

APPLICATION: Request for Supplemental Information

California Home Visiting Program State General Fund Innovation 3.0

Maternal, Child and Adolescent Health California Department of Public Health

Local Health Jurisdiction: _____
Name and Title of Person Submitting Application: _____
Email Address: _____
Phone: _____

Project Proposal

Only one application will be accepted from each local health jurisdiction (LHJ). If multiple applications are received from one LHJ, CDPH/CHVP will reach out to each submitter to identify which application they wish to have reviewed and scored. The other(s) will be disqualified and not reviewed or scored.

Instructions:

- All responses should be entered into the application form below. Responses should be concise and respond directly to the information requested.
- Use Calibri 12-point font and 1.0 line spacing.
- Responses should not exceed 500 words per question unless otherwise noted.
- Points available per section are included following each question. Applications will receive a total score out of 62 available points.
- Ensure that you provide a response for every question, unless otherwise directed.
- For current Innovation 1.0 Projects only: If your evaluation is 21% or more of the budget and continues an evaluation of your current project, complete questions 1-8 for implementation (if any) and evaluation of your project. Skip question 9.
- Applications are due **no later than 5:00 p.m. PST on Wednesday, October 22, 2025**. Submit your response by attaching the completed Application in PDF form to an email and sending it to CHVPINNV@cdph.ca.gov. Please use the following subject line of your email: “[LHJ Name] CHVP Innovation 3.0 RSI 2025”; example: “Terabithia CHVP Innovation 3.0 RSI 2025”. **If you do not receive a confirmation email within two business days, please follow up by contacting CHVPINNV@cdph.ca.gov to ensure your emailed application was received.** CDPH/CHVP strongly encourages all LHJs to submit their applications as early as possible to avoid late submissions.

Application Questions

1. **PROJECT TITLE:** _____

2. **PROJECT CATEGORY (select all that apply):**

- ☐ Category 1: Evidence-based home visiting (EBHV) models not otherwise funded by CDPH/CHVP
- ☐ Category 2: LHJ developed/defined or evidence-informed home visiting models or case management programs
- ☐ Category 3: Policy, systems, and environmental change (PSE) strategies
- ☐ Category 4: Ancillary services and supports for home visiting programs administered through local MCAH departments

3. **PROJECT DESCRIPTION:** Provide a description of your proposed project (14 points), including:

- a. A high-level explanation of your proposed project or program. (6 points)
- b. Project Goals and Objectives: Identify the major goals(s) and objectives for the project (what you intend to accomplish). State the goal(s) in a sentence and present the objectives in a numbered list. If the proposed project spans multiple categories, clearly describe the goals and objectives for each category. (8 points)

Question 3 response:

- 4. FOR LHJS APPLYING FOR A NEW PROJECT:** Describe the local landscape of services into which you will be embedding your proposed project. Include the existing services and resources that could be leveraged to support the project and describe the specific gap(s) or unmet need(s) your project will fill. Include disparities or inequities that your project will address. (8 points)

Question 4 response:

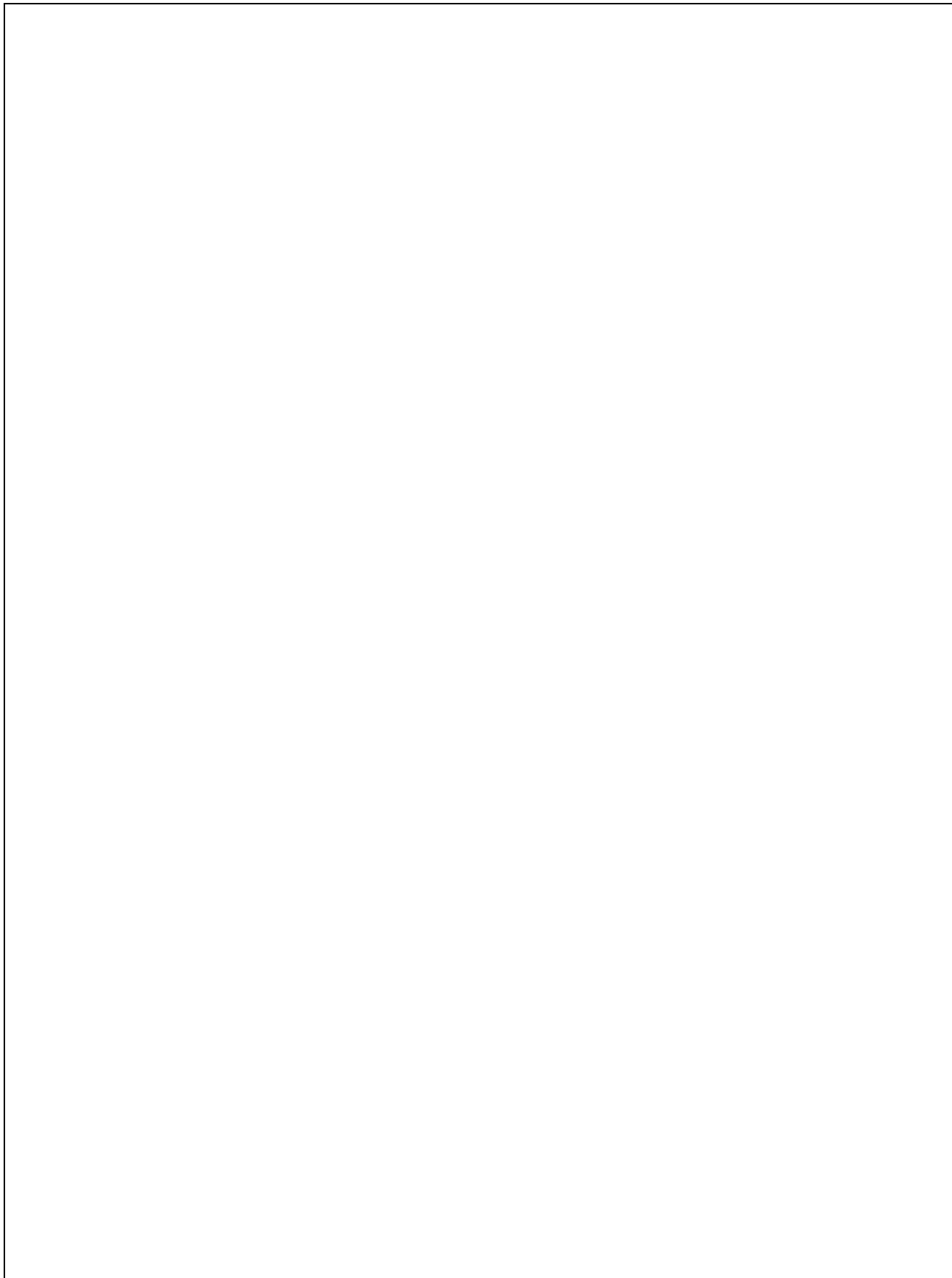
- 5. FOR LHJS APPLYING TO EXPAND CURRENT INNOVATION 1.0 AND/OR 2.0 PROJECTS ONLY:** Briefly describe how your proposed project will build on your current SGF Innovation Project. Explain how your current organizational capacity, along with the insights gained from your current project, will contribute to the success of your proposed project. If applying to support any part of a current Innovation 1.0 Project, include how your proposal addresses your current project sustainability plans. Include disparities or inequities that your project will address. (8 points)

Question 5 response:

6. IMPLEMENTATION PLAN: Please provide a detailed plan for the project over the three-year funding period. (22 points) (Responses should not exceed 1000 words) Include the following:

- a. Using the Project Goals and Objectives stated above in question 3, provide a timeline of major activities and milestones for each year and explain how your project will evolve or scale over time (if applicable). If your project is developing or adapting a practice, be sure to allow sufficient time to fully develop your practice (including any testing or formative evaluation with the intended audience and interested parties) *before* beginning implementation. Please include any preparation work that must occur before an innovation can be implemented. Include any revision cycles in your plan. Include when you will identify a system or data system for tracking implementation and when/how the tracking system will be implemented. (8 points)
- b. Explain your intentions to explore and leverage other relevant funding mechanisms to support project implementation and sustainability. (6 points)
- c. Plans to sufficiently staff and provide oversight for the project, including plans to hire, train, and provide ongoing coaching to staff. Include the roles and responsibilities of each staff member. (4 points)
- d. Plans to thoughtfully engage key partners, including internal agency leadership, government agencies, community organizations, and representatives from the service population, in project planning, implementation, and monitoring and/or evaluation. (4 points)

Question 6 response:



- 7. CAPACITY:** Please describe your organization's capacity to implement the proposed project. (10 points) Include the following:
- a. Your organization's readiness to execute the project, including LHJ leadership support and (if any) access to specialized expertise that may be required. (6 points)
 - b. How the project may link to other ongoing activities or initiatives to expand demonstration of project effectiveness. (4 points)

Question 7 response:

8. PROJECT MONITORING (2 points)

- a. Does your project have a required implementation monitoring plan?

☐ Yes ☐ No

If yes, awardees will be asked to submit the required monitoring plan to CDPH/CHVP within 60 days of Application Funding Agreement (AFA) approval.

- b. If no, please mark this box indicating you will submit an LHJ-developed monitoring plan within six months of AFA approval.

☐ Yes, my LHJ will submit a monitoring plan within six months of the AFA approval.

9. OPTIONAL EVALUATION: (2 points)

Note: For current Innovation 1.0 Projects only: If your proposed evaluation is 21% or more of the proposed budget and continues an evaluation of your current project, skip question 9.

- a. Do you intend to implement an (optional) evaluation for your proposed project of up to 20% of the budget?

☐ Yes ☐ No (if no, skip to the Budget section. No additional information is needed)

- b. If yes, briefly describe your evaluation plans below.

- If your LHJ plans to join an existing evaluation, please specify that project and who leads it. No other information is needed.
- If you are conducting your own evaluation, please briefly state the topic of the evaluation and the approach you plan to use.

Question 9 response (if applicable):

10. BUDGET: Describe your proposed annual budget and staffing. (4 points)

- a. Proposed project annual budget (up to \$600,000 for individual LHJ applications and \$800,000 for multi-LHJ consortia)
- b. Will this funding be braided with other funding sources? If so, how?
- c. Proposed staffing structure, including full-time equivalent (FTE) and annual salaries
- d. Other anticipated costs such as training, travel, operating expenses, outreach materials, optional evaluation expenses, data system and any other categories needed
- e. If applicable and if known, the name and purpose of any subcontractors who will be included in the budget, as well as the amount of the subcontract

Budget details will be negotiated and finalized with CDPH/CHVP upon selection and prior to award.

Question 10 response: