



**Frequently Asked Questions (FAQs)**  
**RFA No. RM0 SBH072525\_1B**  
**August 8, 2025**

Please contact Dr. Charneta Scott at [Charneta.scott@dc.gov](mailto:Charneta.scott@dc.gov) if you should have any further questions.

**1. Q: We would put the school strengthening plan for each individual school, is that correct? And is it ok that it was developed the previous year?**

**Answer:** It is allowable to submit completed School Strengthening Work Plans from SY 2024-2025 or a completed Work Plan (Attachment D) template from RFA RM0072525. When using the School Strengthening Work Plan instead of the RFA Attachment D, use the following guidance: *If the CBO is applying for funding for less than three (3) schools, the CBO shall include in the RFA application package a School Strengthening Work Plan for each school. If the CBO is applying for funding for three (3) or more schools, the CBO shall submit three (3) School Strengthening Work Plans in the RFA application package.*

**2. Q: Will we get the budget templates?**

**Answer:** Yes, the budget template for both competitions is available on the DBH website at <https://dbh.dc.gov/page/dbh-request-applications> under the link for Application Package.

**3. Q: What if we have more than 20 positions?**

**Answer:** If the CBO has more than 20 staff, the CBO shall add a Word document to capture the additional information.

**4. Q: Are there expectations around minimum salary amounts for clinicians?**

**Answer:** As indicated on page 10 of the RFA, the Core funding for a full-time licensed clinician is \$120,000. DBH is not requiring a minimum salary amount.

**5. Q: Will DBH be notifying DCPS and the Charter Schools of these changes?**

**Answer:** DBH will notify DCPS and Charter Schools regarding the fiscal constraints and essential restructuring of the DBH School Behavioral Health Program.

**6. Q: How much time do we have to leave the school if we are unable to fill the position in 90 days? Are we responsible in telling the school that we are no longer able to partner?**

**Answer:** As stated in the CBO RFA's Overview section on page 10 and the Scope of Services section on page 15, "If a clinician resigns on October 2, 2025, or after, the CBO will have 90 days to hire. If a clinician is not hired within 90 days, funds will be returned to DBH. DBH will provide Talking Points for CBOs to use in discussions with school leadership and school team leadership in cases where there was a clinician resignation on or after October 2, 2025, and hiring updates are provided by the CBO to school leadership and School Behavioral Health Coordinator.

**7. Q: I apologize for any repetition...if we only work with DCPS, we don't have to submit the letters of agreement?**

**Answer:** If the CBO is applying for funding in only DCPS partnership schools, the CBO is to submit in the CBO Application Package the DCPS Memorandum of Agreement (MOA) and Appendix of the partnership schools.

**8. Q: Given the timing - school year starts shortly (for some schools in the next week or two) and the RFA award (October 1) - are CBO clinicians expected to still start at the beginning of the school year? How do CBOs know which schools they will have (some CBOs were partnered without a hired clinician)? How will communication come to schools about the CBO**

**clinicians who will be in their schools and how will DBH communicate if a CBO is no longer partnered with that school? Is the hiring freeze still in place? In general, How should CBOs navigate staffing given timing? And how will communication happen when there are changes due to new RFA?**

**Answer:** The beginning of the school year is within the current FY25 grant funding for the CBO. Clinicians are expected to start in the assigned school(s) at the beginning of the school year. CBOs know which schools were without a hired clinician as of July 7, 2025, and where the CBO proposes to place new hires. The DBH direction for DBH CBO grantees to pause hiring remains in effect. DBH is currently working on Communication to School Leaders at DCPS and Charter Schools regarding the fiscal constraints and essential restructuring of the DBH School Behavioral Health Program. Talking Points for CBOs are also in development.

**9. Q: Can we add an attachment if the justification is too large for the cell?**

**Answer:** Yes, the CBO is to use a Word document to add additional information.

**10. Q: Do we need to provide an MOA for schools that have a vacancy?**

**Answer:** No Memorandum of Agreement (MOA) needs to be submitted for a school where a hired clinician will not be assigned.

**11. Q: Are the SBMH therapists expected to address students in crisis who are not on their caseload?**

**Answer:** Yes, as a member of the School Behavioral Health Team, SBH clinicians are expected to address students in crisis who are not on the SBH clinician's caseload.

**12. Q: Does this RFA provide for supervisors salary?**

**Answer:** It is allowable to charge funds for the clinician's supervision to the Core funding for the clinician.

**13. Q: The Indirect section on the budget is not populating or allowing input, what should I do?**

**Answer:** In the Indirect section on the budget, add the percentage the CBO has chosen to use not exceeding 10% in the first box unless the CBO has a current NICRA. The total dollar amount will pull from the third tab automatically. If there is still an issue, contact Supervisory, Fiscal Monitor Tywana Reed at [tywana.reed@dc.gov](mailto:tywana.reed@dc.gov) for assistance.

**14. Q: The second tab is not unlocked; can you send a budget Form that is unlocked that I may add up to 30 staff.**

**Answer:** The second tab of the budget is not locked, please ensure that the indicator at the top of the page is clicked to enable editing. Also, if the CBO has more than 20 staff, the CBO shall add a Word document to capture the additional information.

**15. Q: Is there any chance that the deadline can be extended? We only have 5 business days to integrate new information based on these updates & clarifications**

**Answer:** The deadline will not be extended. This is in service of the need to have a Purchase Order as of October 1, 2025.

**16. Q: Do we need to attach a copy of the MOA?**

**Answer:** Yes, CBOs are to attach copies of the MOAs for schools where a CBO clinician will be assigned.

**17. Q: Do you have a formula recommendation for what to put as Level of Effort since clinicians are expected to bill and we do not want to double-dip with Medicaid?**

**Answer:** Level of effort should be calculated using the following formula  
Hourly rate x Number of hours worked.

Please note that School Behavioral Health clinicians are not to provide services identified on a student's IEP nor 504 Plan.

**18. Q: Is the IDCRC 10% or 15%**

**Answer:** Grants funded with local dollars cannot exceed 10% IDCRC unless the CBO has a current Negotiated Indirect Cost Rate Agreement (NICRA).

**19. Q: . Are we required to complete the second tab “Fiscal Worksheet MTDC” on the Budget Justification attachment F? \*(note: That tab is locked)**

**Answer:** No, the third tab populates based on the information provided from the first two tabs.

**20. Q: On the Budget Justification attachment F, if we selected 10% for Indirect cost category, do we also need to list the items that fall into that category? If so, where do we list them. (examples: Administrative personnel, accounting)**

**Answer:** The items are not required to be listed on the budget however when sending in the CBO’s monthly expenditure report there will be an additional form included to capture these costs.

**21. Q: Do we need to include an estimate of consumer billables under section H, “Program income” as a funding source on the Budget Justification attachment F?**

**Answer:** This section is not applicable to this grant.

**22. Q: In the contract services section in the budget, is there a \$25,000 cap per vendor?**

**Answer:** There is no 25,000 cap per vendor. As indicated on page 10 of the RFA, the Core funding for a full-time licensed clinician is \$120,000. However, please note that the MTDC (Modified Total Direct Cost) calculation (third page) includes only the first \$25,000 of each subcontract.

**23. Q: Regarding the workplan/Attachment D, if an applicant is applying to provide services at multiple schools, does a separate workplan need to be submitted for each school, or can the workplan information be combined into one workplan for the application?**

**Answer:** It is allowable to submit completed School Strengthening Work Plans from SY 2024-2025 or a completed Work Plan (Attachment D) template from RFA RM0072525. When using the Work Plan (Attachment D), all school information is combined into one Work Plan. When using the School Strengthening Work Plan instead of the RFA Attachment D, use the following guidance: *If the CBO is applying for funding for less than three (3) schools, the*

*CBO shall include in the RFA application package a School Strengthening Work Plan for each school. If the CBO is applying for funding for three (3) or more schools, the CBO shall submit three (3) School Strengthening Work Plans in the RFA application package.*

**24. Q: What is the expectation of the funding amount for each school, per year?**

**Answer:** Only the Core funding for FY26 is known and it is \$120,000 per full-time clinician.

**25. Q: *Since the organizational chart, resumes, and licenses cannot fit within the narrative's 4-page limit, how should those be submitted? Should they be attached to the Staffing Plan?***

**Answer:** The information may be attached to the Staffing Plan and included in the file organization provided on page 27 of the Pilot 1B Continued RFA and on pages 25-26 of the CBO RFA.

**26. Q: Regarding the MCO and insurance contracts, can a simple list of active contracts be submitted? If so, how should this be submitted (e.g. as one of the attachments, and if so, which one)?**

**Answer:** You may include the copies of the contracts in File #3 of the application package.

**27. Q: Attachment A, Notice of Eligibility and Experience Requirements: While this attachment is available [online](#) and provides text boxes for responses, there is not enough room for more than one to two sentences of narrative responses, and we anticipate needing more space. Since the instructions on the form indicate that supporting documents can be included, can applicants simply include their responses to the questions in a separate document, as an attachment to Attachment A?**

**Answer:** You may use a Word document for any additional information.

**28. Q: Based on the instructions in the RFA, it appears that applicants should send five separate emails with the files that are specified in the RFA attached to each email; is this correct?**

Also, while Attachment 2, the Assurances, Certifications, and Disclosures form, is available [online](#) as a fillable pdf, Attachments 3-9 are not, and appear to only be available in the RFA itself. In order to submit them, should we extract them from the RFA, or will they be posted online?

**Note:** there also appears to be issues with the numbering of the attachments in the RFA for Attachment 6; see p. 97, Attachment 6, Special Terms of Award Funding, and then p. 98, the DC Tax Certification document is also labeled Attachment 6.

**Answer:** It is correct to use 5 separate files. Though allowable to submit one large file, there is caution that large emails may bounce back and not reach the Grants email.

The Fillable Certifications and Assurances on the DBH website are working.

**29. What are the data and reporting requirements?**

**Answer:** The following are provided on pages 15-16 of the Pilot 1B Continued RFA and on page 16 of the CBO RFA:

Grantees will be required to collect, track, and report information on all grant activities, services provided, and individuals served.

- A.** Reporting Frequency ranges from daily to monthly depending on the data being reported and prescribed by DBH. Grantee shall report on grant activities utilizing the form/format prescribed by DBH and within the timeframe prescribed by DBH for the data being reported.
- B.** Grantees will be required to collect, track, and report information on all grant activities, services provided, and individuals served.
  - I.** Daily reporting includes clinician service activity which is reported through the SBHP Activity Tracker.
  - II.** Weekly Staffing reports shall consist of administrative data including hiring date of clinician(s), clinician resignation dates, school

assignments, level of licensure , date of clinician placement in school, and schools pending clinician hire. The Weekly Staffing Report shall include the clinicians' email and phone number and assigned supervisor, supervisors credentials and email address, and noting if the clinician speaks another language other than English. The Weekly Staffing reports are due to DBH each Monday by 12:00 PM.

**III.** Supervisors' Monthly reports include Supervisor Activity Logs outlining supervisory activities within the provided supervision framework and meetings with school leadership. These activity logs are entered in the SBHP Activity Tracker and must be entered by the 15th day of the following month.

**IV.** Monthly Expenditure reports along with supporting documentation for allowable costs, are to be submitted to the Monitor by the 15th of the month.

**V.** When a staffing change occurs, a personnel amendment form must be submitted to the Monitor immediately.

**VI.** Monthly report of billing/claims submitted for reimbursement for School Behavioral Health Services are to be submitted to the Monitor by the 15th of the month.

**VII.** The Grantee shall adhere to the DBH Policy 480.1A, Reporting a Major Unusual Incident (MUI) and an Unusual Incident (UI), and any succeeding policy, for reporting major unusual incidents and unusual incidents to DBH. Clinicians and supervisors will be trained in how to access and complete required reporting in the DBH E-Risk system. Please note that for each suicidal/homicidal risk assessment completed, an MUI report is required.

**VIII.** Clinicians shall complete an initial Child and Adolescent Functional Assessment Scale (CAFAS)/Preschool and Early Childhood Functional Assessment Scale (PECFAS) outcome tool for each child or youth on the treatment caseload. Follow-up assessments must be completed every 90 days and at discharge.