



Additional Frequently Asked Questions for the RCHN CHF Health Center Entry-Level Workforce Recruitment and Retention Models RFP 2012

****FAQs # 1-22, compiled prior to 9/2012, can be found at the following website:**

<http://www.rchnfoundation.org/images/FE/chain207siteType8/site176/client/Workforce%20FAQs%20as%20of%209-14-12%20%282%29.pdf>

Additional FAQs submitted 9/2012 or after:

Question 23: Can you provide information on the programs that were funded in the first round of this workforce development effort?

Answer 23: Yes. RCHN CHF funded 5 projects in 2011. The grantees included:

- Aaron E. Henry Community Health Services Center (Clarksdale, Mississippi) - \$199,948;
- Charles B. Wang Community Health Center (New York, New York) - \$200,000;
- Penobscot Community Health Care (Bangor, Maine) - \$199,952;
- Seattle Indian Health Board (Seattle, Washington) - \$148,749;
- Wai'anae Coast Comprehensive Health Center (Wai'anae, Hawaii) - \$199,955.

Press releases describing each of the projects are available at:

<http://www.rchnfoundation.org/main.cfm?actionId=globalShowStaticContent&screenKey=cmpNews&show=press&s=rchn>.

Question 24: My health center applied in the 2011 round of the workforce development grants and did not receive funding. Can you please provide us with a critique of our application?

Answer 24: The competition for funding under RCHN CHF's 2011 entry level workforce initiatives RFP was quite rigorous. The Foundation reviewed over 125 proposals, totaling nearly \$225,000,000 in funding requests. We established a formal, criteria-driven review process to evaluate each submission, which included evaluation of the proposals by internal and external reviewers. As noted in the funding announcement, the evaluation criteria included alignment with the Foundation's funding objectives, community need, documented capability to implement and sustain the project, and potential impact. While we value every submitted proposal, given the large number of applications received, RCHN CHF is unable to provide individual application reviews.

- Question 25: Would an application be considered competitive if the program proposed dealt with training and retention of entry level workers who were placed in front line supervisory positions due to organizational lay-offs?
- Answer 25: Proposals will be considered competitive if they include all of the Application Requirements listed in Section VII of the RFP (pp. 5-6), meet all of the criteria listed in the RFP in Section IX (p. 7) and contain compelling ideas for the types of models listed in Section IV (p. 4) of the RFP. Please note that while supervisory positions are not generally entry level, projects that address the development of career ladders or lattices for entry level workers that may lead to supervisory positions are welcomed.
- Question 26: Do you have any geographical restrictions on your grantees? Our organization is an FQHC, section 330 HRSA grantee, headquartered in XXXX, California, with 5 clinic locations including our corporate offices. Would you entertain a proposal from us considering we are not on the east coast?
- Answer 26: There are no geographical restrictions on these grants. All Federally Qualified Health Centers and Look-Alikes that meet the applicant requirements in the RFP are welcome to apply, irrespective of location. Past grantees included centers in the states of Hawaii, Washington, Mississippi, Maine, and New York. We anticipate receiving proposals from FQHCs across the country again this year, and will consider all complete proposals.
- Question 27: Is there a specific limited grant period, or is it up to the applicant to designate the one-year grant period?
- Answer 27: Yes, there is a specific one-year grant period. As stated in the RFP (p. 7), the Foundation expects to make awards no later than Friday, December 21, 2012. The start date will correspond to the award date. Also see Question/Answer 12 of the FAQs.
- Question 28: Can you please define what is meant by “capital” and “infrastructure needs?” Specifically, we are considering creating entry-level recruitment videos for our website. We would also be accessing other web resources, so we’d like to be clear as to whether they represent capital or infrastructure.
- Answer 28: The RFP is not geared towards capital, facilities, or infrastructure needs (p. 4). The Foundation takes a common sense approach to these terms. Specifically, by capital, we mean financial assets including real estate; by infrastructure, we mean basic facilities, services, and installations necessary for the operational functioning of the organization, such as HIT systems. The development of training or recruitment videos falls outside of these definitions and accordingly would be considered by the Foundation.
- Question 29: Can you define what is meant in the RFP by a “Partnership”? What features would be expected in that working relationship: a formal memorandum of understanding?

- Answer 29: The Foundation takes a common sense approach to the term “partner” (p. 5). We welcome collaborative proposals from FQHCs or Look-Alikes who intend to work together with other entities on a project to further the goals of the project. (By its use of the term “partner,” the Foundations does *not* intend for Identified Partners to be jointly and severally liable as in a legal partnership.) Please note that the Foundation expects that any Identified Partners will submit a letter of support or collaboration as a part of the application (pp. 5-6).
- Question 30: Can two or more FQHCs in a specific region submit a proposal with one of the FQHCs serving as a lead agency and the others receiving a share of the awarded funds for a unified approach to recruit and retain entry level employees?
- Answer 30: Yes. As stated in the RFP, “while the applicant must be a designated FQHC or Look-Alike, the Foundation welcomes collaborative proposals. Applicants may include other entities in the proposed project, such as primary care associations, *other health centers*, or local schools, colleges or universities. Such additional entities would be listed in the application as Identified Partners, not as the applicant.” (p.5). Also see Question/Answer 29 of the FAQs.
- Question 31: Can a Primary Care Association comprised of health centers apply on behalf of the FQHCs (with letters of support)?
- Answer 31: No. Only non-profits that are designated currently as Section 330 FQHCs or Look-Alikes are eligible to apply. PCAs can be Identified Partners in the proposals, but the lead entity must be an eligible entity. Please see Question/Answer 13 from the FAQs compiled prior to 9/2012 and posted as a part of the RFP as well as Question/Answer 29 and 30 above.