



2023-2025 Community Partnership Grants Behavioral Health Initiative Frequently Asked Questions

I. General Questions

1. Can I apply for more than one grant or role?

Applicants can only apply for one role (Behavioral Health Coordination Center, psychiatric provider, or community-based behavioral health provider) as part of this grant.

2. How many Community Partnership Grants will be awarded?

No more than five grants will be awarded. This includes one Behavioral Health Coordination Center, one psychiatric provider, and three community-based behavioral health providers.

3. Is there a maximum grant amount?

The maximum amount is dependent on the role a grantee will fill.

- Behavioral Health Coordination Center: \$250,000 per year for a two-year period (\$500,000 total; including \$50,000 for the “Everything Fund”)
- 1 Psychiatry: \$150,000 per year for a two-year period (\$300,000 total)
- 3 Community-based Behavioral Health Services: \$100,000 per year for a two-year period (\$200,000 total for each grantee)

4. Will all awarded grantees be awarded for both years, or will some be awarded only for one year?

The 2023-2025 grant cycle is two years (July 1, 2023 through June 30, 2025), and all awards will be for the entire two-year cycle.

5. What does the time commitment look like for administrative work versus direct services?

During the planning phase, there will be 2-3 planning meetings a month, which will be more administrative. The implementation phase will be more time intensive for direct services work. During this implementation phase, there will be some administrative work required (program management, data tracking and reporting, etc.). Additionally, there will be monthly case consult meetings and two check-ins each year per grantee that will include both administrative and direct services staff.

6. What population will be served in terms of behavioral health needs?

This grant will focus on adolescents (12-18 years old) and their families with mild to moderate behavioral health needs, starting in South Santa Barbara County.



7. Could the community-based behavioral health service provider also make referrals to the psychiatrist?

Yes, if a community-based behavioral health service provider identifies a need of psychiatric services for one of their BHI grant clients, they can make a referral through the behavioral health coordination center. Additionally, these needs will be discussed during the monthly case-consult meetings that all grantees will participate in.

8. What will be the commitment level for meetings initiative-wide?

- a. Monthly case consult meeting
- b. Planning meetings during the four month planning phase
- c. Two grantee check-ins per year

9. What are the requirements for data and outcome reporting and tracking?

Each grantee will be required to conduct data tracking and measure outcomes related to their grant activities. The specific data measures will be agreed upon collaboratively during the planning phase.

10. How many referrals are we expecting the community-based behavioral health service providers to offer?

We have recommended a minimum case load of 8-10 active patients at any given time and seeing new referrals within two weeks. This may vary depending on the service provider and will be reassessed during the planning phase and through continuous quality improvement.

11. For the Behavioral Health Coordination Center, what level of assessment is required for this service provider, as these skills are very different than a navigation role?

The Behavioral Health Coordination Center will initially triage the needs of the adolescent and family. This process will be further defined during the planning phase. The ability to do comprehensive and clinical assessments would be an asset in this role. The Everything Fund could be used to support the cost of more intensive assessments.

II. Program Planning

12. How do you define evidence-based?

Evidence-based means that sufficient literature exists around the program that shows impact on the individuals served. Applicants should perform a brief literature review that supports the proposed program and highlight sources in the application. Evidence-informed programs will also be considered, as these programs may be contributing to the evidence-base. Evidence-informed can be defined as building evidence for the program or approach. By design, programs should be based on established evidence.

13. Are any of the services able to be provided in-home?

Yes, services can be provided in person, in-home, at an office, or virtually.



III. Budget

15. Is the indirect rate for a program or an organization? What may be included in an indirect rate?

Indirect costs are allowed, but must not exceed 10% of the project/application budget. Indirect rates may support the organization. Examples of line items often found as part of an indirect rate include administrative, personnel, and facility expenses.

16. Is there a template that should be used for the budget?

No, there is no required template. Organizations can use their preferred formats for the program and agency budgets.

17. Do you need a two-year program and agency budget?

Yes. We are asking you to forecast out for 2-years. Please provide one program budget for each partner and an agency budget only for the lead.

18. When distributing Everything Fund resources, can the money go directly to the family?

Money from the Everything Fund will go directly to the provider of the services the adolescent or families are utilizing to take the burden off the families.

19. How should the Behavioral Health Coordination Center account for the \$50K each year as part of their budget to cover the Everything Fund?

Applicants who apply to serve as the Behavioral Health Coordination Center should include a line item in their budget in the amount of \$50,000 reserved for the "Everything Fund." These funds should be used to address barriers to accessing services, such as co-pays for insurance, transportation, or other hardships that may prevent a family from participating in services. Funds can also be used to pay for buffering supports, such as sports and physical activity opportunities, exposure to nature, arts, and other services that may help to mitigate the impacts of behavioral health needs.

Organizations are welcome to contact listenpophealth@sbch.org if there are additional questions.