

# Funding Opportunity: Perinatal Mental Health Community Capacity Building

Strengthening Families Washington (SFWA), a team within the Washington State Department of Children, Youth, and Families (DCYF), is collaborating with Perinatal Support Washington (PS-WA), a statewide non-profit dedicated to shining the light on perinatal mood and anxiety disorders (PMADs) and treating them effectively. This partnership is a result of the mutual interest in strengthening the capacity of communities to address perinatal mental health needs by increasing resources, supports, and services for families impacted by perinatal mental health complications.

## Funding Opportunity

The purpose of this funding opportunity is to support communities interested in collaborative efforts meant to increase community-wide awareness and develop resources to support the mental health of families in the perinatal period, which may include parents immediately prior to pregnancy through 1-2 years postpartum. Successful applicants will receive technical support and assistance from PS-WA, including content expertise and training opportunities.

## Funding Focus

We invite proposals from organizations interested in increasing community awareness of perinatal mental health and creating resources for parents within their community. Community may be defined by the applicant. It can be based on a geographic area (e.g., city or county), an ethnic or racial group, or a shared experience relevant to perinatal mental health (e.g., families transitioning out of NICU).

The ultimate goals of this work are to reduce or eliminate negative impacts of PMADS; support all caregivers, families, and children in their optimal development; prevent child abuse and neglect; and promote healthy family development.

The Perinatal Mental Health work is a unique program that aims to influence change on a community level as well as support parents experiencing perinatal mental health complications.

Successful applicants will demonstrate their ability to bring together a group of diverse stakeholders to form a local Perinatal Mental Health Task Force to address perinatal mental health in their community. Stakeholders invited to join the Task Force must include representatives from outside the funded organization and may include, but are not limited to: public health providers, medical providers, mental health providers,



Original Date: Feb. 29, 2024

Partnership, Prevention and Services Division | Family and Community Supports | Approved for distribution by Laura Alfani, Strengthening Families Washington Administrator

child care providers, community health organizations, parent educators, home visitors, early learning organizations, other social services providers, or parents. The Task Forces that communities convene should not have a clinical focus and should be aimed at community representatives and parents. In addition to organizing a Task Force, stakeholders who participate in these meetings will need to support community organizations that have interest in and capacity to implement at least one of the following direct service activities: perinatal mental health supports groups or 1:1 parent support. Technical support and training will be provided in leading and facilitating Perinatal Mental Health Task Force meetings and support groups and/or 1:1 parent supports.

Successful applicants will be identified as the host organization and will be responsible for holding and executing the resulting contracts. Host organizations will be able to act as the lead (or identify an appropriate lead) to facilitate a community Task Force as well as implement (or subcontract) a direct service parent support program for parents. Collaboration with local partners is required.

## Project Overview

Up to 10 organizations will be awarded contracts for the 2024-2025 state fiscal year (July 1, 2024 – June 30, 2025). Up to five currently funded organizations will continue for the next year. Approximately five new organizations will be awarded contracts for the 2024-2025 state fiscal year. The new organizations in good standing during the 2024-2025 state fiscal year will be eligible for an additional year of funding for the 2025-2026 state fiscal year.

## Host Organizations Will Receive

1. **Expert coaching and technical assistance:** PS-WA will provide perinatal mental health expertise and consultation to funded host organizations for the duration of the contract. This includes support and coaching on Task Force meeting development including agenda setting, goal setting, and thinking systemically about perinatal mental health. PS-WA will also support Task Forces in providing a one-day training in the communities. Additionally, clinical and technical support will be provided for the direct service components of this project. This includes providing regular meetings for support group leaders and 1:1 parent support providers, as well as support with data collection and reporting.
2. **Training opportunities:** Funded communities will receive training in Group Peer Support facilitator training, 1:1 Parent Support Training, and opportunities to attend the two-day PS-WA-provided perinatal mental health foundations trainings as well as PS-WA hosted webinars. These trainings will be offered without any registration fees for funded communities. Host organizations will be responsible for any travel costs for these trainings and any costs related to optional supplemental materials. In addition, PS-WA will work with funded communities to provide a one-day training for your specific community. The one-day training should be open to your whole community, not just those Task Force members. These trainings will include all materials and meeting day light refreshments. Successful applicants will be responsible for all

Original Date: Feb. 29, 2024

Partnership, Prevention and Services Division | Family and Community Supports | Approved for distribution by Laura Alfani, Strengthening Families Washington Administrator

other hosting responsibilities, this includes securing a location, if held in-person, meals (if appropriate), and inviting attendees. Costs associated with these hosting duties may be paid for using this funding.

3. **Peer Connections:** DCYF and PS-WA will facilitate connections among all funded communities for peer support and advice. Regular opportunities will be offered for organizations to share their unique successes and ask for advice in overcoming obstacles from others who may have similar experiences.

### Organizations Will Be Responsible For:

1. **Community Building for Perinatal Mental Health with a Task Force:** Engage diverse stakeholders in a Perinatal Mental Health Task Force to identify perinatal mental health strengths and needs. Effective Task Force efforts will work toward reducing barriers to care and increasing access to parent and caregiver support services for all families. The Task Force efforts will expand engagement of stakeholders over time and will identify and work toward goals that increase community capacity to address perinatal mental health needs of families and the providers that serve them. This includes exploring ways to increase knowledge and understanding of perinatal mental health among anyone who interacts with families across diverse contexts (e.g., community service providers, childcare providers, health care providers, librarians, businesses). Task Forces should engage with a cross-sector of providers and parents who represent the families to be served. Specific Task Force responsibilities include:
  - A. Collaborating with PS-WA for the duration of the contract. PS-WA will provide ongoing consultation and support to help communities think strategically about establishing perinatal mental health systems.
  - B. Convening a minimum of four Task Force meetings per contract year with individuals and organizations that interact with families across various contexts in the community. Task Forces should have representation from any organization who works with families in the perinatal period.
    - Meetings should address resources and needs of the community related to perinatal mental health.
    - Meetings should occur regularly throughout the contract period, including at least one meeting in the final quarter of each contract year.
    - Before applying, the community should identify where and how a parent support program such as a support group, virtual support group, or 1:1 parent support program should be offered, including which organization(s) are most likely to be successful in offering this service in order to begin services to

Original Date: Feb. 29, 2024

families within 6 (six) months of contract execution. On a continued basis, the Task Force should receive updates on progress and help develop methods to strengthen the support group activities.

- The Task Force should work toward finding sustainable solutions to offering Perinatal Mental Health services in their community.
- C. Planning and hosting a one-day Perinatal Mental Health training (all training costs, including trainers and training materials, provided by PS-WA).
- If you are a current or previously funded program, you may work with PS-WA to determine the best type of training opportunity for your community, which may include the one-day PMAD (Perinatal Mood and Anxiety Disorders) training or another option agreed upon between the applicant and PS-WA.
  - This training should be available for any community care provider, *not focused on clinical providers only*. Attendees should be invited from across multiple sectors that may interact with families in the perinatal period including, but not limited to, medical providers, mental health providers, childcare providers, community health organizations, parent educators, home visitors, early learning organizations, or other providers working with families in the perinatal period.

If funded communities have existing cross-sector groups that meet the requirement of the Task Force composition and activities outlined above, developing a new cross sector group is not required. Applicants should demonstrate that efforts are already under way in the community to focus on Perinatal Mental Health and that this existing group is willing to act as the required Task Force.

2. **Concrete Supports for Perinatal Mental Health:** Establish concrete supports, such as a perinatal support group, in the community for families impacted by PMADs within the first 6 months of the contract. Specific responsibilities include at least one of the following:

- A. *Develop at least one ongoing in-person perinatal support group.* Host organizations can manage and facilitate support groups or subcontract to other community organizations. DCYF approval will be required for all subcontracts. Support group requirements include:
- Held at a central location that is easy for parents to access and at times that are convenient for families.
  - Meeting rooms that are appropriate to accommodate 10 parents with infants.

Original Date: Feb. 29, 2024

Partnership, Prevention and Services Division | Family and Community Supports | Approved for distribution by Laura Alfani, Strengthening Families Washington Administrator

- Facilitator must have completed PS-WA training for support group facilitators, agree to use the support group model and participate in monthly consultation calls.
  - Facilitators should be representative of the community, including but not limited to language and culture; parenting/caregiving experience; knowledgeable about pregnancy, birth, and postpartum; and knowledgeable about infant development.
  - Ability to recruit and engage with 4-8 parents weekly or bi-weekly for support group meetings.
  - Open to all parents in the community free of charge.
  - Collect de-identified demographic, attendance, and outcome data from participants using evaluation tools developed and provided by PS-WA.
- B. *Develop at least one ongoing virtual perinatal support group(s).* Host organizations can manage and facilitate these groups or subcontract to other community organizations. DCYF approval is required for all subcontracts. Virtual support group requirements include:
- Held in an online-accessible platform that allows for group participation, including content and video sharing capability.
  - The platform must be publicly accessible for any participant but should be in a secure environment that cannot be recorded without prior informed consent of all participants.
  - Facilitator must have completed PS-WA training for support group facilitators, agree to use the support group model, and participate in monthly consultation calls.
  - Facilitator should be representative of the community including but not limited to language and culture; parenting/caregiving experience; knowledgeable about pregnancy, birth, and postpartum; and knowledgeable about infant development.
  - Ability to recruit and engage with 4-8 parents weekly or bi-weekly for support group meetings.
  - Open to all parents in the community free of charge.

Original Date: Feb. 29, 2024

- Collect de-identified demographic, attendance, and outcome data from participants using evaluation tools developed and provided by PS-WA.
- C. *Develop a 1:1 parent support program focused on providing support to families experiencing or at risk for a perinatal mood and/or anxiety disorder.* Host organizations can manage and facilitate a 1:1 peer/parent support program or subcontract to other community organizations. DCYF approval is required for all subcontracts. Peer support is meant to be short-term and non-therapeutic in nature. 1:1 parent support program requirements include:
- Be available to provide phone, online or in-person meetings to parents in their home (as health and safety protocols allow).
  - Provide community building events for parents in the program either in person or virtually to allow for peer connections.
  - Parent/peer must have completed PS-WA training and should make all reasonable efforts to participate in monthly consultation calls.
  - 1:1 Parent Support provider should be representative of the community including but not limited to language and culture; parenting/caregiving experience; knowledgeable about pregnancy, birth, and postpartum; and knowledgeable about infant development.
  - Ability to recruit and engage with 20 parents per contract year.
  - Open to all parents in the community free of charge.
  - Collect de-identified demographic, attendance, and outcome data from participants using evaluation tools developed by PS-WA.

Please note: Support group facilitator trainings and 1:1 parent support training will be provided by PS-WA. Training materials and registration will be provided at no cost to programs. However, travel to trainings or any optional supplemental materials will be the responsibility of the program.

3. **Perinatal Mental Health Resource and Referral Handouts Specific to the Community:** The Resource and Referral handouts are intended to create easy pathways of care for both professionals and families in the community. Handouts will include mental health referrals, support groups, links, and information about perinatal mental health, local crisis information, and online resources for support. Successful host organizations are encouraged to work with the Perinatal Task Force and their local Help Me Grow affiliate (or the statewide Help Me Grow if there is no local affiliate) in developing and distributing the Resource and Referral Handouts.

Original Date: Feb. 29, 2024

Partnership, Prevention and Services Division | Family and Community Supports | Approved for distribution by Laura Alfani, Strengthening Families Washington Administrator

4. **Work Plan and Budget:** Successful host organizations will develop a work plan and budget within the first three months of the DYCF contract period. Host organizations will be provided a work plan and budget template. Budget should reflect at least six months of direct service funding for at least one support group and/or 1:1 Parent Supports.
5. **Evaluation:** Successful host organizations are responsible for engaging in evaluation activities and data collection.
  - A. Community Capacity Building – Host organizations and their partners will be asked to complete a community capacity survey and participate in key informant interviews and/or focus groups conducted by contracted evaluation consultants to DCYF.
  - B. Parent Outcomes – Support group providers will collect outcomes data from participants using a parent questionnaire provided by PS-WA.
  - C. Concrete Goods – Staff will collect and enter information related to concrete goods distribution in a tool provided by DCYF, PS-WA, and/or the contracted evaluation consultants.

## Funding Focus

Funding is provided through federal Community-Based Child Abuse Prevention (CBCAP) dollars. The intent of this funding is primary and secondary prevention. These services may not be used as a part of a formal case plan for families involved with Child Welfare services, nor may services be targeted to families in a Child Welfare system.

Support groups and direct service components should focus on offering culturally relevant services to unserved and underserved populations. These populations include, but are not limited to: low income families, families with children 0-3, special needs families, families experiencing homelessness, African American families, unaccompanied homeless youth, fathers, refugee/immigrant families, Tribal Nations or Recognized American Indian Organizations, Hispanic/Latino families, adult former victims of domestic violence or child abuse and neglect, teen parents, single parents, non-English speakers, Asian/Pacific Islander families, and relative caregivers. Support groups and 1:1 parent supports should be strengths-based.

While this funding is available to any organization serving a population in Washington State, certain areas and populations will be offered priority for funding because they have lower representation of trained mental health providers, fewer or no perinatal mental health support groups, and higher rates of parents reaching out for support. Geographic priority will be given to organizations serving communities in Eastern Washington (any county in DCYF Region 1 or 2, a DCYF regional map may be found here:

Original Date: Feb. 29, 2024

Partnership, Prevention and Services Division | Family and Community Supports | Approved for distribution by Laura Alfani, Strengthening Families Washington Administrator

<https://dcyf.wa.gov/safety/report-abuse>), or one of the following counties: Grays Harbor, Jefferson, or Kitsap. Cultural priority will be given to organizations serving communities of color or Spanish speaking communities. Priority will also be given to applicants who have a representative from a Plan of Safe Care (POSC) hospital staff member or provider who is committed to participating in the Task Force work.

## Funds Available

The funding awarded will be \$20,000 for basic contract compliance elements. Successful applicants will be required to submit a budget during the first quarter of the contract. Organizations will be encouraged to include incentives for parent participation in Task Force activities; incentives must total no more than \$2,000 per year.

In addition, successful applicants may be offered an additional \$2,000 to use for concrete goods in their local community. The maximum award will be up to \$22,000 from July 1, 2024 through June 30, 2025. DCYF anticipates awarding up to 10 contracts.

## Contract Period

The contract period will run from July 1, 2024 – June 30, 2025, with the option to extend funding for up to an additional year for organizations in good standing with the perinatal mental health contract.

## Who Should Apply

501(c)(3) private non-profit organizations, Tribal Nations or Recognized American Indian Organizations, public or private schools, faith-based organizations, and local government entities serving Washington State parents, caregivers and families. For-profit organizations may be required to provide additional information to determine eligibility to receive funding.

## How to Apply

Organizations interested in applying for these funds must submit an application according to the instructions below. If you are applying on behalf of a faith-based organization, you understand that federal and state law prohibits the use of public funds for religious worship, exercise, instruction, or support of any religious establishment (<http://www.acf.hhs.gov/programs/occ/resource/equal-treatment-regulations-for-faith-based-organizations>). You also agree that the applicant organization will not receive reimbursement for any costs incurred in preparing the proposal, and that if awarded funding, the proposal will be incorporated into the final contract.

## Process Timeline

Webinar	March 22, 2024
Final Date for Submitting Questions	April 29, 2024

Original Date: Feb. 29, 2024

Partnership, Prevention and Services Division | Family and Community Supports | Approved for distribution by Laura Alfani, Strengthening Families Washington Administrator



Funding Application Due	May 8, 2024
Announce Successful Applicants	May 29, 2024
Contract Effective Date	July 1, 2024

## Application

Organizations must submit one copy of the application by email, including all required attachments by 5 p.m. on May 8, 2024. Applications must use no less than 11-point font and a minimum of one-inch margins on a document that is formatted for letter size paper (8 ½ by 11 inches). Each section (A through F below) and numbered questions must be clearly labeled using the numbering and titles in the guidance below. The points indicated per section do not need to be included in the submitted application. Any section of questions that are not clearly labeled may not be awarded any points in the application review process. Pages submitted that exceed the specified page limits indicated below will not be considered as part of the application review process. Applications may be submitted as one single document, or the application, attestation, and attachments may be submitted as separate documents. Applications must be submitted as unlocked PDFs or Word documents.

- Section A must be a cover sheet that must be no more than one page.
- Sections B through D must be a maximum of 6 pages total.
- Section E must be no more than one page.
- Section F does not have a page limit.

Applications will be disqualified from receiving funding if they do not meet the minimum requirements. These minimum requirements include:

- Applications must be received by 5 p.m. on May 8, 2024,
- Minimum 11-point font size,
- Minimum 1-inch margin size,
- Document is formatted for letter size paper (8 ½ by 11 inches),
- Proposal will serve families in Washington State,
- Proposal is for primary or secondary prevention populations, no tertiary prevention populations may be included,
- Any subcontracting may not exceed 49% of the awarded budget,
- Application must include a signed attestation.

Applications will be reviewed by a panel of DCYF staff, DCYF partner agency staff, community representatives, and parents. Applications will be scored on a 100-point scale, the number of points per section is as follows:

- Section A – 5 points. Applicants can receive an additional 9 bonus points if the applicant will be serving a priority area.
- Section B – 20 points.
- Section C – 40 points.
- Section D – 20 points.
- Section E – unscored.

Original Date: Feb. 29, 2024

Partnership, Prevention and Services Division | Family and Community Supports | Approved for distribution by Laura Alfani, Strengthening Families Washington Administrator

- Section F – 15 points.

## Submitting Questions

Questions may be submitted to [dcyf.strengtheningfamilies@dcyf.wa.gov](mailto:dcyf.strengtheningfamilies@dcyf.wa.gov) or by contacting the DCYF program contact below. Questions must be asked by April 29, 2024, any questions submitted after this date may not be answered. All questions that are asked and answered will be included in a Frequently Asked Questions document and updated weekly on the following website:

<https://dcyf.wa.gov/services/child-dev-support-providers/home-visiting/funding-opportunities>.

DCYF Program Contact	Sara Winkelman, Strengthening Families WA
Phone Number	360-701-8736
Email Address	<a href="mailto:sara.winkelman@dcyf.wa.gov">sara.winkelman@dcyf.wa.gov</a>

## Application

The following section headers (A through E) and numbered question labels must be included in all submitted applications. Section F does not need to be labeled in the application. Any other sections or questions that are not labeled in the submitted application may not be awarded points during the application review process. The points indicated on the section labels below do not have to be included on the submitted application. The details included after some section headers and numbered questions do not need to be included on the application.

### A. Applicant Information (5 Points)

Questions 1 through 8 must be included on the application cover sheet and may not exceed 1 page. A UEI number is not required to apply for funding but will be required and verified prior to DCYF issuing a contract. UEI number information can be found at: <https://sam.gov/content/duns-uei>.

1. Organization Name
2. Unique Entity Identification (UEI) number (if known)
3. Mailing Address
4. Contact Person Name, Phone, and E-mail
5. Organization Type  
501(c)(3) Private Non-Profit, Tribal Nation or Recognized American Indian Organization, Local Government, Public Education Organization, Private Educational Organization, or Other [please specify]
6. Contract Signatory

Original Date: Feb. 29, 2024

Partnership, Prevention and Services Division | Family and Community Supports | Approved for distribution by Laura Alfani, Strengthening Families Washington Administrator

If selected as a successful applicant, this is the name and contact information for the person who will sign the contract.

7. Primary Community Population

While you may serve families from more than one population, please select the primary population you are proposing to serve from the following options:

- Urban
- Suburban
- Rural

8. Priority Areas

Specify each priority area that is applicable to your application including the geographic priority, underrepresented cultural or linguistic population, or Plan of Safe Care Hospital being represented on your Task Force to get the applicable bonus points.

Focus population will include at least one geographic priority population (specify which). Grays Harbor County, Jefferson County, Kitsap County, or any Eastern Washington County (Eastern Washington counties include any county in DCYF Region 1 or 2. Regional map can be found here: <https://dcyf.wa.gov/safety/report-abuse>). (3 Bonus Points)

Focus population will include at least one underrepresented cultural or linguistic population: Communities of color (including, but not limited to, Black/African American, Native American/Alaskan Native, Hispanic/Latino, Asian/Pacific Islander, or others), populations that speak a language other than English as their primary language, or other groups historically underrepresented in Washington or overrepresented in the Child Welfare system. (3 Bonus Points)

Task Force work will include meaningful collaboration with a representative or provider from a Plan of Safe Care Hospital. A letter of agreement will be required in section F of your application demonstrating commitment from the hospital representative or provider to participate in Task Force work. Plan of Safe Care Hospitals, and the counties they serve, include: Astria Sunnyside Hospital (Yakima), CHI St. Joseph's (Pierce), Confluence Health (Central Washington Region), Mason Health (Mason), MultiCare Deaconess (Spokane), MultiCare Tacoma General (Pierce), MultiCare Good Samaritan (Pierce), MultiCare Valley (Spokane) Overlake Medical Center (King), Peace Health Southwest (Clark), Pullman Regional Hospital (Whitman), Swedish First Hill (King), UW Medicine – UW Medical Center NW (King), UW Medicine – Valley Medical Center (King), Providence Holy Family (Spokane), Kittitas Valley Healthcare (Kittitas), Skagit Valley Hospital (Skagit), Island Health (Island/Skagit), Providence + Swedish Central Puget Sound Region (Regional-Western Washington), Peace Health St Joseph – Bellingham (Whatcom), UW Medicine – Montlake (King), St. Anne Hospital – Burien (King). (3 Bonus Points)

Original Date: Feb. 29, 2024

## B. Community Landscape (20 Points)

Sections B through D must be a maximum of 6 pages total.

1. Describe the community being proposed to be served.  
Describe your experience working with this community and what experience you have connecting with families from this community in the perinatal period. Indicate your experience in connecting with mental health or medical providers who serve this community.
2. Describe the community need.  
Using data from your community, describe the need for perinatal mental health resources.

## C. Community Resources and Support (40 Points)

In this section, DCYF and PS-WA are seeking information about how the host organization will work within the community to build capacity for perinatal mental health promotion.

1. Community Task Force  
One key element of this perinatal mental health work is convening a community Task Force that includes representatives from various service sectors in your community outside of just medical or mental health professionals. Task Force participants must include representation from outside of your organization. Describe how you will convene a Perinatal Mental Health Task Force. Identify community partners who have committed to participating in Task Force meetings and activities. Demonstrate how you, as a host organization, collaborate with existing external resources and engage with partners in your community.
2. Parent Involvement  
Parent participation is required in the planning and decision-making related to this funding opportunity. Explain your organization's experience in partnering with parents for planning and decision making and how you will continue to meaningfully engage parents in this work specifically. Describe how you have utilized parent input in your decision to apply for this funding opportunity.

## D. Applicant Organization Capacity (20 Points)

In this section, DCYF and PS-WA are seeking information that will document the applicant organization's ability to successfully carry out this project. If the organization is newly developed, the Executive

Original Date: Feb. 29, 2024

Partnership, Prevention and Services Division | Family and Community Supports | Approved for distribution by Laura Alfani, Strengthening Families Washington Administrator

Director and/or Board of Directors members may be required to agree to background checks by the Washington State Patrol.

1. Mission Statement

State the mission of the applicant organization. Describe how the work resulting from this application aligns with the mission statement.

2. Start Up Plan

Briefly describe the steps the applicant organization will take to ensure program services begin within 6 months of the contract execution. Describe any concrete steps that will need to occur in order to be successful. Discuss the timelines for key milestones, including when direct services and Task Force meetings will start. If any of the required activities will be subcontracted, describe who will take on which activity and the status of the agreement between your organization and the subcontracted organization to complete the required activity.

3. Experience in Perinatal Mental Health

Describe the experience developing or delivering services related to perinatal mental health by the applicant organization or that of another organization in the community. If you do not have much experience in providing perinatal mental health services, specify the experience you have in serving families in the perinatal period. Describe your plans for offering the direct support (either a support group or 1:1 parent supports), including any plans for subcontracting this work. Training will be provided in support group facilitation or 1:1 parent supports, so prior experience is not required.

4. Experience with Contract Compliance

Describe the applicant's experience in successful compliance with contract requirements and completion of a program contract with state or local funding entities.

## E. Application Attestation *(Unscored Section)*

All applicants must submit a **signed** application attestation. The attestation may be on a separate page from the rest of the application if needed and will not count toward the application page limit. The attestation must use the language provided below:

I certify that I have the authority to submit a proposal on behalf of the organization named in this application and that all information provided is true and accurate.

## F. Attachments *(15 Points)*

Section F does not need to be labeled in your final application.

Original Date: Feb. 29, 2024

Partnership, Prevention and Services Division | Family and Community Supports | Approved for distribution by Laura Alfani, Strengthening Families Washington Administrator

1. **Parent Letters of Support**  
Letters from parents who come from the community you are proposing to serve and who are interested in participating in the program or service. This is not to exceed two letters. If more than two letters are received, only two letters will be selected at DCYF's sole discretion to be considered during the review process.
2. **Organizational Letters of Support**  
Letters from organizations or persons who have an interest in the success of this program. Letters of support may be provided by social service providers, advisory committees, board members, community leaders, educators, clergy, business leaders etc. This is not to exceed two letters. A maximum of one letter may be provided by someone in a leadership role within the applicant agency (such as a member of the board of directors). If more than two letters are received, or more than one from someone in a leadership role within the applicant agency, only the maximum number of letters (selected at DCYF's sole discretion) will be considered during the review process.
3. **Letter of Agreement**  
If you have indicated that a representative or provider from a Plan of Safe Care Hospital has committed to joining the Task Force for this work in Section A, a letter of agreement from that hospital representative or provider is required. The letter must state the person's name and their commitment to the Task Force work in order for your application to be awarded bonus points for collaboration with a Plan of Safe Care Hospital. Only one letter may be submitted for this purpose. If more than one letter is received, only one letter will be selected at DCYF's sole discretion to be considered during the review process. If you have not indicated that a representative from a Plan of Safe Care Hospital has committed to joining the Task Force, no letter of agreement should be submitted.

Original Date: Feb. 29, 2024

Partnership, Prevention and Services Division | Family and Community Supports | Approved for distribution by Laura Alfani, Strengthening Families Washington Administrator