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**Local Organizational Support and Development Networks for
Public Mental Health System Workforce with Lived Experience
RFA #17-8145**

Frequently Asked Questions (from previous RFAs)

Question 1: *If awarded, can a Community Based Organization provide training for their staff?*

Answer 1: If the proposing organization is a part of the Public Mental Health System (PMHS) as defined on page 28 of the enclosed sample grant agreement, then the staff could be included as eligible participants for the activities associated with this RFA.

Question 2: *Is OSHPD looking for local or regional agencies to provide these services to the county/CBO employers or are statewide agencies also eligible to apply?*

Answer 2: If an organization meets the criteria listed in Section C. Minimum Qualifications for Applicants, then they are eligible to apply regardless of whether they are a local, regional or state-wide agency. This RFA is open to any public, private, and/or non-profit organization. The proposing organization must be: (i) able to identify and work in partnership with one or more Public Mental Health System (PMHS) employers including counties, community-based organizations, others, and (ii) able to provide training and technical assistance, and develop and disseminate organizational tools and best practices to PMHS employers that support the employment and retention of consumers and family members into their workforce.

Question 3: *Would Peer to Peer organizations qualify for this RFA?*

Answer 3: If an organization meets the criteria listed in Section C. Minimum Qualifications for Applicants then they are eligible to apply regardless of what type of organization they are.

Question 4: *Can multiple counties apply together?*

Answer 4: Yes, multiple counties may apply together, however one county would have to be a fiscal sponsor that contracts directly with OSHPD. The award cannot exceed \$500,000 regardless of how many counties or community-based organizations apply together. So organizations may apply as one group, but would still be subject to the same limitations as a group.

Question 5: *Can an applicant propose to serve more than one PMHS employer and in more than one County?*

Answer 5: Yes, an applicant may propose to serve more than one PMHS employer so long as the applicant identifies those PMHS employers in their application and includes the participation verification form for each PMHS employer. The Participation Verification form can be found in Attachment 3 on page 17.

Question 6: *Do you only need two professional references or two references in addition to the Participation Verification forms by each identified PMHS employer that the applicant proposes to support?*

Answer 6: The professional references and the participation verification form are two different aspects of the application. In order for an application to be responsive, a proposer must provide two professional references from any organizations that speak to their ability to provide similar services within the last four years using the template on page 19 of the RFA. Additionally applicants must provide Participant Verification form(s) for each individual PMHS employer that is identified to be supported as a result of this RFA using the form on page 17 of the RFA. The Participation Verification forms are documentation that attests that the PMHS employer will be collaborating with the proposer.

Question 7: *Does the PMHS employer who must sign the participation verification form, also have to be one of the professional references?*

Answer 7: No, the PMHS employer who signs the Participation Verification form is to verify that the proposing organization and the PMHS employer will be working together to complete the activities outlined in this RFA. The professional references are separate from the Participation Verification form(s) and do not need to be completed by the same organizations, but may be.

Question 8: *Would an existing or potential Memorandum of Understanding (MOU) need to be provided in addition to the Participation Verification form that the RFA outlines?*

Answer 8: No, that is not required under this RFA. Only the signed Participation Verification form on page 19 must be submitted for each PMHS employer that the applicant identifies as an agency or organization who will be participating in the proposed program.

Question 9: *The Participation Verification form states that it could be signed by the Mental Health Director or Designee? Who could be the other person that is authorized to sign it?*

Answer 9: It would depend on each individual County. In some counties the designee may have the authority and in others, it could only be the County Mental Health Director who can sign. It is the responsibility of the proposer to identify who is the appropriate person to verify their County's participation.

Question 10: *If the professional references are not included in the application package, could that render the RFA application non-responsive?*

Answer 10: To develop a successful application, applicants must respond to this RFA in its entirety. Applications that do not meet the basic applications requirements, as detailed in the Required Attachment List, will be considered non-responsive and will be rejected.

Question 11: *What is the timeframe for cost reimbursement/payment to be made?*

Answer 11: OSHPD has 30 days from the day the invoice is received to process it. If that deadline is not met then OSHPD is subject to a penalty. In this RFA, progress reports and invoices are due no more than quarterly.

Question 12: *Is this RFA geared towards consumers and family members in specific roles, such as direct service positions?*

Answer 12: The aim of this RFA is to fund organizations to provide support to PMHS employers who are currently employing or looking to employ consumer and family members. This RFA focuses on the PMHS employers, not the consumer and family members directly. However, the training for the PMHS employers could surround training on how to employ consumer and family members in any capacity. There are not specific consumer and family member positions outlined in this RFA that PMHS employers should be trained on specifically.

Question 13: *Are there any age restrictions on the consumers and family members that will be impacted by this RFA?*

Answer 13: The purpose of this RFA is to fund organizations to support the PMHS employers so the ages of consumers and family members are not under the purview of this RFA. If you are providing training for a PMHS employer on how to best support the consumer and family member workforce of a certain age population, you are more than welcome to, but the training is directed at the employers themselves not the consumers and family members.

Question 14: *On page 5, can you explain what is required from the potential applicant for the needs assessment of the Public Mental Health System (PMHS) employers?*

Answer 14: The applicant should complete and submit an assessment that evaluates the identified needs of the PMHS employers the applicant proposes to support via this application. The assessment should engage individuals (Director, Manager, Supervisor and staff) within the identified PMHS employers that would be supported via this application and can be completed through focus groups and/or key-informant interviews, and/or a combination of the aforementioned. To those employers you are going to ask them several questions outlined on page 6, so you can identify their needs. The activities that the proposer will complete will be based on these identified needs of the PMHS employers. The assessment should be included in your application and should drive your work-plan.

Question 15: *What does Public mental Health System Employers (PMHS) consist of?*

Answer 15: Public Mental Health System means publicly-funded mental health programs/services and entities that are administered, in whole or in part, by the Department or County. It does not include programs and/or services administered, in whole or in part, by federal, state, county, or private correctional entities or programs or services provided in correctional facilities. This is the definition as defined in the regulations: *Title 9, CCR, Section 3200.253*

Question 16: *Is there a distinction between mental health and behavioral health in this RFA?*

Answer 16: For the purposes of this RFA, mental health and behavioral health can be used interchangeably.

Question 17: *If a proposer was to bring in a partner or was to leverage additional funding, would additional points be given for that and is there a place to note that in the budget?*

Answer 17: On page 10, Section E. Application Requirements and Information, Item 4. Evaluation Process, subsection c. on page 10, does not reference bringing in additional partners or funding directly, but this may be considered by evaluators in the strength of program.

Question 18: *Is there an emphasis or desire to serve a specific geographic area and/or reach as many organizations as possible?*

Answer 18: On page 10, Section E. Application Requirements and Information, Item 4. Evaluation Process, subsection c. on page 10, states: "The final awards will be granted to the highest scored applications. OSHPD intends for this RFA to support multiple counties in California by providing a distribution of awards throughout the state."