intend to award a contract to the Eligible Entities to provide quality and cultural, competent, culturally competent, evidence based programs, research based programs, and promising programs, to address substance use, prevention and mental health promotion programs, or suicide prevention projects.

17:41

And with these, we are not excluding any organization from applying that are giving priority to organizations that are listed on the high need communities list in Exhibit B. The goal here is that we're, we're providing those prevention services to the highest need sites around the State. We have a risk ranking process that we complete here on our end, and every year to update that list to identify the next eligible high need communities.

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18:08

And so, they will receive priority points in the application, but we're not excluding any community from applying.

18:16

Next slide. Thank you.

18:19

There are some things that we, we added in the RFA that are considered absolute priorities. Those are things that are scored during the evaluation of applications, and are deemed the highest priority to include for favorable, favorable consideration in the application evaluation process.

18:35

These things include providing direct services by expanding prevention programs, and including both youth and parenting evidence based programs, research based programs, promising program.

18:47

And another priority is using multiple strategies to meet the need of a direct service, implementing a recurring cycle of programs. For example, um, you propose that you have multiple iterations of an evidence based program, that are going to be occurring throughout the year, as opposed to just one implementation cycle.

19:07

Selecting an evidence based program, a research based program that reaches priority populations and those high need individuals in your communities.

19:17

Another priority is thinking through geographic limitations, you know, serving, sorry. Keeping in mind geographic limitations, serving a high number of individuals through the direct services.

19:28

And while we do allow some information dissemination, public awareness, social norming type programs, we are really focused on reaching people through those direct services via virtual or in person of course, but we will still allow those other strategies to be implemented.

19:50

In addition, applicants can earn additional preference priorities points for direct services, if you are a high need community, and that's listed in Exhibit D, are collaborating with an existing CPWI site to provide those services.

20:04

And, as I mentioned before, the goal there is that we can avoid duplication in communities. We can encourage collaboration and really support and leverage those existing prevention infrastructures that exist.

20:19

Lastly, are our highly valued priorities. Um, we really do want to mention our goals here are to meet the needs of underserved and high need communities throughout the state. And so, we do ask in the application, to describe the demographics of this community that you're intending to serve, describe why there is substance use disorder,



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or mental health challenges in the community, what are those needs? And that we can really shoot to support these underserved communities throughout the state.

20:47

And then, we do want you to consider, while you're selecting your direct service programs or strategies, thinking through, uh, the costs, the intended reach of those programs and strategies in your application, what makes most sense for, for each high need community, based on, you know, geographic scope, and size of your community, et cetera.

21:12

And then, other things to note, I mentioned this earlier, um, we do have, HCA reserves the right to work with applicants to refine or adjust proposals to fit the objective of HCA / DBHR. We do want to see a re-occurring cycle direct services.

21:28

So, for example, um, you know, thinking through adapting a project scope, we may have a budget that, that is submitted, there might be a couple of items in there that technically do not follow some of our funding guidelines. So, while that may not disqualify you from being awarded, we would, after the fact, after you're awarded, work with you to adjust your budget or action plan, to make sure that all the allowable expenses um, are meeting our standards for funding.

21:58

So, there are some little pieces there where we may work with you after your identified as a successful applicant.

22:06

And, yes, thank you. Next slide.

22:11

So, going into the Dedicated Marijuana Account, also known as DMA.

22:15

Uh, it's done on a state fiscal year cycle, starting July 1st through June 30th and it's a two year grant.

22:21

We have about \$320,000 per year for the Dedicated Marijuana Account projects.

22:28

With this, we do want applicants to be intentional, uh, with their budget.

22:32

So, while you can apply for up to \$65,000 per year, for a total of \$130,000, over that two-year period, you may realize that you don't need the full \$65,000 to meet the number, to do 2 or 3 cycles of programs throughout the year that you intend to do, it may cost you half that much. You may ask for a small amount for grant you kind of an expansion service for a CPWI site.

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22:59

So, you can apply for up to \$65,000. But you don't have to request the full amount.

23:05

And one thing to note is that money does not roll over between fiscal years. So, you'll get your set amount for the first year, July 1st to June 30th of 2022. And that exact same amount, the second year, starting July 1st of 2022, through June 30th of 2023.

23:29

Here's a list of some of the evidence based and research based programs from the RFA directly, and these are Dedicated Marijuana Account type EBPs, which means that they've been evaluated and researched to meet the needs of marijuana use,

23:45

Prevention.

23:47

Some things that might, you know, that we've seen applications for in the past, communities that care, community based mentoring. I'll make a note on mentoring in one moment.

23:57

Things like good behavior game, guiding their choices, incredible years, and for strengthening families, strong African American families. So, many of these are, you know, implemented throughout our system already.

24:10

The one note I want to make on mentoring is that, uh, if you are notified as an apparent successful applicant, you will have to complete a Mentoring Works Washington, sorry, Mentoring Washington Survey following that notification of award. And that survey is to deem that your mentoring program is indeed community based.

24:35

We, at this time, cannot support school-based mentoring with our Dedicated Marijuana Accounts.

24:42

So, you'll fill out the survey, and Mentoring Washington will review that and confer with our staff here at HCA and work with you if there's any questions around your proposed mentoring program.

24:59

And the next slide has the promising programs, as well as the Environmental and Information Dissemination Programs for Dedicated Marijuana Account.

25:09

Again, we have things like ATLAS and Alcohol Literacy Challenge, Families, Unidas,

25:15

And then some of our environmental programs include policy review, purchase surveys, and then we have social norms marketing, which is information dissemination activity.

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25:27

I do see a question. Is a grant limited to the youth program for Dedicated Marijuana Account?

25:33

Yes, you're If you're applying for DMA, you are limited to the programs that are listed on the, on the slides and in the RFA.

25:42

The reason for that is our Dedicated Marijuana Account funding is a state Legislator, sorry. State legislative budget item where we have to have a proportion of evidence based programs with that funding, and so we don't have a ton of wiggle room and to do any sort of alternative or innovative programs in DMA.

26:10

And then just to re-iterate, the funding is \$65,000, up to\$ 65,000 per year to two years of funding for both the DMA and MHPP.

26:21

So, going into the mental health promotion project or MHPP, suicide prevention allocation, same timeframe, same overall maximum funding amount.

26:31

And however, we have a little bit more money that we can allocate out to communities for these grants. So we have \$520,000 per year.

26:40

And so, we'll fund, we may find a few more sites based on the allocation.

26:46

Um, and so.

26:50

Yep, I think that's on the next page.

26:55

And so, we have the evidence based and research based programs for mental health promotion listed here, as well as the promising programs that you can implement.

27:05

In addition, applications for mental health promotion grants must include the, one Youth Mental Health First Aid training, and with the maximum cost of \$5000.

27:15

So, you'll see that listed in the RFA for the MHPP.

27:18

Sites, and, as well as implementing a community awareness project during that project period.

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27:28

Applicants will choose if they are, if they will be doing the suicide prevention options that are an evidence based program or research based program or promising program. Or if they're innovative program that addresses specific approved risk and protective factors.

27:46

You'll also see those on the next slide, which are the domains, or risk and protective factors that one might choose. And then you may have a program, an innovative program, that meets those risk and protective factors.

28:06

All right, I'm going to pause for a second.

28:12

OK, thank you. And so, as you are working through this, you are required to implement the approved action plan that's located in this Exhibit C packet of the application.

28:24

The Action Plan includes the approved programs from your list, either DMA or MHPP. The programs must be implemented in as proposed in your project narrative action plan and budget.

28:38

If there are any negotiations or project scope that are negotiated with you after you're awarded, or notified as an apparently successful awardee, we will update those formal documents for your contract file. But other than that, you have to implement as proposed in your RFA.

28:56

That includes dates, timelines, scope, dosage, target audience, responsible parties, etc.

29:03

Funds can be used to support program costs that, you know, include staff who are implementing or planning a program, it could be used for training to support the evidence based program.

29:12

Or other programs.

29:14

Can include Implementation, reporting, and evaluation, staff time.

29:25

Once you're awarded, you will be required to enter your approved action plan in our online reporting system, no more than 30 days following the contract execution.

29:37

If you are new to our system, if you're a Type B applicant, do not worry. We'll be setting you up with plenty of trainings in your first month, or two, and many months thereafter.

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29:48

To get you acquainted with our online reporting system, you will be assigned a prevention manager to support you through that and get you acquainted with, through all those trainings.

29:59

Then following that first month and every month thereafter of the contract period, it is required that you enter program and service data by the 15th of the following month.

30:10

For example, if you did a parenting class in August, that service data, which means participant names and information, surveys, demographics, all of that is required to be in the system by September 15th, which is the month following.

30:29

In addition, we hold learning community meetings.

30:33

every other month. During legislative session, we tend to hold a few more, and, just to update all of our prevention providers on what's happening in the legislative world, and, and those are required for attendance for all CBO grantees.

30:47

In addition, you do need to attend a monthly check and call with your Prevention System Manager, who will be assigned soon after the notification of award.

30:55

And there's also some required trainings that we will have you go to if you are a type B applicant, to ensure we can get you up to speed with learning some of the prevention systems here at DBHR.

31:12

Just a few more slides before we jump into Q&A.

31:15

Before you begin writing your application, identify if you are a type A or type B application, applicant.

31:22

Then, identify if you're applying for DMA, MHPP or both. Yes, you can apply for both grants.

31:29

So, if you're a type A applicant, then you can apply for both DMA and MHPP. And if you are type B, you can do both as well.

31:38

Just remember thinking through saturation of services,

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31:43

And, you know, not over committing to too many programs in one community to make sure, you know, that all of those services happen in a coordinated way. Keeping that in mind, if you're applying for both buckets of money.

31:59

The application consists of the following pieces: You have a face page, there's a funding source packet, which includes the program selection form, and a project narrative, and an Action Plan.

32:11

There's also a budget, and then you can provide letters of support.

32:24

one moment, thank you. Then we have Project Narrative.

32:27

Applicants must prepare a separate project Narrative for each funding source that they are applying for.

32:33

For example, if you're applying for both the DMA and MHPP grants, you're required to submit two Project Narratives.

32:39

The reason why there are some questions that differ between DMA and MHPP that we want to see answers to.

32:48

Each project narrative, without the letters of support, may not exceed 10 pages. Uh, project narrative exceeding the page limit might be disqualified from further consideration of the application.

33:03

Now, we have your Action Plan. So, complete those in the order presented.

33:07

You do need to submit a different action plan for each funding source. So, one for DMA and one for MHPP.

33:13

if you're applying for both grants. And the Action Plans will be scored on how well you complete the table that outlines those programs and strategies.

33:23

As I mentioned earlier, type B applicants have a different Action Plan template than type A applicants. Again, that is for equity reasons, because you may not be completely familiar with some of the language that we use in our regular prevention action plan. And so, we want to decrease some of those barriers, but just keep an eye out for that. If you're a Type B, that some of your questions, that action plan template, will look different.

33:53

Now, we have our budget.

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33:55

And so, budgets are an exhibit C, and, again, must be completed in the order presented there. You also have to submit a separate budget for each funding source project. So, if you're applying for both grants two budgets are required.

34:10

Budgets will be scored based on how well the, based on how well the applicant answers the questions. And they must reflect the cost of programmatic activities, that are aligned with the proposed population reach.

34:24

We will consider some cost variances of programs that are relevant to proposed population reach and those potential impacts for those programs.

34:34

Again, I reminded you earlier that you do not need to apply for the full \$65,000. You may simply ask for \$10,000, because that's the amount that's truly needed to do a couple of cycles of a programming for your community.

34:47

Because you already have existing infrastructure and support, and you don't have to do an extra training. But just keep that in mind as you're creating your budget.

34:55

And, as you're looking through, maybe, shifts to virtual programming, I know we're kind of all still in that mode right now. And so, some of those costs may differ than usual.

35:07

We also provided a helpful budget planning sheet for anyone, new, or existing that, wants some help with budgets to take a look at, and that's in the application packet, and we hope that's a helpful addition to this RFA.

35:22

And then, remember to follow state guidelines for allowable expenses. There is a link in the RFA regarding those.

35:33

Evaluation scoring. And so, you'll see here, the breakdown of points available, and then the priority points available, as well, if you're serving a high need community or if you're working with an existing CPWI coalition.

35:50

And last slide, before we jump into questions, and please submit, in writing all questions, please do not talk to any of your existing state staff colleagues about this. You need to go in writing to the HCA Procurements e-mail. Questions are due each week by Thursdays at four, and by Monday at five of the following week, we will respond to all of those.

36:13

We know that provides a little bit of a delay, but we hope that between this webinar, and then those weekly responses, we can get you the answers that you need before the due date on the 26th

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36:25

And, so, for now, we have 25 minutes left of this RFA. I see a bunch of questions in the chat. Some may or may not have been answered. So, I will take a few minutes, and look at those and answer those, and I will also be looking for some hands that are raised. If you have any questions, please, keep in mind, I will attempt to answer as many questions as possible between now and 3:30.

36:51

But this webinar is recorded, so I will be pausing in between them to collect my thoughts before I do respond, and if I don't get to your question today, we will make sure that is in writing on the next posting, um, by next Monday that goes out.

37:06

And some of that may mean there might be some follow-up that's needed before we, we answer that today on the recorded webinar.

37:13

So, give me a moment.

37:14

Let me take a, a peek here at the questions, and I will be right back.

37:36

Just to do a recap of some of the questions that have come in, that I will reply.

37:41

Are institutions of higher education eligible? Yes.

37:45

Would Guiding Good Choices count as a mental health promotion program? And, yes, Guiding Good Choices is on the list of evidence based programs for MHPP programs.

37:57

It is a maximum funding of \$65,000 per funding source?

38:14

There are a few funding questions, that hopefully those have all been answered.

38:20

One agency may submit an application for both DMA and MHPP? Yes.

38:27

OK.

38:33

So, one of the questions was, is the applicant defined by CPWI coalitions or by the fiscal agent? So, if you are applying,



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38:43

Uh.

38:44

Let me say this differently. HCA will recognize a coalition as an organization, understanding that you have to use a fiscal agent to receive those grant funds. So, an organization that may be acting as a fiscal agent for multiple coalition would be allowable in that sense.

39:01

And knowing that each coalition can't receive more than one DMA, and one MHPP Grant per coalition.

39:13

I hope that is answering that question for you.

39:25

Be right back.

39:41

The next question is, if we are approached by multiple organizations, we want to partner with our coalitions, can more than one organization affiliated with our coalition or high need community apply for a grant?

39:55

I'm just trying to work through that, uh, situation in my head, one moment.

40:08

I believe the answer is yes.

40:10

So, each, if you're the fiscal agent, you can be the fiscal agent for multiple coalitions but each high need community or coalition cannot receive more than one DMA or one MHPP grant.

40:32

And there's a question around number of individuals served. Keeping in mind, equity of rural communities, knowing that there may be a similar cost for implementing an evidence based program in a rural community, as it would in an urban community. However, the number served would obviously look drastically different in a rural community. We understand that. We will keep that in mind. And I apologize if that was not clear.

40:57

We want to, we want to focus on, on making sure we're reaching those highest need communities, and reaching those geographic places through these programs. And we will absolutely keep in mind that numbers served isn't always a reflection of the program, but also the community in which it's being implemented.

41:31

There was a clarification earlier on the DMA list. Thank you for our community member who pointed that out. DMA funded programs have to show evidence of reducing the marijuana use and be demonstrated to be cost beneficial by with the Washington State Institute for Public Policy.

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41:47

And then So that is why it is a smaller and very specific with the DMA money,

41:52

and we can't, we cannot have the, we don't have as much flexibility, like we do on the mental health promotion list, in that sense.

42:16

I'm going to pause for a second on questions. And I see Marlene has her hand up.

42:22

Do you want to come off, Heidi and you can unmute her?

42:27

Hands down, never mind.

42:33

Diana, you have your hand up?

42:36

However, I don't think you have entered your audio pin is what I'm seeing.

42:43

I just sent you your pin. So, let's give you a moment.

43:08

Diana: Maybe your hand down? Not sure.

43:13

Now, let's try it out right now.

43:17

OK, so, sorry about that.

43:19

So, my question is in regards to fiscal agent, if we have two CPWI Coalitions, they apply for these funding separately or their own entities, but would we, as an organization, wanted to apply ourselves,

43:35

Would that be an applicant, A or B? is my question.

43:42

Yep, I would say A because your county already has an existing HCA

43:46

DBHR grant. OK, but it is possible then for us to also separately apply for these funds? If it's a different community that's being served, yes. OK, Thank you.

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44:02

Looking for other hands that are raised.

44:12

Joe, you're up.

44:14

Hi, thank you, Alicia. My question is in regard to the MHPP grant, previously, applicants were forced to choose between mental health promotion programs or suicide prevention programs.

44:29

I'm wondering if I can request MHPP funding to do both mental health promotion and suicide prevention on the same grant? Or, or are those still segregated? I can do one or the other.

44:47

It's and/or. You could do a mental health promotion option and/or suicide prevention program.

44:55

Thank you.

44:55

That's all I wanted to know you made my day, OK, great.

45:05

And I'm seeing a question about Youth Mental Health First Aid. So, on, I think it's page 20 of the RFA of MHPP funding source packet.

45:13

You'll see that we have applicant must implement at least one Youth Mental Health First Aid training per year, and a minimum of two Youth Mental Health First Aid trainings during the whole project period, with a maximum cost of \$5,000 per year to go towards that training.

45:31

Hopefully that answers your question.

45:39

OK, and back up to the top, sorry folks.

45:46

Lots of questions in here.

46:09

Katya. I'm going to take you off mute.

46:17

Yes, yes. Yes.

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46:21

Hello, Alicia. Hi, this is Katya. I can't tell if my question is showing up in the question section, so, I figured, I'd ask online. So, I was wondering for MHPP, we're considering applying, as you know, we have multiple locations that are all coordinated by the State ... association.

46:41

Would our individual locations be able to choose? There's a list of evidence based programs. And so, I'm wondering if we could have a handful of organizations using one program, and then others maybe 3 or 4 using another? And so, having a combination of several EBPs, um, under one.

47:00

Is that OK?

47:02

I, yes, I think that would be acceptable.

47:04

It could be a combination of evidence based programs that are proposed, OK, Excellent. Thank you.

47:11

You're welcome.

47:24

Still working through questions, folks. Sorry about that.

47:31

OK, there's a question, If the funding source can support the purchase of tablets or hotspots for participants to be able to join workshops virtually?

47:42

Yes, that feels like an appropriate cost, as long as it's reasonable, and explained, as an allowable cost for implementation., It would be similar to some requirements around food there, you know, limits to what food costs could be for implementing a program. It would be kind of considered a supply for that program to be hosting virtually.

48:17

Hmm.

48:20

There's an appreciation for increasing the annual maximum from \$20,000 to \$65,000. You are welcome.

48:28

There's a question around an application that includes a CBO or CPWI in partnership with the University. Who should submit the application?

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48:38

I don't think that we would hold weight to an existing application, or an existing applicant versus new applicants at the university would be new.

48:46

I, I think whatever makes most sense for your entity, who would be the primary applicant in that sense?

48:57

So, I don't have a, I don't think that there's a requirement on who would apply, you're both eligible.

49:06

If the CBO or CPWI, let me clarify.

49:09

Yeah.

49:10

If the CBO or CPWI is not a 501 C 3, and is therefore not eligible to apply on their own, then the university would have to be the primary applicant.

49:34

Somebody is a type B applicant, welcome to our system. Hopefully, did you say the names that participants are to be entered into Minerva? It's a question. Yes.

49:44

For individuals over the age of 10, for direct services, and training.

49:50

We require that participant names are added into the system for every service that's entered. So, you may do a parenting class, and you'll have a sign in sheet, and then those participant names go into the system.

50:03

However, that information is as secured and confidential, we don't actually see participant names on our end. We see code numbers.

50:13

To protect those individuals confidentially from participating programs.

50:21

Hopefully, that answers your question.

50:24

There's a question on the limit. For letters of support, there's a maximum of six letters per applicant.

50:36

And, Ryan, I'm going to unmute you for a question.

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50:44

I think you're self-muted.

50:49

Here we go.

50:50

There we go. Yeah. I'm just wondering about mentoring practice. So we run a school based and community based model, and I'm hoping that we can work alongside you, guys, to qualify that. And that, it sounds like DMA funded school-based mentoring does not qualify. What, what qualifications does, community based, or what qualifies as, a community based model?

51:16

I would say the primary difference between community and school based. And it's kind of an evolving conversation our agency continues to have. The primary difference is that community based mentoring happens outside of school hours. So, school-based mentoring will happen, like during lunch or recess and that the community based mentoring is happening outside of that school setting.

51:37

And some other things that may distinguish the differences, too, are at how individuals may be recruited, are aware that mentors are coming from, and sometimes it's, you know, business leaders and community partners that are the mentors. That community side versus high school to elementary school students.

51:57

Those are kind of how that's classified, so.

52:03

And we cannot support school-based mentoring at all.

52:08

I have community based, if I have community based mentors, like, you said, business leaders, mechanics, folks down the road, that are doing mentoring on the property with students that qualifies as a school-based program?

52:25

If it's happening during those school hours, yes.

52:28

Gotcha, OK. Yes.

52:33

And, but there is definitely still some support that we can offer applicants.

52:39

And in regards to, at getting technical assistance from our, and our Mentor Washington Partners upon applying and evaluating those programs, but there's, there's some work that we can do. We have community based practices as well. I was just intrigued with the MHPP funding.

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53:01

That we can do school-based mentoring with those funds, but it has to be educators, correct or staff?

53:10

Mmm, hmmm.

53:12

And that that.

53:15

That's a good question.

53:18

I may need to follow back up at that in writing Ryan.

53:21

OK, thank you.

53:23

Yeah.

53:29

One question is how much funding for staff is available or allowable? In MHPP grants, that question probably also apply for DMA grants.

53:37

So, and there's not a limit to staff time, Again, there may be applicants who apply, and they've already done a facilitator training, and they have that people in place, and they just need to implement, so there is staff time, you already have curriculum. But you already have the supplies. And now you're paying for the staff to do this, the service implementation. So, there's not a percentage, or a cap on that.

54:01

There is an 8% administrative, administrative indirect cost limit. But that includes kind of all the overhead expenses, not the staff time to implement. So, it kind of varies, that's a hard question to answer and be like black and white.

54:19

OK.

54:23

And so, there is a, someone's asking, there's funding source packets for both DMA and MHPP, attachment B-1 and B-2. And that's where you can find the list of approved programs.

54:40

Someone's asking about the budget period, so this is a two-year grant, July 1st 2021, through June 30th 2023.

54:52

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So, you'll have a year one amount, and you'll get a year 2 amount in an awards and revenues pages if you're awarded this grant.

55:12

We will post the amended high need communities, there's no current amendment to the high need community, that is. There's no amendment at this time to that. There is going to be an amendment, the CPWI Community, and that will be posted by the end of the day.

55:35

And someone also mentioned that one of the programs on the DMA List is called PAX Good Behavior Game.

55:45

There is an open house scheduled next Tuesday, March ninth from 9 to 11, and it's an opportunity to learn more about PAX. If you're interested in that, I just wanted to mention that.

55:54

And you can find that on the athenaforum.org. That's where we post a lot of our community trainings.

56:00

We are not hosting it and, but it is out there if people are wanting to learn more, that's a very commonly implemented program.

56:10

Yeah.

56:11

And so, there's a question about the Mental Health First Aid costs.

56:15

So, applicants have to implement one Youth Mental Health First Aid training per year, which is a minimum of two, over the two-year period.

56:23

The cost is a maximum of \$5,000 per each training.

56:32

You can do multiple workshops if it cost you less, and that you can't spend more than \$5,000.

56:40

In total.

56:52

Oh, I guess we are.

56:54

We are ourselves hosting the PAX open house apologies, so we'll post that link here and in the notes, when the disk about where that could be.



## Pre-Application Webinar Transcript

57:04

So right now, it's 3:25. I'm going to do another scan for questions. Hands up?

57:10

Anything?

57:14

Any other hands?

57:25

Last call for questions, OK, Jackie, I am Unmuting you.

57:32

I put it in the question box, just wanted to find out, I heard you mention them, you want a balance between, and type the applicants, was that done previously, and if so, what was the ratio like?

57:45

Did you get more type A versus type B, or?

57:50

Yeah.

57:53

Yeah, this is actually the first year we're trying this out.

57:55

So, and in previous years, you've seen things that are like single site, multi-site. We got a ton of feedback: The last RFA around that.

58:04

That was not super helpful to communities applying, pretty complicated. So, our team is trying something new this year. Obviously, we are always open to feedback if it does not work, and try to have a balance between providing equity and access to new applicants, joining our system, expanding the prevention services in high need communities, and also supporting our existing contractors as to expand on their prevention work that they're already doing.

58:32

So, there is not history on this yet, and, and we will learn a lot from this year's RFA, and always learn and improve along the way.

58:42

OK, thank you.

58:50

Diana, I'm unmuting you.

## Pre-Application Webinar Transcript

58:53

Yes, I'm wondering, if, is coalition based, So, if there's a new community that's listed, the funding goes to them, will they have to create a coalition?

59:06

Oh, that's a good question.

59:07

We had that last year as somebody inadvertently applied and started a coalition with the, with the CBO money, so, no. It is not an expectation to create a coalition with this.

59:19

This is independent of other CPWI RFAs that we may/will have that we will be having go out the door later this spring.

59:29

And this is independent of that.

59:30

So, this is just community based organization money, and it's a smaller bucket of money to support prevention services and in that direct implementation, there's no expectation to start a coalition.

59:41

And that being said, there is one of the strategies. It's called Communities That Care. And that is the model for which CPWI was built off of.

59:51

So, you are welcome to use this money to start a new coalition using the Communities That Care/CPWI model, to get that started, if you are inclined to do that.

1:00:10

All right, we're going to wrap up this webinar today. Again, we will go through all the questions, make sure that there is an answer to them, and it will be posted by next Monday. I thank you all for attending. We really look forward to seeing your applications come through. Really excited to be able to continue these prevention services out there in your communities and you have any questions, please e-mail the HCA Procurement Office and we will make sure that those questions get answered for you by next Monday.

1:00:40

I thank you, again, and we look forward to seeing your applications come through.