



YOR California Application Form

Please save this form and complete it.

Email a copy of the completed form, along with the required attachments—budget worksheet, implementation plan (*implementation grant applicants only*), PDF containing organizational chart and resumes of project director (PD) and other key staff, and memoranda of agreement (MOUs) or letters of intent (LOIs)—to YOR2Application@ahpnet.com.

If applying for an **implementation grant**, please complete all sections. For your reference, each section's point value is included in the application form.

If applying for a **capacity-building only grant**, please see the green boxes at the end of each section for modifications to the instructions and section score values. Respond to all required sections.

For any questions regarding this application and its submission, please email YOR2Application@ahpnet.com.

Section 0: Application Overview		
Overview		
Lead Agency Name		
Project Name		
County/Region Served		
Total Request		
Projected number of unduplicated youths with OUD/StUDs who will receive services through this project (regardless of funding source)		
Abstract: Up to 3,000 characters(300 words) - includes spaces, punctuation and line breaks		
YOR Application Type		
Are you applying for a capacity-building only grant?		
	Yes	No

Section 1: Applicant Information and Qualifications

Lead Agency Contact Information

Street Address	
City, State, ZIP	
Email Address	
Telephone Number	
Website Address	

Lead Agency Authorized Representative

Name (First and Last)	
Title	
Email Address	
Telephone Number	

YOR California Project Director

Name (First and Last)	
Title	
Email Address	
Telephone Number	

Lead Agency Type:

- Government
- Tribal Authority
- Nonprofit Corporation
- Foundation
- Corporation/LLC
- Other: Please specify _____

Subcontractor and Other Key Partner Agencies and Roles (Include MOUs or LOIs)	
1. Subcontractor or Key Partner Agency Name: <hr style="border: 0.5px solid #0056b3;"/>	Role and Contribution to Project - up to 1000 characters (100 words)
Check one:	
Subcontractor	
Other Key Partner	
.....	
MOU or LOI attached	
2. Subcontractor or Key Partner Agency Name: <hr style="border: 0.5px solid #0056b3;"/>	Role and Contribution to Project - up to 1000 characters (100 words)
Check one:	
Subcontractor	
Other Key Partner	
.....	
MOU or LOI attached	
3. Subcontractor or Key Partner Agency Name: <hr style="border: 0.5px solid #0056b3;"/>	Role and Contribution to Project - up to 1000 characters (100 words)
Check one:	
Subcontractor	
Other Key Partner	
.....	
MOU or LOI attached	

Subcontractor and Other Key Partner Agencies and Roles (Include MOUs or LOIs) <i>continued</i>	
4. Subcontractor or Key Partner Agency Name: <hr style="border: 0.5px solid #0056b3;"/>	Role and Contribution to Project - up to 1000 characters (100 words)
Check one:	
Subcontractor	
Other Key Partner	
.....	
MOU or LOI attached	
5. Subcontractor or Key Partner Agency Name: <hr style="border: 0.5px solid #0056b3;"/>	Role and Contribution to Project - up to 1000 characters (100 words)
Check one:	
Subcontractor	
Other Key Partner	
.....	
MOU or LOI attached	
6. Subcontractor or Key Partner Agency Name: <hr style="border: 0.5px solid #0056b3;"/>	Role and Contribution to Project - up to 1000 characters (100 words)
Check one:	
Subcontractor	
Other Key Partner	
.....	
MOU or LOI attached	

Applicant Qualifications Narrative - up to 10,000 characters (1000 words)

1. Please discuss the lead agency and subcontractors' ability to carry out the work of this project, including experience in the following:
 - a. Creating a youth advisory structure
 - b. Working with youth and positive youth development
 - c. Developing a culturally competent youth services network and delivering youth-specific outreach, treatment, and recovery services
 - d. Addressing opioid and stimulant misuse and OUD/StUDs, along with the ability to provide medications for OUD
2. Describe the PD's and key staff's experience and qualifications to implement this program.

Attachments Scored with This Section

Resumes of PD and other key staff are attached. (Three-page maximum per resume preferred.)

Organizational Chart(s) illustrating (a) how YOR California fits within the lead agency and relates to other lead agency programs and (b) the relationships to subcontractors/other key partner agencies, other stakeholders, and the youth advisory group are attached.

MOUs/LOIs from subcontractors and other key partners are attached.

Overall Section Value	20 points
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Capacity-Building Only Grant Applicant Instructions:

Questions 1c and 1d are optional.

Overall Section Value: 30 points

Section 2: Target Population

Geographic Area(s)

Please describe the catchment area this project will serve: up to 200 characters (20 words)

County/counties served:

Age Groups

Check all that apply, but only select populations for whom you are prepared to customize outreach and services.

12–15 years old

16–17 years old

18–20 years old

21–24 years old

Specific Populations of High-Risk Youth

Check all that apply, but only select populations for whom you are prepared to customize outreach and services.

Youth experiencing homelessness

Youth involved in the child welfare/foster care system

Youth involved with the juvenile or criminal justice system

Youth with parents who have a substance use disorder (SUD)

Youth with attention-deficit/hyperactivity disorder (ADHD)

Youth with severe emotional disturbance (SED) or serious mental illness (SMI)

Pregnant and parenting youth

LGBTQI2SA+ youth

Black/African American youth

Indigenous youth

Latino/a youth

Asian/Pacific Islander youth

Youth of color, general

Other: Please specify _____

Target Population and Community Need Narrative - up to 10,000 characters (1000 words)

1. Describe the target population (and any subpopulations) that YOR California will serve, including age, culture, protective and risk factors, language, and health inequities affecting the target population.
2. Provide data to support your understanding of the target population and the community, including racial/cultural considerations.
3. Describe the community assets and resources that can be used to address OUD/StUDs among your target population.
4. Discuss barriers, service gaps, and challenges to OUD/StUD intervention, treatment (including medication-assisted treatment), and recovery outcomes for your target population.

Overall Section Value	15 points
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Capacity-Building Only Grant Applicant Instructions:

Respond to the questions as they specifically relate to the proposed capacity-building project.

Overall Section Value: 25 points

Section 3: Program Milestones

Program Milestones and Implementation Narrative - up to 10,000 characters (1000 words)

1. What lasting impact do you want to make through this project?
2. How will you work with partners to create clear and supportive pathways for youth misusing opioids and/or stimulants to access a full array of services? Include the following in your discussion:
 - a. Adopting and implementing the YOR California key principles
 - b. Overcoming barriers and maximizing engagement, access, retention, and positive outcomes for youth
 - c. Using and expanding telehealth and other technologies (e.g., apps, virtual reality)
 - d. Deploying outreach strategies for your specific age groups and target populations
 - e. Using standards of care, clinical judgement, and evidence-based practices and curricula that are relevant for youth and the target population served
 - f. Integrating positive youth development and youth voice through all aspects of the YOR California program

Attachments Scored with This Section

Complete the initial implementation plan (see Attachment 2).
(Implementation grant applicants only)

Overall Section Value | **35 points**

Capacity-Building Only Grant Applicant Instructions:

Respond to the questions as they specifically relate to the proposed capacity-building project. Narrative questions 2.b–f above are optional. Complete only Parts 1 and 2 (Capacity-Building and Outreach and Education) of the implementation plan.

Overall Section Value: 25 points

Section 4: Management Plan

Organizational Structure and Staffing Narrative - up to 7,500 characters (750 words)

- 1. Staffing:** How will this program be staffed?
Do you need to recruit and hire staff for this project, and if so, how will you do that?
- 2. Organizational Structure:**
 - a. Describe how the lead agency, subcontractors, and partners will work together to meet program goals and objectives.
 - b. How will the lead agency manage subcontractors and other partners?
- 3. Policy Change:** How will you ensure the PD and staff are supported to implement this program and expand access to youth services, even when it requires organizational policy changes?

Quality Assurance, Measurement, and Compliance Narrative - up to 7,500 characters (750 words)

- 1. Compliance:** What experience do your agency, PD, and key staff have demonstrating the ability to meet YOR California, state, and federal financial, data, and compliance requirements?
- 2. Quality Assurance and Outcome Measurement:**
 - a. How will the lead agency monitor and address youth engagement and retention, service network quality, and gaps?
 - b. Do you have experience with the Government Performance and Results Act (GPRA)? If so, please describe.

Overall Section Value

10 points

Capacity-Building Only Grant Applicant Instructions:

Only question 1 in each subsection above is required. The other questions are optional.

Overall Section Value: 10 points

Section 5: Budget and Sustainability

Budget and Justification

Submit a completed budget and provide a budget justification with the projected costs for implementation of the project. See Attachment 3: Budget Template, Instructions and Allowable Cost Information.

Experience with Drug Medi-Cal, Medi-Cal, Insurance, and Other Funding Sources

Is the lead agency and/or are partner agencies Drug Medi-Cal certified and with a current county contract?	Up to 500 characters (50 words)
Does the lead agency and/or do partner agencies accept private insurance and have active relationships with managed care companies?	Up to 500 characters (50 words)
Are there other funding sources that the lead agency anticipates will cover the costs of services for specific groups of youth served?	Up to 1000 characters (100 words)

Financial Management

How will the lead agency monitor and ensure that YOR California funds are only used for treatment and recovery services when no other funding exists?	Up to 1000 characters (100 words)
Discuss how the lead agency will access and leverage resources, including Medi-Cal and health insurance, in-kind services, and delivery through collaborations and referrals.	Up to 2500 characters (250 words)

Sustainability

How will the innovations, pathways, and referral networks be sustained after YOR California funding ends to maintain increased access and services to youth?	Up to 1000 characters (100 words)
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Overall Section Value	20 points
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Capacity-Building Only Grant Applicant Instructions:

A budget and budget justification are required. All *narrative* questions in this section are optional.

Overall Section Value: 10 points

Section 6: Application Checklist

Completed application

PDF – includes PD and key staff resumes, organizational chart, and MOUs or LOIs from partner agencies

Completed budget worksheet and budget justification

Implementation plan

Send completed application and required documents in one email to YOR2Application@ahpnet.com no later than **5 p.m. PST on Friday, January 15, 2021.**

CONTACT US AT:



YORCalifornia@ahpnet.com



www.cibhs.org/yorcalifornia