

## SFY 2019 Primary Prevention RFP Frequently Asked Questions

1. Will this webinar be recorded and available for view after for those unable to view it live?  
*Yes, the webinar will be recorded and posted on the OhioMHAS website with the RFP.*
2. Will organizations be able to apply for multiple Primary Prevention (MHA-19-PW-PrimaryPrevention-39) Grants if they have multiple projects and partners with whom they would like to apply for funding for? Or is each organization limited to one application?  
*Applicants can apply for more than one project, each proposal will be reviewed and scored on its own merit.*
3. I'm reaching out to see if more information has been released yet regarding a registration link for the bidder's webinar on February 12th?  
*The Ohio Department of Mental health and Addiction Services Bureau of Prevention and Wellness will host a bidders conference webinar for the FY 2019 RFP Primary Prevention Funding Opportunity (MHA-19-PW-PrimaryPrevention-39) on Feb. 12 at 10 a.m. Click [HERE](#) to register or type in this link: <https://register.gotowebinar.com/register/6591793598944745730>*
4. What sort of entities are eligible to become OhioMHAS certified prevention agencies or coalitions? Are local governments, for example, eligible to certified? Or, is it more for grassroots organizations of citizens?  
*Please see the following link for information regarding licensure and certification of community behavioral health agencies: <http://mha.ohio.gov/Default.aspx?tabid=253>*
5. Is the bidders conference optional or mandatory for applicants?  
*The bidder's conference is not mandatory.*
6. Our agency operates several prevention programs in different counties. Can our agency submit multiple proposals for our different sites and programs, or should we submit one proposal for our agency?  
*The decision to submit several applications for different sites is up to the agency, though the burden would be much less on the agency if one application was submitted with an implementation plan for each site if the sites are implementing different evidence based programs.*
7. I was just reading through the Request for Proposal Expansion of Prevention Evidence-Based Practices Office of Prevention and Wellness and was so impressed with the scope. I am inquiring to see if there will be Request for Proposals in 2018.  
*The current state fiscal year is 2018, and the Department does not anticipate any additional primary prevention RFP's for this year.*
8. Do you have to be OhioMhas certified to get grants  
*Yes, Applicant must be a OhioMHAS certified prevention agency or in process of becoming one.*

9. If we are new to GFMS, should we begin the process immediately.  
*Yes, please see the instructions under proposal guidelines in the RFP for information on how to become a vendor and register for GFMS.*
10. Are Boards eligible applicants?  
*No, eligible applicants must be OhioMHAS certified prevention agencies. However, Boards may partner or collaborate with an eligible applicant for the proposal.*
11. What is the OhioMHAS certification process for prevention coalitions?  
*Here is the link for Certifying Community Mental Health or Addiction Service Providers*  
<http://mha.ohio.gov/Default.aspx?tabid=128#32641517-certifying-community-mental-health-services-or-addiction-services-providers-5122-24-to-5122-29>  
*Please see this link regarding the certification of coalitions:*  
<http://mha.ohio.gov/Portals/0/assets/Regulation/Rules/12082016/OAC-5122-29-20-Prevention-service.pdf>
12. What qualifies as national and/or local evaluation?  
*Any evaluation that shows the achievement of identified outcomes and successes of the specific program you are proposing would be sufficient.*
13. Should "home grown" programs that are not yet evidence based, but demonstrate significant outcomes apply?  
*Yes, you would just include the documentation related to the significant outcomes and success in the abstract document.*
14. How do you define a certified prevention provider?  
<http://codes.ohio.gov/oac/5122-24-01>  
*"Certification" means the written authorization from the department for an agency to operate specific services and provide activities according to Chapters 5122-24 to 5122-29 of the Administrative Code. These services and activities are those which are included in the agency's contract or sub-contract with the community mental health board or for which a non-contract agency has voluntarily applied.*
15. Are boards still getting block grant funding for prevention or is this being included in this rfp?  
*Yes, this rebid does not include the allocation funds received by the Boards.*
16. Must providers begin services with young adults no younger than 18.  
*OhioMHAS supports prevention services for all ages across the lifespan.*
17. We are an agency that is mental health primary and substance abuse secondary, would we qualify for this grant?  
*While the SAPT BG funds must be spent on substance abuse prevention, there are many evidence based programs that address risk and protective factors that demonstrate outcomes for other issues. There must be a substance abuse prevention component in the project.*

18. If a coalition is a Coalition of Excellence, but does not have OMHAS Prevention Provider Certification, are they eligible to apply for the funds

*Please see this link regarding the certification of coalitions:*

<http://mha.ohio.gov/Portals/0/assets/Regulation/Rules/12082016/OAC-5122-29-20-Prevention-service.pdf>

19. Is implementation of YECF considered evidence-based for the purposes of this RFP?

*Yes.*

20. Are we able to submit more than one proposal i.e. 1. for youth 2. Coalition?

*Yes, it is allowable to submit more than one proposal if desired.*

21. Where can format and criteria be found?

*If this is referring to the format and criteria for the proposal, the RFP can be found here:*

*Funding Opportunities Page: <http://mha.ohio.gov/Default.aspx?tabid=725>*

22. If we have services already funded by these funds, are we able to apply again? Or do we have to propose totally new services?

*Proposals should reflect the needs and capacity of the community. Applicants can propose programming that meets their needs. The awards for these funds will be all new.*

23. Our organization has historically received these grants. Does this mean we are a Certified Prevention Agency? Or how do I check whether we currently are?

*You will need to check with the OhioMHAS Bureau of Licensure and Certification or with your leadership to see if you are a certified prevention agency, - [Janel.Pequignot@mha.ohio.gov](mailto:Janel.Pequignot@mha.ohio.gov)*

24. Is a teacher or school psychologist and educational entity under ODE?

*The school or the district would be the educational entity not a teacher or psychologist.*

25. How about Health Departments?

*Local Health Departments are eligible applicants.*

The fiscal agent of our coalition is our local health department, we have been exempt from prevention certification in the past. Do we now need to seek certification? *Please see this link regarding the certification of coalitions:*

<http://mha.ohio.gov/Portals/0/assets/Regulation/Rules/12082016/OAC-5122-29-20-Prevention-service.pdf>

26. Is overhead a part of the funding?

*Each applicant is required to submit a line item budget. OhioMHAS allows only 10% for indirect costs and this must be reflected in the line item budget.*

27. Are the UMADAOPs eligible to apply for this funding pot?

*Yes, UMADAOPs are eligible to apply.*

28. Who all are the entities who drive community planning processes that are acceptable to OhioMHAS?

*Local Health Departments, hospitals, ADAMHS/ADAS Boards, there are also several assessments identified in the GFMS (Communities That Care, PRIDE, OHYES!, TriEthnic, etc.)*

29. Our agency operates several prevention programs in different counties. Can our agency submit multiple proposals for our different sites and programs, or should we submit one proposal for our agency?  
*Yes, this is a competitive process and agencies can submit their proposals in a manner that best supports their services.*
30. So does this grant take the place of the annual prevention grant?  
*If you are referring to the Board allocation you receive, no. If you currently have a prevention grant from OhioMHAS, it will end June 30, 2018.*
31. Is there time for an organization to become certified before the grant deadline?  
*Yes, your application for certification must be submitted and you must be in the process.*
32. Can you speak regarding the trauma/substance abuse piece?  
*While the SAPT BG funds must be spent on substance abuse prevention, there are many evidence based programs that address risk and protective factors that demonstrate outcomes for other issues, trauma being one. There must be a substance abuse prevention component in the project.*
33. Are secondary prevention programs applicable?  
*These SAPT BG funds must be spent on Primary Prevention services, which can include direct and indirect services for Universal, Selective and Indicated populations.*
34. Is this only a 1 year grant? is \$100,000 total costs or just direct costs?  
*This grant may be funded for up to 4 years, contingent upon Federal funding, programmatic outcomes and reporting requirements. The \$100,000 is the total cost for each year.*
35. If submitting multiple proposals, is the max request \$100,00 total, or per proposal?  
*Each proposal can include a request for up to \$100,000.*
36. We are OhioMHAS certified does this mean we are prevention agency?  
*OhioMHAS certifies agencies for many different modalities and services. You will need to check with the OhioMHAS Bureau of Licensure and Certification or with your leadership to see if you are a certified prevention agency, - [Janel.Pequignot@mha.ohio.gov](mailto:Janel.Pequignot@mha.ohio.gov)*
37. If we have a women's set aside prevention program and a mentoring program can we apply for both or just one?  
*Applicants can submit as many proposals as they deem necessary.*
38. Can a single agency apply for direct services in one application and strategic planning in a second application?  
*Applicants can submit as many proposals as they deem necessary*
39. Where can we find a current list of grantees for this proposal?  
*The grantees funded for SFY 2018 can be found here:*  
[http://mha.ohio.gov/Portals/0/assets/Funding/Allocations/SPF2018/FY18\\_GIFA.pdf](http://mha.ohio.gov/Portals/0/assets/Funding/Allocations/SPF2018/FY18_GIFA.pdf)

40. Would this grant replace the final year of the SPF Rural grants?  
*No, this RFP opportunity does not include any of the SPF PFS or SPF Rx funding.*
41. Would you consider funding a proposal to scale a local evidenced based project from a county to a 10-15 county region?  
*Applicants can submit a proposal for what best meets their needs and meets the requirements of the RFP.*
42. Would providing education on EBP's on prevention be considered i.e. conference, institutes, trainings?  
*A training or conference held in conjunction with or that supports the comprehensive prevention programming would be allowable, but not a proposal totally focused on workforce development.*
43. Can we fund prevention conferences with this funding?  
*Please see above.*
44. How many awards are you anticipating making?  
*As OhioMHAS has not rebid these funds for some time, we are unsure of how many proposals will be received and the amounts that will be requested. It is our goal to fund as many as possible.*
45. Where are scoring criteria located?  
*The scoring criteria can be found in the RFP and in the Powerpoint document utilized in the webinar.*
46. Can a OCPSA Deliver the services?  
*An OCPSA can deliver services under the supervision of an OCPSII, OCPC or one of the other licensed professionals identified in the prevention rule.*
47. It was just mentioned that these grants should focus on direct services. However, if a coalition focuses on indirect, universal strategies, is this acceptable for this funding?  
*Yes, indirect services such as environmental strategies are allowable.*
48. Where can we get a copy of the RFP?  
<http://mha.ohio.gov/Default.aspx?tabid=725>
49. If it is a school based universal prevention strategy, does the qualification for a certified prevention specialist need to be the one delivering services?  
*Yes, all prevention services should be delivered by certified individuals that meet the criteria of the prevention rule.*
50. Can a registered applicant (RA) deliver services?  
*An OCPSA can deliver services under the supervision of an OCPSII, OCPC or one of the other licensed professionals identified in the prevention rule.*

51. Our project model type was locally developed and has been implemented for 15 + years, do you recommend revisiting this and implementing evidence based?  
*As long as the program continues to meet the needs of the population you are serving, you would just include the evaluation documentation related to the significant outcomes and success in the abstract document.*
52. Is a school based / classroom strategy, it is a teacher "delivering services." How would that work?  
*Most school based classroom programs implemented by teachers, would not require funding to implement. There may be minimal costs for some training if necessary and materials. PAX GBG is an example of this type of program.*
53. Is the Youth Empowerment Model the only model accepted if youth programming is proposed?  
*Yes, OhioMHAS is focused on developing a consistent evidence based model across the state.*
54. Can agencies design and submit their own budget demonstrating all the items required?  
*No, all applicants must utilize the identified categories in the line item budget in the GFMS system.*
55. Just making sure, the Proposal Narrative has a three page limit and includes the Abstract. The abstract is not a separate three page document, right?  
*Yes, 3 page total, one sided.*
56. If we want to submit an application to support coalition work across Ohio, would our organization's strategic plan meet the requirements for application submission? We discuss coalition support and growth in that strategic plan, but it is for coalitions throughout Ohio.  
*Yes, if it addresses the assessment and capacity of the agency to do that then it would be appropriate.*
57. The links in the presentation are not live, so you cannot click on them. I guess we will get copies of the slides?  
*The powerpoint document will be located on the OhioMHAS website along with the RFP and the recorded webinar. All links should be live in all these areas.*
58. To actually apply, does one complete a new application in GFMS-- is there a specific way to denote that this is for the Primary Prevention grant?  
*Yes, you will apply directly in GFMS and you will select Primary Prevention as your Project Area.*
59. Will there be required trainings/statewide meetings (similar for SPF SIG/PFS)/work with a statewide evaluator be a part of the funding awards?  
*No.*
60. If we have local data demonstrating a clear link between trauma and substance use, can we request to do trauma-informed work with youth to reduce substances?  
*As long as it meets the requirements set forth in the RFP and the criteria for primary prevention.*
61. Is Youth empowerment model different from classroom direct service?

*Yes, you can find more information related to the Youth Empowerment Framework here:*  
<https://www.ohio.edu/voinovichschool/services/ohio-adult-allies.cfm>

62. Is the letter of support considered part of 3 page abstract?

*No, it is a separate document.*

63. If a participant in the program has a history of substance use, can he or she still be a participant in this program to prevent relapse.

*No, relapse prevention falls under treatment and recovery in the continuum of care, not primary prevention.*

64. Where do you get the training for the PAX and Life Skills that is going state wide?

*You can find information related to PAX GBG training at [www.paxohio.org](http://www.paxohio.org), and LifeSkills training at [www.preventionactionalliance.org](http://www.preventionactionalliance.org)*

65. Could staff costs for serving as a PAX Partner for schools be included in a SAPT grant?

*Yes.*

66. Will MHA consider more than one residential program?

*No residential treatment programs will be considered, they are not primary prevention.*

67. During the Bidders Conference Webinar, it was mentioned that someone who has a diagnosis cannot participate in prevention services. We are exploring an EBP that is designed to provide primary prevention services to children of parents with a substance abuse addiction within a family-based format. Parents are included in programming along with children to increase family bonding and parenting skills in order to increase protective factors for these children. Would the parents who are in recovery be allowed to participate in this way?

*There are many EBP's that target both children and parents. As long as the child is the primary target of the EBP this may be considered.*

68. Would ESCs be considered exempt under the OhioMHAS prevention certification rule?

*Educational entities under the jurisdiction of the Ohio Department of Education or Ohio Department of Higher Education; are exempt from the OhioMHAS prevention certification rule.*

69. I believe there is still federal dollars available for both the PAX Good Behavior Game and the Triple P program. If this is the case would these programs be ineligible for the new Primary Prevention Grant?

*These funds can be utilized to support the implementation of PAX GBG or Triple P. If the state is offering training, applicants should take advantage of the free training and not include in the grant budget.*

70. Is OSPF a certified prevention agency? I have gone to the link provided in the FAQs, but cannot find where a current list of certified agencies are. I apologize if I should know this. But Yvette and Cheryl never talked about this in the past.  
*OhioMHAS certifies agencies for many different modalities and services. You will need to check with the OhioMHAS Bureau of Licensure and Certification or with your leadership to see if you are a certified prevention agency, - [Janel.Pequignot@mha.ohio.gov](mailto:Janel.Pequignot@mha.ohio.gov)*
71. The RFP includes two attachments specifically pertaining to FCFCs. Do these need to be completed and submitted?  
*No, these are standard assurances for the Department. You should not complete and submit anything it is all done in the GFMS system.*
72. What percentage of the grant funds may be used for a process and summative evaluation of the EBP: a) track outputs of implementation (e.g., # students attending a training, student hours on the project), b) assess intervention fidelity (e.g., hours implemented, checklist of implementation procedures), c) assess the evidence-based practice using the youth empowerment conceptual framework (e.g., student perceptions of collective efficacy and connection to team members), and d) assess perceptions and behavioral health outcomes (e.g., student self-report surveys of alcohol and drug use)?  
*The Department has not set a specific percentage of grant funds that can be utilized for evaluation purposes.*
73. If the grant project proposal is to establish a NEW youth-led program and youth group (i.e., there is no existing strategic map), how should the applicant proceed?  
*These grants are for existing youth led programs. New programs must go through the Youth Empowerment Framework Adult Ally Academies and there is funding offered through Prevention Action Alliance*
74. In GFMS, what is the application number, OMHAS lead person name and project area that should be selected?  
*You should select Primary Prevention as the Project Area. Everything else will pre-populate in the system or be added by the prevention staff.*
75. Our Board is the administrative and fiscal agent for the county coalition. Is the coalition still able to apply for funds to support universal strategies and have the funds awarded to the Board?  
*The coalition can apply with the Board as the fiscal agent. The coalition must meet all the requirements set forth in the RFP.*
76. Would you be able to give some clarification about prevention programs providing “direct services” in the grant? Are activities like consultation, working with administrators to set up prevention frameworks, working on media campaigns, etc. considered direct services?  
*These funds are to be utilized for primary prevention services, related to a comprehensive prevention program. If the consultation is a part of community based processes this may be considered direct service. Media campaigns are not direct service.*

77. **Note:** If you are applying for **youth led programming** you must upload your current Youth Empowerment Conceptual Framework (YECF), and strategic plan map; If you are applying for **coalition work**, you must upload your current strategic plan/logic model. Does this RFP only fund existing youth-led programming?

*Yes, These grants are for existing youth led programs. New programs must go through the Youth Empowerment Framework Adult Ally Academies and there is funding offered through Prevention Action Alliance.*

78. Are proposals that **only** include universal strategies (information dissemination campaign and community-level education) acceptable? If so, do we need to identify an EBP that would guide these efforts?

*Only evidence based practices will be funded. The CSAP strategies utilized to implement the EBP should be related to the EBP itself and the comprehensive prevention program being provided by the agency.*

79. In the 2016 Guidance Document for OhioMHAS Prevention Services, the table shows that ECMH consultation programs do not qualify for SAPT block grant funding. Is this still true? If so, would classroom based interventions for young children be appropriate?

*Services funded with the SAPT BG must be focused on substance abuse primary prevention. This could include evidence based practices education programs for young children or parents but would not be categorized as ECMH consultation services.*

80. Would an evidence-based behavioral health program targeting young children and caregivers align with this funding? The intervention we are considering is not marketed as AOD prevention intervention, however there is research to support its impact on reducing AOD use.

*While the SAPT BG funds must be spent on substance abuse prevention, there are many evidence based programs that address risk and protective factors that demonstrate outcomes for other issues. There must be a substance abuse prevention component in the project.*

81. I have read through the FAQ's about coalition certification. It appears that the Ohio Administrative Code: 5122-29-20 Prevention service. Section O states that coalitions do not need to be certified. However, during the webinar I thought I heard that coalitions DO need to be certified.

*Coalitions do need to be certified unless they meet the exemption in the rule.*

82. I'm very confused by some of the responses to the FAQ's on this grant, especially as it relates to Coalitions of Excellence. In one of the questions it asks how to become a Coalition of Excellence and the response takes you to Prevention Certification requirements which don't even mention Coalition of Excellence. That rule also states that Coalitions are exempt from the rule.

*Coalitions do need to be certified unless they meet the exemption in the rule. Coalitions of Excellence is a different process not related to certification and more information can be found on the Prevention Action Alliance website.*

83. In the RFP it says Coalitions can apply. In the FAQ it says only certified providers; however Coalitions are listed as exempt from the rule.  
*Coalitions do need to be certified unless they meet the exemption in the rule.*
84. It says no Board can apply, but some of the Coalitions operate within a Board structure. If the Board is the backbone organization for the Coalition, why are they not eligible to apply?  
*The coalition can apply with the Board as the fiscal agent.*
85. Are we able to use a “Registered Applicant” with the OCDPB who will be working toward their OCPSA but is not yet an OCPSA?  
*Registered applicants can provide services as long as they are under the supervision of an OCPS or an OCPC. Please see the rules related to the scope of an RA, at OCDPB <http://www.ocdp.ohio.gov/>*
86. The ADMAHS letter – this used to be a form, but I see no form, so they should just write a letter?  
*Yes, the Board should provide a letter that the applicant will upload into GFMS.*
87. Attachment 4 is for contracts. If we do not use contractors, should we indicate that? Or just omit this attachment?  
*These attachments were included for reference only. Everything you need to complete is included in the line item budget in GFMS.*
88. Attachment 5. 5A requests insurance documentation, 5B requests audit but then there is a list with 5C, D, E and F that doesn’t indicate what should be submitted for each of those... Attachments 7 & 8 are for FCFC only?  
*These attachments were included for reference only. Everything you need to complete is included in the line item budget in GFMS.*
89. Is the Leader In Me (FranklinCovey) an approved program for schools for this grant?  
*The applicant will need to provide documentation that any selected program is an evidence based program for primary substance abuse prevention.*
90. I believe I missed the information on the bidder’s conference this morning. Was that a recorded webinar that I could watch?  
*Yes it was recorded and can be viewed at: <http://mha.ohio.gov/Default.aspx?tabid=725#38572028-fy19--rfp-primary-prevention-funding-mha-19-pw-primaryprevention-39>*
91. I understand that schools are exempt from the required prevention certification but must have a social worker or other qualified staff member. Will you please stipulate what “other qualified staff member” denotes?  
*A prevention professional, a teacher that is implementing an evidence based program, etc.*

92. The scoring rubric on page 6 of the RFP references sections that we are to submit, yet there are not descriptions in the RFP about them. (They are not included in the Project Narrative sections A-E.) Do you have instructions for what you are wanting us to include in these sections? Face sheet, Federal requirements, Community assessment, Service capacity, Staff description Implementation plan  
*These items are all included in the GFMS system and are self explanatory. As you move through the system, these are things that make up your application. There are also definitions available <http://mha.ohio.gov/Default.aspx?tabid=147>*
93. However, in GFMS ‘collective impact’ is not a choice under Define Project Model. Is there choice that represents that? If I choose the GFMS selection ‘youth led program’, would I have to leave out all of our collaborative/community impact goals such LST school groups, PAX coordination, or Positive Youth Development classrooms or Trauma Training for teachers? These services will obviously not be youth led (though often involve youth leaders).  
*You would need to have multiple implementation plans reflecting each of these programs in you GFMS application.*
94. I see in the Request for Proposals -MHA-19-PW-Primary Prevention-39 document that a 3 page narrative is required. However, in the GFMS the narrative box is limited to 500 characters. Where should i submit the abstract and narrative?  
*There are instructions included in the RFP, discussing the uploading of this 3-page document into the GFMS system under project documentation.*
95. Is it permissible to request money to fund a state wide youth prevention/leadership conference?  
*These funds are to provide primary prevention services across the lifespan. If an applicant chose to include a conference as a part of their comprehensive prevention programming it may be considered. An application for just a conference would not be considered as it would not meet the RFP criteria.*
96. Instructions state that meals are not typically an allowable expense. The evidence based program specifically builds a family meal into the program as part of the family bonding process in order to build protective factors. Would meals, then, be an allowable use of funds in this case as it is specifically a part of the EBP?  
*Yes, as long as the food is an integral part of the EBP being implemented it is allowable.*
97. Can a coalition deliver education (EBP) along with environmental, ID and CBP activities?  
*Yes, but they must be certified by OhioMHAS to implement these direct services.*
98. Can agency staff be members of the coalition?  
*Yes*
99. Our agency is certified to provide prevention services, but our prevention providers do not have the prevention credential. All of our prevention providers are masters level social workers or counselors with a State mental health license (either LISW, LPCC, LPC or LSW). Can we still apply and be eligible for funding?

*Yes as long as they have documented prevention experience.*

100. On page 2 of the RFP, under the last paragraph titled “Purpose” it mentions EBPs supported by either national or local evaluation. Are you requesting the agencies complete an evaluation for this funding or only that the EBPs selected have evaluation data to support their effectiveness?

*EBP’s selected must have evaluation data to support their effectiveness.*

101. The RFP also states we must use all 6 prevention strategies. Do we have to identify an EBP for each strategy? Or do we only need one EBP but still carry out all 6 strategies?

*The RFP states that “All six strategies in appropriate proportions are needed as part of a comprehensive prevention approach.” Depending on the EBP selected you may only provide one or two of the 6 strategies related to that particular EBP, but other strategies related to other pieces of your comprehensive program.*

102. However, when we looked at SAMHSA'S National Registry of Evidence-based Programs and Practices, "Areas of Interest" the program is listed under "Mental health promotion". Will this type program be acceptable?.

*As long as it addresses both risk and protective factors and/or outcomes for AOD as well as mental health promotion.*

103. I have a question regarding the RFP. We have youth led prevention in our community but are looking to expand their work and connect the dots between middle school, high school and at the college level. Would this be considered an existing program or a new program?

*As long as you are implementing the YECF it would be considered existing programming.*

104. What are allowable incentives that can be used for programming?

*These vary and there could be many possibilities. Please include in your proposal the incentive you are proposing and all necessary details and during the review process if there is need for discussion staff will contact you.*

105. I run a program that operates with a Youth Advisory Council (YAC), which is the group that is represented in our YECF. However, this council is representative of our school districts, each district having a YAC and SPF trained youth leadership group. All these groups (as well as the Youth Advisory Council) have different strategic plan maps. Do I need to upload all the SPM’s? Do I need a YECF for all groups?

*Just include the one that the council did as a group, not the ones for each individual district.*

106. We have selected the All Stars evidence based program to submit for programming to youth in our community. All Stars was listed in the GFMS drop down box for program implementation. When we read the answer to #53 in the FAQ (see below), it reads like you are only accepting proposals for programming to youth, "if it is the Youth Empowerment Model". I hope that we misinterpreted the answer. Please clarify.

*All Stars in an evidence based prevention curriculum generally provided in the classroom or small group setting. It is not a youth led program.*

107. I believe that the program that we will be proposing to use is considered evidence based, but it is not listed under the Project Models in the Implementation Plan. Should we presume it to be a Promising Practice instead and create a model in the Maintenance area?

*Yes, you would create a local program in Maintenance for your program. You are responsible for providing the data/outcomes related to the program you have chosen to show that it is grounded in evidence. Please see the RFP and the SAMHSA criteria for evidence based programs to assist you.*

108. For the Staff list—this is a proposal for a new program, so staff will not be hired to staff the program until after the grant is received. How should this be indicated?

*You can submit the supervisor or person who will be overseeing the development of the program, and note in the narrative that staff will be hired and include the credentials of the staff you are seeking.*

109. I am reviewing the RFP for the Prevention Grant. Under section C and D. It talks about having the applicant describe the target population and the Sustainability Plan. What is not clear is where the information should go. I understand that it should be in the narrative but are you expecting it to be included in the Project Abstract.

*The RFP states "Proposal Narrative, that should include A-D, should be provided in a narrative format, no more than two pages, single space in 12 pt. font, and uploaded in to the project documentation section under Uploaded Additional Attachments" These items are a part of the proposal narrative and should be identified and labeled as such.*

110. We have a coalition providing services as defined in each paragraph (G)(2) , (H)(1), and (H)(3) of rule 5122, so are therefore exempt from the prevention certification rule. So they can apply for the Primary Prevention Grant that must be submitted in GFMS by March 30 correct?

*Yes*

Also our county health department can apply for that same grant?

*Yes*

Can the coalition receive SAPT Federal funds that come to the boards each year?

*The Boards make the decision regarding who receives the SAPT allocation funds in their area based upon their community plan.*

111. Under "Community Assessment" in the system, what does "Assessment Readiness Date" mean?

*This refers to the date you implemented your assessment.*

112. I am applying for the grant from an Elementary School. Do I need to register as a vendor for the State of Ohio at the supplier link, and to register for the GFMS system to submit the grant?  
*Yes, all recipients of OhioMHAS funds must be a vendor with the state of Ohio and all applications and funding requests are addressed through the GFMS system.*
113. Can you tell me what a UPID is, and is it required for our agency to have an MOU?  
*UPID, is a Unique Program Identification that was utilized with the MACSIS billing system. It is not necessary in the GFMS system or for an MOU to my knowledge.*
114. Life skills is listed on NREPP as a legacy program does that apply as a current evidenced based program?  
*Yes*
115. In consideration of the FY19 RFP Primary Prevention Funding, our agency is exploring the potential to use the evidence based practice of Celebrating Families! which utilizes a family style meal at the onset of each three hour group session as an integral part of programing.  
*If a meal is an integral part of the EBP it is an allowable cost.*
116. I am having difficulty submitting a grant proposal through the Grant portal. It says my MHAS column total does not match the amount requested on the cover sheet. The column total is pulling in the other funds column and adding it so they do not match – help!  
*Just take out the other funds and only put in the funds requested for now. There have been issues with this in the past and it may need fixed in the new grant year. If your proposal is accepted for award you will be able to do a budget revision later.*
117. May we write a grant proposal, to fund our currently Drug Free Communities Support Program funded youth led prevention program, based on our current YECF model?  
*Yes*  
May we write to expand our currently funded YLP program to another target audience (different grade level) again based on our current YECF model?  
*Yes*
118. We are an after-school provider who serves at-risk youth in Columbus, Cleveland, and Toledo. We are interested in applying for the Primary Prevention grant. According to the RFP, we must apply for MHAS certification; however, upon reviewing the document it seems it does not apply to us as we are not a licensed mental health provider.  
*All providers providing prevention services in the state of Ohio with state or federal funding must be certified by the Ohio Department of Mental Health and Addiction Services unless they are exempt from the rule.*

119. For the evidence-based prevention practice, we are planning on using community based process, education and environmental prevention strategies. Part of our action plan for the education strategy is a small group prevention education initiative targeting school-identified at risk students. The initiative will use components of the evidence-based program PAX and its evidence-influenced Kernels for Life program, as well as other research-based prevention theories (i.e., utilizing risk and protective factor model and 40 assets).

Would this meet the RFP's requirement of including documentation of how this adapted or local program meets the SAMHSA EBP criteria? If not, would we need to use an existing EBP curriculum in its entirety?

*Using an adapted version of an EBP is allowable if you are able to substantiate the adaptations and provide the other necessary information in your proposal.*

120. In addition to the required letter of acknowledgement/support uploaded with the project narrative, is it required, recommended, or allowed to upload other letters of support? For example, if the applicant is a behavioral health provider, should there be letters from its community partners? Is there a limit on the number of letters?

*There is no need for additional support letters. Only the letter of acknowledgement from the Board.*

121. Our current log-in is under the City of Kettering. Due to grant requirement changes, the identified recipient for this year and next year is the Kettering City School District. Because it lists the organization's log-in on the application, should we apply for a new log-in for the Kettering City Schools, or will our current log-in suffice?

*You should have created an account with the new Kettering City Schools login. If you have not done that already, you will need to do so before you can apply.*

122. For the evidence-based prevention practice, we are planning on using community based process, education and environmental prevention strategies. Part of our action plan for the education strategy is a small group prevention education initiative targeting school-identified at-risk students. The initiative will use components of the evidence-based program PAX and its evidence-influenced Kernels for Life program, as well as other research-based prevention theories (i.e., utilizing risk and protective factor model and 40 assets). Would this meet the RFP's requirement of including documentation of how this adapted or local program meets the SAMHSA EBP criteria? If not, would we need to use an existing EBP curriculum in its entirety?

*You are responsible for providing the data/outcomes related to the program you have chosen to show that it is grounded in evidence. Please see the RFP and the SAMHSA criteria for evidence based programs to assist you.*