**Instructions**: Provide detailed responses in the text boxes to the questions below. If additional attachments are required as specified below, submit the attachments in the order they are requested below. There is no page limit for this Appendix D – Technical Response to Questions or any associated attachments.

|  |  |
| --- | --- |
| **Vendor Name** |  |

1. **Describe your organization's experience in delivering youth peer-to-peer grief support or related education, and consultation services to children, youth, and families.**

|  |
| --- |
|  |

1. **How will your organization ensure the seamless integration of grief support programming within the Department’ existing CBH System of Care framework?**

|  |
| --- |
|  |

1. **What is your approach to delivering statewide in-person and virtual peer-to-peer grief support to both individuals and groups? Include how you will tailor your services to address the specific needs of children, youth, and families grieving a loss?**

|  |
| --- |
|  |

1. **What strategies do you employ to target, prioritize, and select participants to ensure that trainings include organizations that are most likely to impact areas of need?**

|  |
| --- |
|  |

1. **How will your educational programming increase awareness of grief and its impacts among children, youth, and families?**

|  |
| --- |
|  |

1. **What educational programming methods will you use? Please provide a work plan that details the resources you plan to provide, such as FAQs on grief, activity guides, videos, and toolkits and types of educational programs you plan to offer, including workshops, and/or community events.**

|  |
| --- |
|  |

1. **How will your organization facilitate the collection, analysis, reporting and use of data in informing the delivery and evaluation of the services required in this RFP? Please describe how you will organize the information gathered, any key performance measures you will include, and, ways in which data will be used to inform decision making.**

|  |
| --- |
|  |