Perinatal Mental Health Community Capacity Building Funding Opportunity

Application

Q: I am part of an organization that does not fall under the categories listed in the application guidance (501(c)(3) Private Non-Profit organizations, Tribal Nations or Recognized American Indian organizations, Public or Private Schools, Faith-Based organizations, and Local Government entities). Am I still eligible to apply?

A: Yes, other organizations are welcome to submit an application for funding. If selected for funding, additional information may be requested before a contract is issued.

Q: Can a private therapist apply for the funding?

A: Yes, other organizations are welcome to submit an application for funding. If selected for funding, additional information may be requested before a contract is issued.

Q: If we are a private for-profit business, is there additional information we should submit with the application?

A: No additional information is needed for the submission of the application. If selected for funding, DCYF will request additional information if required.

Q: Is it possible to have the application be a collaborative application for funding, or should it be one solo application?

A: Historically, we have only funded single organizations that hold the resulting contract, and it is that organization that takes on most of the work. Additional community partners may be subcontracted for elements of the contract as long as the subcontract does not make up more than 49% of the resulting budget.

Q: When we submit an application, where do we send it?

A: Applications should be submitted to <u>dcyf.strengtheningfamilies@dcyf.wa.gov</u> by 5 p.m. on May 7, 2025.

Q: Who should the letters of support from parents and organizations be addressed to?

A: Letters of support should be addressed to "DCYF Strengthening Families".

Q: Where can I find the application?

A: This funding opportunity does not have a fillable application; each applicant may format their application in the way that works best for them. Applicants should follow the application guidance listed in the RFA guidance which can be found on this website:



https://dcyf.wa.gov/services/child-dev-support-providers/home-visiting/funding-opportunities.

Q: We were wondering if we could receive technical assistance in the form of reviewing our application and informing us about whether we responded to the questions and budget correctly?

A: Unfortunately, we are not able to provide that level of technical assistance for this funding opportunity. However, if you have specific questions as you work on the application, please email them to dcyf.strengtheningfamilies@dcyf.wa.gov by 5 p.m. on April 24, 2025 and we will respond to you. In addition, support may be available through the Washington Apex Accelerator (https://washingtonapex.org/).

Q: How do we submit the LOI for this funding opportunity?

A: The Perinatal Mental Health funding opportunity does not require a letter of intent to apply.

Q: Would a letter of partnership from the Plan of Safe Care (POSC) hospital be considered one of the letters of support from a partner agency?

A: The letter of partnership from the POSC hospital could be considered a letter of support if the hospital is supportive of the application process. However, the POSC hospital can also provide a letter that just describes their commitment to participation in the task force work. If the letter only describes the commitment to participating in the task force, you could still provide 2 additional letters as your letters of support.

Q: The closest POSC hospital listed is two hours away, so our population is not giving birth there. What is the guidance for applying in these cases?

A: Partnering with a Plan of Safe Care Hospital is not required for the Perinatal Mental Health funding opportunity applications.

Q: When will funding for the 2025-2026 Perinatal Mental Health Community Capacity Building be open?

A: This funding opportunity is currently open and available to access on this website: https://dcyf.wa.gov/services/child-dev-support-providers/home-visiting/funding-opportunities.

Contract Activities

Q: Do we have to create a new task force for this work, or can we collaborate with an existing local task force?

A: Applicants are not required to create a new task force. An existing group may be used to meet the task force requirement if it is a cross-sector group who is willing to take on this role. The task force should be developed in a way that works best for the community it will serve.

Q: This funding is used for creating or deepening a task force that is focused on promoting referrals and understanding the needs of the community and the initiative as well as a concrete service and the creation of materials for the community to promote referrals and resources. Is this correct?

A: Yes, those are the key activities. The Resource and Referral Guide typically is a part of the task force work, though, so it is not necessarily a separate activity. Perinatal Support Washington, in partnership with DCYF, will provide technical assistance in the development and implementation of all these activities.

Q: How many parents are we expected to serve in our support groups? Do we need to serve different people every time or can we serve duplicated people over time? What about how many people attend the task force?

A: We ask for organizations to aim for serving approximately 8 people per support group or about 20 people per year for 1:1 parent supports. However, we do not have an expectation of a number of families you serve in a year since this is a voluntary service. You do not need to serve different people every time, we frequently see participants who attend multiple meetings and participants are encouraged to attend services for as long as they feel it is beneficial. For the task force, there is no specific number of participants since this varies by community.

Q: We are planning to have our defined community be that of an existing program. The clients in this program are low-income, first-time moms and identify in a wide range of your focus populations. Are we narrowing ourselves down too much by having these clients be our defined community?

A: The RFA Guidance for the Perinatal Mental Health Capacity Building funding opportunity does not have any restrictions on how broad or narrow a focus population should be. Each organization can identify their own focus population based on their understanding of the community need.

Q: We hope to submit a letter of agreement demonstrating collaboration with the Plan of Safe Care (POSC) hospital. There is a Perinatal Public Health Nurse who works with a clinic that has a long partnership with our local POSC hospital. They are a valued participant with our task force, but they are not a direct employee of the POSC hospital. Can the hospital designate them as the representative in this care? They would be an excellent choice. If so, would you need a letter of agreement from both them and a hospital staff?

A: For the Perinatal Mental Health funding opportunity to get the bonus points for a Plan of Safe Care Hospital being represented on your task force, there must be a provider or a representative who will meaningfully collaborate with your task force. Each individual Plan of Safe Care hospital may determine who they would consider a representative or provider of the hospital who can fill that role. The letter of agreement that is required to get the bonus points must come from a Plan of Safe Care Hospital.

Q: Can you clarify the partnership with the Plan of Safe Care (POSC) hospital? It seems like that may be tertiary prevention.

A: The partnership with the POSC hospital partnership should be focused on the task force elements of the contract, rather than the direct services elements. The goal of this partnership is to create systems to proactively support families, including those needs addressed by the POSC hospitals.

Q: Is there a specific curriculum required for use in the support groups?

A: Funded communities are required to use the Group Peer Support (GPS) model for support groups. The GPS model may be used in partnership with other curriculums, as long as the curriculum is reviewed and approved by the technical assistance provider at Perinatal Support Washington.

Q: Could you clarify the role of the task force facilitator? Is it expected for the task force to have a designated facilitator, or can there be a core team of facilitators working to convene this task force? Does the facilitator need to be appointed at the time of application?

A: It is best practice to have an initial plan for task force facilitation. This can be either one specific person or a team approach. However, we understand that the plans may change over time, which is acceptable.

Miscellaneous

Q: Is it possible to apply for both the Strengthening Families Washington Opportunities (Community-Based Child Abuse Prevention Evaluation Capacity Building and Perinatal Mental Health Community Capacity Building)?

A: Yes, organizations may apply for both funding opportunities as long as the applications are for separate programming.

Q: Are there limitations with this funding, such as limitations on indirect or administrative costs?

A: Indirect or administrative rates are expected to not exceed 10% of the direct expenses, not 10% of the contract total. If your organization requires an indirect rate that exceeds 10% of the direct expenses, you will be required to submit an indirect rate certificate issued by a federally cognizant agency if selected for funding.

Q: Will the webinar be recorded and available to view later?

A: Yes, the presentation portion of the applicant webinar will be recorded and posted on this website: https://dcyf.wa.gov/services/child-dev-support-providers/home-visiting/funding-opportunities. The question and answer portion of the webinar will not be recorded, but all questions and answers are included in the posted FAQ document.

Q: Is the CBCAP funding a source of funds from Washington State or federal funds?

A: The Community-Based Child Abuse Prevention funding is a federal funding source.

Q: How is the perinatal period defined for this initiative?

A: For this project, we consider the perinatal period to include the time immediately preceding pregnancy through one to two years postpartum. However, this definition is somewhat flexible as families who are experiencing perinatal mood or anxiety disorders outside of this range are still eligible for support.

Q: Could you clarify guidance on border communities?

A: In border communities, we ask that funded communities conduct their intention outreach and recruitment efforts in Washington State. However, participants from outside Washington State do not have to be excluded. We recognize that in many border communities, there are shared resources between states where partnerships may be beneficial for the overall wellbeing of families. If selected for funding, the DCYF program specialist can help communities find solutions.

Q: Will this Q&A be posted on the same funding opportunities page as the RFA?

A: Yes, all questions and answers will be posted on the same website as the funding opportunity. The document will be updated weekly as new questions are asked.