

Comprehensive Behavioral Health Prevention and Early Intervention

Amendment 2 Written Responses to Inquiries

Question 1.

Is serving as the Regional Suicide Prevention Coalition Chair optional for applicants? Considering that the Anchorage recipient is not eligible for the additional \$50k for suicide prevention will the Anchorage grantee not be required to serve as Chair of the Anchorage Suicide Prevention Coalition?

Pg. 4 "All applicants will be expected to support a Regional Suicide Prevention Coalition (RSPC). Applicants may also elect to be the lead regional coalition. These applicants will coordinate with new or existing suicide community task groups, coalitions, or committees within the region. Through this RFP, DBH will seek up to seven (7) Regional Suicide Prevention Coordinators to support region specific suicide prevention. Lead applicants will have the opportunity to apply for funding to support this regional suicide prevention infrastructure and will act as regional chairs on a statewide coalition, the Alaska Suicide Prevention Coalition (ASPC). Only one agency in each region will be selected as lead agency for the ASPC. The seven regions are identified as Northern, Interior (includes Fairbanks), Southeast (includes Juneau), Mat-Su, Anchorage, Southwest, and Western (see 1.02 and 1.06 below). Both Anchorage and the Statewide Youth coalitions are not eligible for this additional funding."

Pg. 15 "Group B applicants applying to support the Regional Suicide Prevention Coalition Chair must include a position description and defined staff support (recommended 0.5 FTE) dedicated to support the regional Suicide Prevention Coordinator role. (see description for Regional Suicide Prevention Coordinator duties below)."

Answer 1.

The anchorage applicant is required to lead the regional suicide prevention chair. The funding that is necessary was factored into the total funding allocated for the region and including the existing suicide prevention capacity that currently exists in and for the region.

Question 2.

What is the rationale for including the Youth 360 requirement in the evaluation criteria? What if you have already engaged Youth 360 / Planet Youth and have developed a youth program on the model and are beyond "applicant indicates interest in initiating the Youth 360 process?" The RFP is unclear because Youth 360 is only mentioned one time in the solicitation under 4.02 under question #7 under evaluation criteria h: "The applicant indicates interest in initiating the Youth 360 (Icelandic Model-Planet Youth) process in FY2024 and includes a budget line item for this." There is no explanation for the requirement in the body of the RFP. It can be read to assume that a community-based coalition focused on health issues related to seniors/elders need to express interest in Youth 360 to qualify for funding or at least not be penalized.

Answer 2.

Youth 360 or Planet Youth has been determined to be a potentially effective model for Alaska. The intent of the RFP is the assess interest and potential readiness to implement this model in communities in Alaska. Inclusion of Youth 360 is optional and can be built into the strategic plan with existing capacity or as a proposed plan for future capacity building.

Question 3.

What infrastructure already exists tied to Regional Suicide Prevention Coalitions (RSPC) and the need for Regional Suicide Prevention Coordinators? Who are the contacts to find out more about this process outside of what is described in the RFP? Is the Alaska Statewide Suicide Prevention Council and other suicide prevention infrastructure partners in Alaska aware of the process described in the RFP? It is not clear whether these structures already exist or if this RFP/grant is the place where those regional structures are being developed. When I look up the phrase used on p. 4 of the RFP, "Alaska Suicide Prevention Coalition" on the Internet, I do not get any results. What is the public process and data used to initiate this requirement within this RFP?

Answer 3.

The intent of the regional and statewide suicide prevention coalition work is to build community capacity from where the current capacity is at this time. Applicants are asked to summarize current known capacity and any proposed intent to enhance this. Those coalitions that determine suicide prevention is a target priority are encouraged to elect to serve as regional chairs. Applicants that are unfamiliar with the local or regional capacity in this area are encouraged to operate as supporting members of the regional coalition.

Question 4.

We're interested to know if we will need to write any ARPA fund overage into the budget for this grant, or if we will just do another grant amendment after Q4 report and FY24 grant awards have gone out.

Answer 4.

Funding for this solicitation is identified in section 1.06. Please plan your response based on the funding identified in this solicitation only.

Question 5.

What is the level of participation with statewide collations and collaboratives "expected" through this RFP? Alaska Wellness Coalition, the Shared Risk & Protective Factors Workgroup, the Alaska Alcohol Misuse Alliance, and Alaska Suicide Prevention Coalition are mentioned a few times in the RFP with phrases that include "expected to participate as support partners (p. 4)," "commit to participation in regional efforts and maintain active involvement with the statewide efforts (p. 6), "Successful applications will be expected to: 1. Participate in the statewide Alaska Wellness Coalition ... Suicide Prevention Community of Practice (p. 7)." Is "expectation" distinct from "required" in the sense of it is expected unless there is a rationale provided about why the expectation may be outside the scope of the community-based/regional wellness coalition? The groups with which a given coalition must coordinate appears to be more than significant. For a Group A applicant, which could be local communities/regions in remote parts of Alaska, it is not clear how it could be possible with the funding level described.

Answer 5.

All participation in statewide networks listed in the RFP is highly encouraged but not mandatory. Because these networks support the work of wellness coalitions, the participation and feedback from the coalitions is mutually beneficial.

Question 6.

Will the Department consider changing the term from “must” to “should” or “it is expected” on p. 18 “3. Proposals prioritizing school-age youth must obtain an MOA to work with local schools to utilize the Youth Risk Behavior Survey (YRBS[]) and/or the School Climate and Connectedness Survey (SCCS)?” By using the term “must” any coalition with a school district not willing to participate in those surveys or unwilling to enter into an MOA, which is difficult with a school district in the best of times, much less during the pandemic, would not appear to qualify to apply. “Must” is a make or break term to apply in this case. The term “must” also does not account for small communities/regions where getting YRBS and other data from larger public health surveillance systems which never have data available to them specifically. There have been a number of discussions with DBH and at DBH sponsored trainings about how small communities can develop their own data that are not reflected in this requirement.

Answer 6.

The term must is defined as expected. Since some communities may not be able to achieve an agreement with local school boards, it is reasonable that an explanation for why an agreement was unfeasible would be provided as an alternative.

Question 7.

Is a community of practice, like the Shared Risk & Protective Factors Workgroup, outside the scope of this RFP? They are a group of statewide partners doing strong work in data development and advocacy in support of public health outcomes. Would they at least qualify under Group A if not another available group in this RFP?

Answer 7.

No. The only non-geographic applicants allowed include the Statewide Alcohol Misuse prevention Alliance and the statewide community of youth coalition.

Question 8.

Regarding 4.04(3) - Requested attachment is a "coalition member list that includes a member activity summary" - what does a coalition member Activity Summary look like? What are you wanting us to provide documentation of here?

Answer 8.

Coalition activity summary should include at minimum the Strategic Prevention Framework step expertise area of individual members, the resources they contribute to the coalition, and any official role or capacity in which they serve.

Question 9.

Regarding 4.04(3) - In the Evaluation/Review Criteria section G, it references "The applicant has uploaded evidence of annual updates to a strategic plan, logic model, and timeline," but in the beginning questions/statement part of the 4.04-3 Narrative it only requests we upload a coalition members list and activity report, do we need to include the Strategic Plan, logic model, and timeline as well or is there a different upload field for these Documents?

Answer 9.

The applicant does not need to upload all listed documents in their entirety for this section. Applicants should include a summary of what documents have been completed, when and how these are available.

Question 10.

Regarding 4.06(3) - This section requests we upload a "single-file scan documenting existing partnerships and collaborations specific to the proposed project" What are you looking for here? We are already providing MOAs and a Coalition Members list in other parts of the application, what form of documentation here are you looking for that is different from them?

Answer 10.

This item requests a summary of community and other partnerships that are relevant and important to the work of the wellness coalition. This may include partnerships that are other than direct coalition members such as statewide and out of state partners that contribute support and resources.