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CalMHSA RFP: COVID-19 Crisis Counseling Assistance and Training Program (CCP) Bidder Conference – Questions and Answers

Monday, December 21, 2020 3:00pm – 4:00pm

See the [Crisis Counseling Assistance and Training Program (CCP) Toolkit](#) for information, trainings, forms and more on the federal CCP.

<u>Organization Eligibility</u>

1. Are governmental agencies eligible to apply, i.e., City or County?

    a. Yes, government agencies are eligible to apply.

2. How will it work if the agency was recently formed but has significant experience by individuals who started the agency including the FTEs, but no country contracts. Are we eligible to apply?

    a. Yes, you are eligible to apply.

3. Are new agencies eligible to apply even the agency does not have experience but individuals of that agency have significant relevant experience?

    a. Yes, new agencies are eligible to apply. The RFP outlines the requirements and how proposals will be scored.

4. Can we partner with organizations that compliment our service and apply for this RFP together?

    a. Organizations need to submit individual proposals. Joint proposals will not be considered.

5. As a new organization (with no previous partnerships), would we checkmark experience with counties (question #1) with the experience that our FTEs have?

    a. You should checkmark the experience your organization has providing services in California counties.

6. Question #2 specifically asks to describe past partnerships with behavioral health organizations. Can we showcase our FTEs experience (paid/volunteer) with other organizations/partnerships since our organization is new?

    a. You should describe your experience and any partnerships that are equal to or similar to what is outlined in the [CCP program description](#) provided by FEMA.

7. For question #3, as a new organization, can we use our FTEs experience to showcase crisis counselling/outreach efforts with targeted populations selected?

    a. Yes, you can use your FTEs experience.

8. As a new organization (with no previous partnerships), can we state the experience of our FTEs on question 4 to describe our organization's experience serving the target populations we have selected?

    a. Yes, you can state the experience of your FTEs.

9. Can lived experience include family members of peers?

    a. Yes.

10. Are there a minimum number of FTEs an organization must have to do this work in order to be considered eligible to participate?

    a. There is not a minimum number of FTEs.

11. My agency is a multi-division behavioral health organization (we serve foster care, STRTP, mental health and substance use clientele). For STRTP and Foster Care, we receive placements from nearly all California counties -- although we don't necessarily have staff in all of the 48 who refer to us -- nonetheless, may we count all referring counties as "providing services in?

    a. You should describe your organization's experience providing services in the counties not counting referring as providing services.

12. We are a small nonprofit with a budget under 350k. We have up to 10 peer led support groups and a family mentorship program. Would we be eligible for the grant or is it primarily for larger organizations?

    a. Yes, your organization is eligible as long as it can meet the other requirements listed in the RFP.

13. We operate only in Sonoma County. But our staff has experience providing similar services in other counties in previous jobs. As such, can we fill out the county boxes relevant to our staff experience, such as Mendocino, Lake and Napa?

    a. You can count the experience of your FTEs, and make it clear in your responses the difference between your organization's experience and your FTEs' experience.

Bonfire

1. Do we need to create a login on the portal before being able to ask questions by the 23rd?

    a. Yes, to submit questions through the portal vendors needed to create an account.

2. Comment: Parents and caregivers are missing from Bonfire as an identified group

    a. This has been updated in Bonfire.

3. Is this application on an app on the phone?

    a. The Peer Chat platform will be web-based platform, but not offered in an app(lication).

4. Is there any internal documentation required of the agency outside of the Bonfire portal required documentation?

    a. The required documentation is outlined in the RFP.

General Application

1. I heard you mention applications will be reviewed as they are submitted. Does this mean award will be on first come first serve basis if before the deadline until funds are done?

    a. The awards will not be on a first come first serve basis.

2. Was this RFP released before when COVID-19 started in March/April 2020?

    a. No. CalMHSA released an RFI in June? To gather information about the ability of programs to provide peer counseling services.

3. If this starts Feb 1 and runs through Aug 8 that is 6 months not 9 months?

    a. The CCP Program contracts will end August 8, 2021. The 9 months includes the start-up.

4. When is the official start of the contract if awarded?

    a. The review of proposals will conclude on January 22, 2021. Selected agencies will need to execute a contract with CalMHSA within 14 business days of notification of the award which will be within a few business days of January 22, 2021.

5. Given the nature of this work (emergency response) are these by design temporary services?

    a. The CCP Program is time limited.

6. Where and when will this recording be available?

a. The Bidder's Conference recording has been uploaded to CalMHSA's [website](#) and in the Bonfire Portal.

7. Will questions be allowed to ask by email after 12/23?

a. After 12:00 PM PST on 12/23/2020 questions will not be answered until after review of the proposals and awards have been announced.

8. We are a domestic violence agency. Our target population is individuals at high risk for dv, however they also tend to be rural and native American. Would we check all those target populations or just domestic violence population?

a. You should check all the target populations your organization and FTEs have experience providing culturally and linguistically proficient services. Intersectionality is recognized.

9. When you say "lived experience" does that mean with COVID or just lived experience with other issues they have experienced in their communities?

a. "Lived experience" refers to individuals with lived experience in receiving mental health services and receiving mental health services in the public mental health system.

10. Glad to hear that we may be allowed to temporarily fund IT and Finance staff with this to support the tech and business issues, even if they are not providing direct service. Do you want us to note if they have lived experience and do, we get extra points if they do?

a. Extra points are not allocated in any of the scoring areas and you should note all of your staff that self-identify as a Peer.

11. Does CalMHSA support organizations in connecting to state resources?

a. CCP Providers will receive training and support on the resources available through this program.

12. For questions 1-4, as a new organization (with no previous partnerships), can we showcase our FTE's experience (paid/volunteer) when answering these questions? For example, checkmark experience with counties (question #1) if our FTEs have experience working with these counties? Similarly, can we use our FTE experience with behavioral health organizations to answer question 2, with target populations to complete questions 3 and 4?

a. Yes, you can use the experience of your FTEs while also making it clear the difference between your FTEs experience and your organization's experience.

13. What is the difference between "Crisis Counselor – Peers" vs. "Crisis Counselor Total" in Section 6?

a. Crisis Counselor – Peer refers to an individual who identifies as a Peer (individual with lived experience).

     b.   Crisis Counselor Total refers to the Crisis Counselors that do not identify as a Peer.

14. What is a definition of a crisis counselor? We have peer specialists/counselors who provide non-clinical support.

     a.   The definition of a Crisis Counselor is in the RFP. *"Contractors should have the ability to provide virtual non-clinical emotional and crisis support sessions provided by experienced staff which may include Peers, Community Mental Health Workers, Case Managers, and other non-licensed personnel."*

15. Please confirm that no budget template is required as part of the submission.

     a.   No budget template is required as part of the submission.

16. Is there a budget template submission required and is there a template available? Or are we only required to submit the FTE required on the application?

     a.   No budget template is required. You are only required to submit the FTE required on the application.

17. Is there a difference between a crisis counselor and a peer?

     a.   No. We have referred to crisis counselors with both terms.

18. Will you please clarify the maximum word or character count for each question, where relevant? For example, Question 2 says that the limit is 1000 words, Question 4 says 750 words, and Question 5 says 500 words, but the boxes for all of these answers say that the limit is 2000 characters -- and it appears that this means 2000 characters with spaces. What are the actual word or character limits for each?

     a.   Answers must remain within listed word count. Bonfire defaults all boxes to 2000 character limits. There are "Additional Response Boxes" for answers with a word county over 2,000 characters.

19. Is a full proposal submission due by January 8th or only the intent to bid?

     a.   The full proposal is due by 5:00 PM PST on January 8, 2021. An intent to bid is not required nor requested.

<u>Funding and Budget</u>

1. What is the range amount each provider can request? What is the max amount of funding a single applicant can apply for?

     a.   There is no maximum or minimum grant amounts. Applicants should apply for the number of peer counselors they anticipate they can hire within the limited grant period. Priority will be given to meeting the target populations and applications will be scored as specified on the RFP.

2. What are the parameters to spend the money?

    a. Use of funds are specific to the implementation of the CCP as outlined in the RFP and FEMA [CCP overview](#).

3. Are all staff positions limited to the $23.63? Is $23.63 the absolute rate, or the ceiling or floor rates?

    a. Yes, FEMA has specified the hourly rate for all subcontracted services to $23.63.

4. Does the $23.63 per hour have to go to the person providing the service or can it be applied to supervision and operating costs?

    a. The $23.63 per hour is for the individual providing the services not for the supervision or operating costs.

5. For the budget, can we allocate funds for overhead to include part of the rent, phone, internet, software for telehealth, equipment for staff including laptops, desk, chair?

    a. The grant includes limited funding for the following only:

        i. Phones

        ii. Laptops

        iii. Mouse and Keyboard

        iv. Monthly Wireless and Conference Service

        v. Office Supplies and Coping

        vi. Desks and Chairs

        vii. Monitors

        viii. Special Needs Equipment

        ix. Travel Expense

    Note: The funding amounts for items identified above will be addressed upon a contract award and during contract negotiations.

6. For outreach requirements, can we pay stipends to community members to get the word out about services?

    a. No. Outreach is an allowable cost for those providing the CCP sessions, but outreach should not be the majority of the work being completed.

7. What is included in the fringe benefits?

    a. Fringe benefits are limited to 20% and include Worker's Compensation, Health Benefits, Pension, Social Security Tax, and Unemployment Insurance.

8. Our typical fringe benefits are higher than 20% - can this be negotiated?

    a. No. The federal government has limited fringe benefits to 20%.

9. I also heard you say that operating costs will be negotiated after the award – how does that work?

    a. See response to question 5 above.

10. For other positions we anticipate assigning to the project (i.e. IT and Finance), do we state how much support we think we will need and then negotiate the budget for these individuals at a later date?

    a. Yes, please identify the support needed. These positions do have a non-negotiable rate and will be determined during negotiations with selected organizations.

11. Will we also be negotiating operating costs and technology infrastructure for the CCPs at a later date since there is no budget required with this proposal?

    a. There are funds to support some operations and technology infrastructure that will be negotiated with selected organizations.

12. What if we pay the lead and administrator more but cover it from other funding sources?

    a. The rates are set by the federal funders and are not negotiable. Other funding sources may be used as long as the assigned staff to CCP are not working on other projects/programs/services/activities during the same time they are providing CCP services or completing CCP activities.

13. Will there be funds allocated for interpretation and translation services?

    a. Yes.

14. Is administrative overhead an allowable operating expense?

    a. No.

15. If providing a stipend for staff to be available can we code this as an operating cost?

    a. Staff will be funded on a full-time equivalent basis, up to 8 hours per day.

16. Please confirm there is no budget that needs to be submitted.

    a. That is correct.

17. Is there a budget template?

    a. No.

18. Is this a cost reimbursed contract?

    a. No. Contractors are funded by the number of full-time equivalent counselors hired and the allowable administrative staff.

19. Does the administrative position substitute for indirect cost?

    a. No.

20. Does this grant cover program expenses such as rent, telephone, internet, IDC cost?

a. The grant includes funding for a cell phone, lap top computer, and wireless service for each full-time equivalent staff person. The grant does not cover rent or indirect costs.

21. Is the billing based strictly on the number of hourly sessions provided by our CPP FTEs? Or are we able to bill for the hours the CPP FTE is scheduled and works to be available to provide any sessions that are requested and do all of the associated paperwork and data entry?

    a. Billing is based on the FTEs schedule for providing CCP sessions and associated paperwork and data entry.

22. 550 FTE will be funded statewide - will this be allocated on a first-come, first-served basis in advance of the application deadline for all qualified proposers? In other words, might all 550 FTE be allocated by January 1, for example, if qualified submissions for all FTEs are received by that date, or will all proposals received by January 8 be considered?

    a. Awards are not based on first come first serve. Proposals that meet the submission requirements and received by 5:00 PM PST on January 8, 2021 will be considered.

23. Will this be a direct grant award? Or would we be reimbursed on a pay-for-performance basis?

    a. This will be a direct grant award and allowable expenses will be reimbursed.

24. Will there be start-up funds to manage the contract and what is the amount?

    a. There are no start-up funds to manage the contract.

25. Are the number of FTE's set in the proposal or is there an opportunity to negotiate if there are not enough applications.

    a. The number of FTEs set in the proposal may change depending on the number of submissions.

26. What if there are not enough calls that are received by the central phone call center to send out to contracts? Will we still be reimbursed?

    a. The number of calls that are received by the central phone call center does not impact the reimbursement.

27. Is the $23.63/ hour the amount that must be paid to the peer employees or is that just the budget amount? Can we pay some more and some less? If the supervisor costs more, can we average the cost?

    a. The $23.63/hour is for the CCP Crisis Counselor and should not be cost applied to any other position.

28. How many months should the budget be?

    a. February 1, 2021 – August 8, 2021.

29. Does this grant program have an award amount range? How are grantees compensated for their work? I see the $23.63/hour reimbursement rate for Administrative and Crisis Counselors, but how can we calculate the total award amount to ensure it will cover the full cost of providing the project?

    a. The awards are based on total number of FTEs and the other costs provided in previous responses.

30. Can you share the ask range each provider can ask for and what are the parameters to spend the money?

    a. The awards are based on total number of FTEs and the other costs provided in previous responses.

31. We have operated CCP programs and paid our counselors $25/hour. Can we pay this amount or more or are we required to offer the $ amount noted in the RFP?

    a. The $23.63/hour is the rate that SAMHSA approved.

32. Are we able to charge indirect on top of the hourly rates?

    a. No.

33. Is this a cost reimbursed contract?

    a. It is not a cost reimbursed contract. The hourly rates and fixed costs are what have been approved by the federal funders.

34. Is the pay rate limited to $23.63 + 20% fringe for ALL staff working on the program or only the Administrative and Counseling staff? For example, could the Program Manager be paid a higher rate and higher fringe?

    a. The $23.63 per hour rate and 20% fringe benefits are the rates are the allowable costs.

Staffing

1. It would be helpful if CalMHSA could clearly define the other personnel roles that are listed besides the CCP. Administrator, Program Manager, IT, Fiscal Staff.

    a. Your proposal should include the key identified roles and any additional roles to support the implementation of the CCP. However, approval of additional positions will be determined based on a number of criteria, including but not limited to number of qualified proposals received, target populations served, funding, etc. Is there a ratio of counselors to leads?

    b. There is not a ratio.

2. Is the expectation to use our existing staff rather than hiring new staff?

   a. Applicants may use existing staff or hire new staff.

3. Can students in training to be clinicians provide the service if not providing therapy to CCP clients?

   a. Yes, as long as the students have lived experience and complete the required FEMA and CalMHSA trainings.

4. Is this a 100% remote service?

   a. Yes, however, if conditions improve over the course of the grant to allow for safe, in-person counseling, then it will be allowed. Grant funds cannot be used for PPE, as specified by FEMA.

5. What is the expectation of the counselor/peer to connect participants to local resources; and how is that coordinated with various county systems?

   a. The expectation is that CCP counselors are able to refer CCP recipients to local resources.

6. Is there an expected number of calls/sessions per FTE per week/month?

   a. There is not an expected number of calls/session per FTE per week/month, but providing CCP sessions is the primary purpose of the funding.

7. Can we provide the crisis counseling in person or is it required to be virtually?

   a. CCP Crisis Counselors need to follow local and state guidelines when providing CCP sessions.

8. Is there room for a small portion for a Clinical Consultant? To review cases that may need higher level referrals?

   a. No.

9. What if there are not enough calls to keep the providers busy? Is payment for being available or for hours of service?

   a. Selected organizations will have regularly scheduled calls with CalMHSA and will discuss adjustments that need to be made if there is not the anticipated volume.

10. Are we allowed to serve the target populations over the weekend and afterhours?

    a. Yes, but you cannot use CCP funds to pay for overtime or holiday pay.

11. Does this program require a full time FTE or can we split an FTE amongst other current grants?

    a. It does not require a full time FTE, but CCP funds cannot be used for supplantation.

12. Are there requirements for number of clients served per FTE?

    a. No.

13. Can masters level unlicensed professionals offer services?

    a. Yes. CCP sessions are not clinical sessions.

14. Does the program staff have to start after the contract has been executed?

    a. Reimbursement for staff time will be allowable once the contract has been executed but not before.

15. Are the personnel we engage as CCPs supposed to be existing personnel, or can we hire temporary personnel for this short-term project?

    a. You can use existing personnel or hire temporary personnel.

16. Do we need to include backgrounds of counselors we recommend for FTEs?

    a. No.

17. If a counselor has experience in multiple populations, do we divide their FTE between those populations in the list - or include their FTE multiple times?

    a. Include their FTE multiple times.

18. Who provides clinical oversight, if any?

    a. CCP is not a clinical program which also means that clinical oversight is not an allowable cost.

19. What are the qualifications of the Program Case Manager?

    a. CCP does not use Program Case Managers.

20. What is your definition of "experienced" crisis counselors?

    a. What is the difference between "Crisis Counselor – Peers" vs. "Crisis Counselor Total" in Section 6?

21. Are we correct to assume that we can create one FTE from 2 team members that are each fulfilling .5 FTE? (for example)

    a. Yes.

22. Is there a general ratio of FTE for the Program Manager and other staff to the FTE of the Crisis Counselors that as been effective for past agencies implementing this type of program that we can use to appropriately plan and use in our request?

    a. CalMHSA does not have access to this information from agencies that have previously implemented CCP.

23. If we have a federally-approved indirect cost rate, can we claim that on this award? Or are indirect costs not covered?

    a. Indirect costs are not allowable.

24. Which indirect costs will be negotiable (i.e. facilities, admin time both to coordinate services and to prepare monthly invoices, etc.)? Will they consider going with an organization's federally-negotiated indirect rate for service?

   a. Indirect costs are not allowable.

25. Does the 1 Dedicated CCP Lead that is required to be assigned to this project need to be assigned to the project full-time? (8 hours per day, 5 days per week)?

   a. No, but the reimbursement claim (on the monthly invoice) must be for the CCP Lead time spent on CCP, nothing else.

26. Is the expectation that existing agency staff will be assigned to this project, instead of new hires?

   a. Agency staff can be existing or new hires.

27. What is the expected ratio of the CCP Lead Administrator to the number of FTE crisis counselors? In other words, how many billable admin/supervision hours are expected or allowed for each FTE direct service provider?

   a. There is not an expected ratio.

   b. We anticipate that all supervision needs can be met during a weekly 60 minute supervision session for each FTE. CalMHSA will work with CCP providers and identify solutions if additional time is needed.

28. Is there a suggested number of clients one FTE should have in their caseload at any given time?

   a. No. Selected organizations will have regularly scheduled calls with CalMHSA and will discuss adjustments that need to be made if there is not the anticipated volume.

29. May we use volunteers or interns as crisis counselors?

   a. Yes, as long as the volunteers or interns are paid the $23.63 hourly rate. Individuals providing the CCP sessions need to be paid.

30. Would counselors/peers be assigned to a specific geographic region?

   a. They may be assigned to a geographic region or specific target population while also being available to support the California general population.

31. What kind of clinical oversight would be required?

   a. CCP is not a clinical program which also means that clinical oversight is not an allowable cost.

32. Are the peers/counselors required to have any license/qualifications?

    a.   CCP is not a clinical program which means non-licensed staff are allowed to provide CCP sessions. Licensed staff are not allowed to provide CCP sessions.

Training

1. How many hours is training?

    a. The Just in Time training is 95 minutes. FEMA/SAMHSA trainers are creating a virtual core content training. Normally, the core content training is provided over two and one-half days and is in-person. Our federal partners, however, are developing a more streamlined virtual training program. There are additional training opportunities provided online, including management training and training for data entry. CalMHSA will provided additional trainings, as needed. All staff time attending training sessions is paid under the grant.

2. Where may we access required trainings Just in Time Sections 1-4, Core Contents, etc.?

    a. The Just in Time virtual training is online. The Core Content, RSP Mid-Program and Anniversary, and RSP Phasedown trainings will be provided virtually by a FEMA trainer in February and March, and a recording of these sessions will be made available for CCP staff to access online. See the Crisis Counseling Assistance and Training Program (CCP) Toolkit for more training materials.

3. Is the training expected to be completed prior to application or after grant is awarded?

    a. The trainings are to be provided after the grant is awarded.

4. How long is the pre-services training period?

    a. There is no defined pre-services training period. CalMHSA shall provide additional information to awardees on the recommended trainings to be completed.

5. Is there room for a small portion for a Clinical Consultant? To review cases that may need further referrals.

    a. Grant funds are not provided for a clinical consultant, but the program manager and/or administrator may serve this function.

6. Is the training expected to be completed prior to application or after grant is awarded?

    a. Training would be begin after the grant is awarded and staff are paid to complete the trainings.

35. Does employment onboarding and training for peers need to be completed prior to the 14-day timeframe from contract execution? While we already employ some, we would need to add to the team.

    a. Trainings are allowable costs and will occur after the contract is executed.

36. Each organization will identify a CCP Lead. Will the CCP Lead go through a group online training and then teach the training to other CCP's at their organization, or is each CCP required to complete the online training individually?

    a. Each CCP is required to complete the trainings individually.

<u>Referrals to Counselors</u>

1. How will we get referrals?

    a. The CalMHSA CCP is part of CalHOPE, California's response to the Covid-19 pandemic. Funded by the Federal Emergency Management Agency, FEMA, CalHOPE includes a media campaign, a new statewide warm line, and a schools' component, among other components. CalMHSA is working with its federal, state and local partners to coordinate the media campaign and referrals from the warm line. In addition, CalMHSA is creating a web-based platform for counselors to use to provide chat services that will be included in the media materials. The chat platform will match Californians with a counselor familiar with their target population, if so requested.

2. Would the clients purely be referred to us, or would they be coming from our community as well?

    a. Both. Question 5 of the RFP also asks for your outreach strategies.

3. Referrals come from CalHOPE warm line and outreach that we do on our own also?

    a. Yes, as well as the CalHOPE media campaign and the state and local CalHOPE partners.

4. Will we be able to reach out to people we serve, or do we not collect personal information on the crisis calls?

    a. Personal information is not collected, however, training will be provided on when to refer people to outside resources, including to county behavioral health programs.

5. Does the contract cover our existing client base as well as new clients obtained through outreach efforts?

    a. Contractors may provide services to their existing client base in addition to others referred to them. Counseling services are limited to six sessions per person, with a session defined as being more than 15 minutes in length.

6. What are the policies and procedures around doing risk assessments for suicidal/homicidal clients?

    a. Policies and procedures will be provided to selected organizations.

Administration of Program

1. What is the start date of the contract?

    a.   Anticipated start date is early February 2021.

2. Is there a units of service deliverable that agencies should keep in mind?

    a. No, units of service deliverable is not how CCP is structured.

3. How is the billing processed? Monthly? Is there a portal?

    a. Yes, billing is processed monthly. Selected contractors will receive instructions from CalMHSA on submission of invoices.

4. What are the administrative requirements?

    a. There are not specific administrative requirements beyond ensuring CCP sessions are implemented successfully.

5. is there a max time for session?

    a. 60 minutes.

6. How are outcomes reported?

    a. SAMHSA has an online data platform that each CCP provider will have access to and invoices will not be paid until all data has been entered into the online platform.

7. Do we have to do groups?

    a. No.

8. Can selected providers subcontract?

    a. No.

9. Do we have to use the CalMHSA platform for video-conferencing? We have been using a HIPPA compliant version of Zoom at our clinic for many years very successfully and would prefer to continue to do so if we were awarded.

    a. The CalMHSA platform will be chat based and will not have a video conference option/configuration.

10. In question #4 what is your CalMHSA web-based platform and where can I view it?

    a. The web-based platform will be a chat platform and is not available at this time.

11. What is the expectation of the counselor/peer to connect participants to local resources; and how is that coordinated with various county systems?

    a. The expectation is that CCP counselors are able to refer CCP recipients to local resources.

12. What is the expectation for serving individuals with accessibility and functionality challenges? What is considered a reasonable accommodation?

a. CalMHSA will hire two (2) accessibility and functionality specialists that will support CCP providers in meeting requirements and accommodations.

13. Is there time for hiring?

    a. Selected organizations will have time to hire but it should not greatly impede your ability to complete the required trainings and begin providing CCP sessions as soon as possible due to the time limited nature of the funding stream.

14. What are the goals/outcomes expected of the awardees?

    a. Awardees will be required to enter data into SAMHSA's online data platform. The other expected outcomes are outlined in the RFP.

15. Are we tracking the number of contacts/persons served/calls made/referrals made?

    a. Awardees will be required to enter data into SAMHSA's online data platform which includes contacts, persons served, and referrals made.

16. Are we allowed to serve the target populations over the weekend and afterhours?

    a. Yes, but overtime or holiday pay is not an allowable expense.

17. Must we as the contractor have a comprehensive roster of available insurance plans and coverage?

    a. No.

18. Should we schedule our CCP staff to be on call during certain predetermined or recommended hours? What is the expected demand for CCP support based on the rate of warm hand offs and peer line referrals thus far?

    a. Coverage will be discussed during negotiation.

    b. COVID-19 CCP has not yet been implemented and therefore rates for warm hand offs and referrals has not yet been determined. Selected contractors will have monthly calls with CalMHSA to discuss CCP implementation and identify targets.

19. Is there a time limit per session, i.e. 15,20,30,60 mins? Is there a time frame in which the 6 sessions must be completed by the individual seeking support? Is there a limit to how many individuals our CCP staff can support?

    a. CCP sessions can be between 15 and 60 minutes.

    b. There is not a time frame for the 6 sessions, beyond the contract terms.

    c. There is not a limit.

20. Does an agency get paid for staff that are allocated to the program or is the pay based on the number of services provided - for example, if we have an Administrative Lead assigned to the program but they do not get any calls, do we still get paid for their time?

a. The agency will get paid for staff that are allocated to the program. However, if the agency is reporting a low number of CCP sessions then CalMHSA may discuss amending the contract after implementing other solutions to increase CCP session volume.

21. I would like to know more about outcome reporting - how will # of services provided be tracked. What happens if services anticipated and those actually provided do not match up, but we have the staff hired to do this task?

    a. Awardees will be required to enter data into SAMHSA's online data platform which includes contacts, persons served, and referrals made.

    b. COVID-19 CCP has not yet been implemented. Selected contractors will have monthly calls with CalMHSA to discuss CCP implementation and identify targets.

22. Can we provide crisis counseling to family members of adults?

    a. Yes.

23. Can we use the standard hourly rate in the RFP to cover a percentage of a salaried employee for time spent on this project?

    a. The hourly rate is to pay for the FTEs providing the CCP sessions.

24. Are there specific deliverables for the outreach component of service on this project?

    a. No, but outreach will be discussed during the selected contractors regularly scheduled monthly calls with CalMHSA.

25. Are there specific deliverables that must be met for a minimum number of calls/live chats in any given period of time, or minimum units of service delivered?

    a. There is not a pre-determined minimum of calls/live chats. Selected contractors will have monthly calls with CalMHSA to discuss CCP implementation and identify targets.

26. Are Counselors required to fill out the participant-feedback-form-exp-07312022 for each encounter, if not for what percentage of encounters?

    a. No, counselors are not required to fill out participant feedback forms for each encounter. SAMHSA will inform us of when those forms to be collected.

27. Does Each Interaction or encounters need a participant survey?

    a. No, counselors are not required to fill out participant feedback forms for each encounter. SAMHSA will inform us of when those forms to be collected.

28. Is it possible to start the work 14 days after award with internal FTEs and then hire additional FTEs in the first 30 days?

    a. Yes.

29. Can administrative staff who support the work of the project be charged to the grant? For example, can the accounting staff who completes payroll be charged to the grant? Are there any administrative roles that cannot be charged to the grant?

    a. Administrative staff may be included in the award depending on the selected contractors' FTE award allocation.

30. What are the operating costs and at which rate can be billed as part of this project?

    a. See response to questions 5 and 9 under *Funding and Budget* section above.

31. Will providers be able to bill an administrative rate as is typical when providing mental health services through a contract with a government entity? If yes, what will that rate be?

    a. The approved hourly rate is $23.63 and is non-negotiable.

32. What are the specific monthly data and reporting requirements we are required to enter in order for our invoices to be paid?

    a. SAMHSA has an online data platform that each CCP provider will have access to and invoices will not be paid until all data has been entered into the online platform.

33. Will our agency be paid per client we see and enter data on? Or are we paid 1 monthly invoice amount for the total cost of the program, no matter the number of clients we see/interface with?

    a. The agency will get paid for staff that are allocated to the program. However, if the agency is reporting a low number of CCP sessions, CalMHSA will initiate discussion in providing solutions for increasing CCP session volume, which may require a contract amendment.

34. Are their any scope of work contract deliverables for expected total number of clients served? Are there any other data outcomes we are expected to track within our own organization?

    a. SAMHSA has an online data platform that each CCP provider will have access to and invoices will not be paid until all data has been entered into the online platform.

35. What are the budget cost caps for operations costs and administrative personnel costs (for example, the manager FTE, fiscal support staff FTE, etc.)?

    a. FEMA has specified the hourly rate for all subcontracted services to $23.63 plus 20% for fringe benefits. See related questions in *Funding and Budget* section above.

36. What is the duration of the crisis counseling program? It says they would have hired hundreds of peer counselors by august, but what happens after August?

    a. The funding stream is time limited and will end August 8, 2021. Selected contractors will not receive additional funding after August 8, 2021 and will be responsible for any personnel action after the funding ends.

37. Are we limited to billing for the 6 sessions of counseling assistance services, or can time spent providing outreach and engagement be included? If outreach and engagement are included, is there a maximum time allowed?

    a. Individuals may receive up to 6 CCP sessions. The agency will get paid for staff that are allocated to the program which includes some outreach and engagement. However, if the agency is reporting a low number of CCP sessions then CalMHSA may discuss amending the contract after implementing other solutions to increase CCP session volume. The primary goal of the funding is to provide CCP sessions – some outreach and engagement will be allowed but should not be the majority of the time spent by CCP providers.

38. Are we required to document outreach? If so on what forms, and is that part of the role description for the CCP?

    a. Yes, reporting on outreach is required by FEMA. See CCP Data Forms for the required forms and trainings. The outreach information is required on the weekly tally sheet.

39. Is there a restriction to the 20% fringe benefit? i.e. If an Agency were able to operate within the reimbursable rate structure, but their fringe benefits were higher than 20%, would the additional fringe benefit costs be allowable?

    a. The 20% fringe benefit cost is the allowable cost.

40. Are all aspects of this service delivery model reimbursed at the $23.63/hour rate? i.e. Is the Program Manager reimbursed at the same rate as the Crisis Counselor?

    a. Yes.

41. #6 states "The hourly rate for CCP Administrative and Crisis Counselor is $23.63 an hour with fringe benefits at 20%" - What is considered CCP Administrative time?

    a. Administrative time includes activities that directly support the selected contractors' implementation of CCP including all reporting requirements.

42. Are there any restrictions to what can be covered by the rate? i.e. Is Administrative Overhead an allowable cost?

    a. Administrative time includes activities that directly support the selected contractors' implementation of CCP including all reporting requirements.

43. Is the 20% fringe benefit in addition to the $23.63/hour rate, or is it included in the rate of $23.63?

    a. Yes, the 20% is in addition to the $23.63/hour rate.

44. Is this a 100% remote service? If so, what is the expectation of the counselor/peer to connect participants to local resources and how is that coordinated with various county systems?

    a. Remote service is encouraged to mitigate exposure to COVID-19. In person sessions may be an option depending on local and state guidelines/criteria.

    b. The expectation is that CCP counselors are able to refer CCP recipients to local resources.

<u>Other</u>

1. Is there a sustainability plan for the future after the eight months end? We are not sure how we could pay unpaid crisis line counselors for this term and then expect them to return to their unpaid status.

    a. There is not a sustainability plan as the funds are time limited.

2. Who provides technological support for the program?

    a. CalMHSA will identify technology support options for selected contractors, but selected contractors should be able to address basic technology support needs.

3. Are the referrals only coming from one Cal Hope warm line in SF?

    a. The CalMHSA CCP is part of CalHOPE, California's response to the Covid-19 pandemic. Funded by the Federal Emergency Management Agency, FEMA, CalHOPE includes a media campaign, a new statewide warm line, and a schools' component, among other components. CalMHSA is working with its federal, state and local partners to coordinate the media campaign and referrals from the warm line.

4. Can we refer current clientele to the CCPs for sessions?

    a. Yes.

5. Will a web-based counseling platform be available for crisis counselors to use with clients? Do they need to use this platform or if we have our own tele-health platforms, i.e. zoom accounts, may we use those?

    a. Yes, the web based platform will be available for crisis counselors. You do not need your own tele-health platform.

6. My questions regarding the CCP is whether Full Time Equivalents can also have additional full-time or part-time jobs in non-profit work?

    a. Overtime and holiday pay are not allowable CCP expenses.

      b. FTEs should be determined for CCP only and independent of other duties assigned.

7. Would there be money available to pay these practitioners or can we only offer the $23.63 to all those offering services?

      a. The $23.63 is the hourly rate and is not a negotiable rate. This rate is what was approved by the federal funders.

8. Additionally, our organization currently provides peer-led support groups and not individual counseling. Do we qualify for a potential grant?

      a. Organizations that meet the requirements in the RFP are eligible to apply. Peer-led support groups are similar to the CCP Group Sessions.

9. How often would these support groups be expected to meet as part of your program?

      a. CCP Sessions are limited to 6 sessions per person during the CCP time frame which ends August 8, 2021.

10. In Question #4, what is meant by "accessibility and functional needs challenges"? Does this refer to online accessibility for persons with disabilities (such as visual disabilities), connectivity challenges such as lack of access to internet or computer equipment, or both?

      a. "Accessibility and functional needs challenges" refers to former and does not refer to connectivity challenges (lack of access to internet or computer equipment).

11. For Data reporting, it sounds like we enter data into SAMHSA portal and that is it. We are paid on monthly basis IF data is entered into the portal. Can we see sample portal entry?

      a. The FEMA/SAMHSA data forms and trainings can be found [here.](#) For example, see [the individual and family encounter log](#).

12. Are you going to reactivate this program for other disasters such as fires, etc. and how this would work?

      a. We anticipate additional CCP that are specific to recent fires in California. The funding is accessible to states after the federal government declares a disaster and states are successful in submitting an application.

13. Is it a requirement to use to CalMHSA platform for sessions, or may we opt to use our own and report using the required forms?

      a. The use of the CalMHSA platform is not required.

14. Can we use our own HIPPA compliant teleconferencing platform or do we have to use the one provided by CalMHSA?

      a. The use of the CalMHSA platform is not required.

15. We own and operate SUD treatment facilities and sober living homes. I want to confirm that our involvement with CalMHSA providing services under this CCP which may result in our existing businesses receiving clients does not constitute a conflict of interest.

    a. You may participate as long as you clearly separate staff who are working on the CCP versus your other programs. Staff funded with CCP funds may only work on the CCP for the hours funded.

16. I tried to log in to view the virtual Bidders' Conference this afternoon and was met with a message that the Zoom session had already reached its maximum of 100 participants. Will there be another Bidders' Conference or an available recording of today's presentation?

    a. Bidders conference documents can be downloaded under "files" and has been posted to the CalMHSA website. https://www.calmhsa.org/announcements/