

Department of Health and Human Services

Substance Abuse and Mental Health Services Administration

**Technical Assistance Center for
Mental Health Promotion and Youth Violence Prevention**

(Initial Announcement)

RFA SM-05-020

Catalogue of Federal Domestic Assistance (CFDA) No.: 93.243

Key Dates:

Application Deadline	Applications are due by July 1, 2005
Intergovernmental Review (E.O. 12372)	Letters from State Single Point of Contact (SPOC) are due no later than 60 days after application deadline.
Public Health System Impact Statement (PHSIS)/SSA Coordination	Applicants must send the PHSIS to appropriate State and local health agencies by application deadline. Comments from Single State Agency are due no later than 60 days after application deadline.

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I. FUNDING OPPORTUNITY DESCRIPTION

1. INTRODUCTION

The Substance Abuse and Mental Health Services Administration (SAMHSA) announces available funding to establish, develop, and maintain a Technical Assistance Center (TA Center) for Mental Health Promotion and Youth Violence Prevention. The TA Center will support the federally funded Safe Schools/Healthy Students (SS/HS), Youth Violence Prevention (YVP), and Targeted Capacity Expansion: Prevention and Early Intervention (TCE) grant programs.

The Safe Schools/Healthy Students, Youth Violence Prevention, and Targeted Capacity Expansion grant programs provide funds to various entities to plan, implement, evaluate, and sustain programs to foster resilience, promote mental health, and prevent youth violence and mental and behavioral disorders. Although the framework and focus of these three programs are distinct, the underlying theoretical principles are the same. Specifically, these programs are grounded in the belief that people's lives can be enhanced through effective interventions that foster well-being and resilience at the individual, family, and community levels. Structurally, the programs share the common objective of bringing together representatives from many diverse stakeholder groups and seeking cooperation from an array of public health, mental health, education, justice, and social service systems, as well as families and youth, to work towards the mutual goals of promoting safety, well being, and healthy development. Additional information about each of these three grant programs can be found in the Glossary.

The TA Center will provide an array of technical assistance services that will improve the effectiveness, efficiency, and sustainability of projects in the three grant programs. Annually, up to 90 SS/HS grantees will require technical assistance services. Technical assistance services will be provided to 26 YVP and 3 TCE grantees in the first year only.

The TA Center cooperative agreement is authorized under Sections 520A of the Public Health Service Act, as amended, and subject to the availability of funds.

2. EXPECTATIONS

The TA Center will be expected to perform the following functions:

- Provide multifaceted technical assistance across a wide variety of topics.
- Provide centralized administration, management, and coordination of TA services for all grantees.
- Provide localized site specific and cross site technical assistance in a variety of formats and media.
- Establish processes for identifying best practices and resource development and sharing these across all grantee sites.

- Provide technical assistance that demonstrates competency with respect to all types of diversity, e.g. age, gender, culture.

2.1 Required Activities

In close partnership with SAMHSA’s Center for Mental Health Services and other Federal partners, the TA Center will conduct the following required activities:

- **Transition from the Incumbent Technical Assistance Provider:** In the event that the Grantee is not the incumbent TA Center provider, develop and implement a plan to address and ensure the coordination of an orderly transition of TA services, activities, and materials.
- **Establish and Coordinate a Technical Assistance Center Steering Committee:** A Steering Committee, comprised of 8-10 individuals, will provide advice and consultation to the TA Center regarding content, leadership, management, and TA service delivery. (NOTE: The proposed members should be current or former program partners, e.g., project directors, evaluators, etc., of the SS/HS, YVP, and TCE programs. Applicants must budget for the travel/logistics of convening the committee up to two times per year in Rockville MD. The meeting will be held at SAMHSA headquarters, so there will be no cost associated with meeting space).
- **Provide Consultation and Site Specific Technical Assistance Services:** The TA Center will develop and provide specialized, site specific technical assistance for all grantee sites, e.g., assessments of grantee needs; development of individualized technical assistance plans; assistance with strategic planning; assistance with evaluation; expert consultant services; assistance with sustainability planning.
- **Provide Cross Site Technical Assistance Services:** The TA Center will develop and provide cross site technical assistance services to all grantees, e.g., peer-to-peer mentoring; telephone conference calls; on line learning forums and web based courses.
- **Develop and Deliver Technical Assistance Materials and Resources:** The TA Center will support grantees by developing and providing access to needed resources for activities related to healthy youth development, youth violence prevention, and mental health promotion, e.g., a resource guide of all possible and available TA activities; “promising practices” guides; interactive CD-ROMs; annual monographs for grantees whose grants ended during that year, etc.
- **Provide Communications and Social Marketing Technical Assistance Services:** The TA Center will provide technical assistance services on communications and social marketing to facilitate the development and sustainability of grantee projects.
- **Performance Monitoring:** The TA Center will develop internal performance monitoring systems and collaborate with an external, independent evaluator to monitor and evaluate all internal and external TA Center activities for relevance, efficiency, effectiveness, and impact.

- **Collaborate with Other Program Partners:** The TA Center will develop and implement communications mechanisms for sharing information and feedback from and with other technical assistance contractors already working with the three grant programs, as well as other relevant SAMHSA-funded TA centers and grant programs.
- **Plan and Facilitate National Conferences and Regional Meetings:** Annually, the TA Center will plan, facilitate, and coordinate either one national conference or up to four smaller regional conferences. (NOTE: Each national conference will be up to three days and each regional meeting will be up to two days. The TA Center should include in its budget funding for the travel/lodging/per diem costs of its staff, TA Center consultants/sub-contractors, and conference or meeting speakers. Grantees will pay their own travel costs and a logistics contractor will be responsible for all other costs associated with the conference or meetings).

2.2 Data and Performance Measurement

The Government Performance and Results Act of 1993 (P.L.103-62, or “GPRA”) requires all Federal agencies to set program performance targets and report annually on the degree to which the previous year’s targets were met.

Agencies are expected to evaluate their programs regularly and to use results of these evaluations to explain their successes and failures and justify requests for funding.

To meet the GPRA requirements, SAMHSA must collect performance data (i.e., “GPRA data”) from grantees. Grantees are required to report these performance data to SAMHSA on a timely basis so that results are available to support budgetary decisions.

CMHS is currently in the initial planning stages of implementing a web-based GPRA data collection and reporting system. Grantees may be asked in the future to submit their GPRA data electronically using this web-based system. All applicants must agree to comply with the web-based submission of performance data in their application. In addition, this requirement will be included as a term and condition of any grant award. When development of the system is complete, grantees will be provided initial training and ongoing technical assistance in order to ensure a smooth transition to the electronic system and continued user support.

The GPRA performance measures that grantees will be required to report on are currently under development as part of this project. Technical Assistance grantees provide assistance to a variety of customers (referred to below as recipients, e.g. consumer, mental health administrator, or the general public) and will be required to report data annually on the following component areas in the provision of technical assistance:

1. **Process Component:** Includes recipient demographics, perception of structure and timing of the service received, and accessibility
2. **Content Component:** Includes recipient perception of clarity of the services received and relevance to their work

3. **Impact Component:** Includes recipient perception of short-term (what was learned) and long-term (the implementation of what was learned) utility and value of the service received. What was useful, how and why?

CMHS anticipates significantly improved GPRA data collection capabilities as these new standards and procedures are implemented. Consistent information across TA Centers will allow for improved communication and will allow CMHS to better understand the functioning and effectiveness of these activities. Grantees will be kept apprised of the expected start date of the new system.

2.3 Grantee Meetings

In addition to the Steering Committee meetings referenced in I-2.1, the TA Center must attend up to two meetings in each year of the cooperative agreement to meet with the GPO, grantee GPOs, and other relevant staff to review TA procedures and plan events. A minimum of two people (including the Project Director) should attend each meeting and funding for this travel must be included in the budget. Each meeting will be 1½ days and will be held at SAMHSA headquarters.

2.4 Evaluation

The TA Center must evaluate its project, and applicants are required to describe their evaluation plans in their applications. The evaluation should be designed to provide regular feedback to the project to improve services and be conducted by an individual or organization external to the TA Center. The evaluation must include the required performance measures described above. The evaluation must include both process and outcome components. Process and outcome evaluations must measure change relating to project goals and objectives over time compared to baseline information. Control or comparison groups are not required. You must consider your evaluation plan when preparing the project budget. No more than 20% of the total grant award may be used for evaluation and data collection, including GPRA.

Process components should address issues such as:

How closely did implementation match the plan?

What types of deviation from the plan occurred?

What led to the deviations?

What impact did the deviations have on the TA services and the evaluation of those services?

Who provided (program, staff) what services (modality, type, quantity, intensity, duration, topic areas addressed), to whom, (individual and site characteristics), in what context (system, community), and at what cost (facilities, personnel, dollars)?

Outcome components should address issues such as:

What effect did technical assistance have on the ability of service recipients to implement their project?

What program/contextual factors were associated with level of implementation?

How durable were the effects?

How satisfied were the recipients of technical assistance with the modality, type, intensity, and duration, and quality of the provided technical assistance? With the number, variety, and types of topics covered?

II. AWARD INFORMATION

1. AWARD AMOUNT

It is expected that up to \$5 million will be available to fund one award in FY 2005. The maximum allowable award is \$5 million in total costs (direct and indirect) for the first year and up to \$4 million in total costs (direct and indirect) in subsequent years. Applicants may request a project period of up to three years.

Proposed budgets cannot exceed the allowable amount in any year of the proposed project.

The actual amount available for award may vary depending on unanticipated program requirements and the availability of funds. Annual continuation awards will depend on the availability of funds (including the number of grantees to be monitored), grantee progress in meeting project goals and objectives, and timely submission of required data and reports.

2. FUNDING MECHANISM

This award will be made as a cooperative agreement because it will require substantial Federal staff involvement over the course of the project.

The specific roles and responsibilities for the grantee and the Federal government are as follows:

Role of Federal Staff:

- Consult with the TA Center leadership and management team on all phases of the project development and implementation to ensure accomplishment of the goals;
- Approve key staff (e.g., project director, supervisors, Steering Committee Members) responsible for the management, leadership, and oversight of the TA Center;
- Review critical project activities for conformity to the mission of the three grant programs;
- Provide guidance on project design and components, as needed;
- Participate in policy and steering groups or related work groups;
- Approve data collection plans;
- Submit required clearance packages to the U.S. Office of Management and Budget (OMB) using information and materials provided by the grantee and evaluator;

- Recommend outside consultants for training, site specific evaluation, and data collection, if needed;
- Facilitate collaboration, as needed; and,
- Assume overall responsibility for monitoring the conduct and progress of the TA Center program, review semi annual reports, conduct site visits, and make recommendations regarding continuation funding.

Role of the Grantee:

- Comply with all terms and conditions of the award and satisfactorily perform activities to achieve the program goals;
- Consult with and accept guidance and respond to requests for information from the Government Project Officer, the Grants Management Specialist, and other relevant SAMHSA and Federal staff;
- Agree to provide SAMHSA with data required for the Government Performance and Results Act (GPRA);
- Support and participate in TA Center meetings;
- Produce required SAMHSA reports;
- Keep Federal program staff informed of emerging issues, developments, and problems;
- Respond to requests for information from SAMHSA and other Federal partners.

III. ELIGIBILITY INFORMATION

1. ELIGIBLE APPLICANTS

Eligible applicants are domestic public and private non profit entities. For example, community based organizations, public or private universities and colleges; community and faith based organizations; partnerships of multiple centers, programs and/or community service providers applying as a single center. **The statutory authority for this program precludes grants to for-profit organizations.** All applicants will be evaluated by the same criteria outlined in the evaluation criteria section.

2. COST SHARING

Cost sharing (see Appendix B, Glossary) is not required in this program, and applications will not be screened out on the basis of cost sharing. However, you may include cash or in-kind contributions in your proposal as evidence of commitment to the proposed project.

3. OTHER

Applications must comply with the following requirements, or they will be screened out and will not be reviewed: use of the PHS 5161-1 application; application submission requirements in Section IV-3 of this document; and formatting requirements provided in Section IV-2.3 of this document.

IV. APPLICATION AND SUBMISSION INFORMATION

(To ensure that you have met all submission requirements, a checklist is provided for your use in Appendix A of this document.)

1. ADDRESS TO REQUEST APPLICATION PACKAGE

You may request a complete application kit by calling SAMHSA's National Mental Health Information Center at 1-800-789-CMHS (2647).

You also may download the required documents from the SAMHSA web site www.samhsa.gov. Click on 'Grants.'

Additional materials available on this web site include:

- a technical assistance manual for potential applicants;
- standard terms and conditions for SAMHSA grants;
- guidelines and policies that relate to SAMHSA grants (e.g., guidelines on cultural competence, consumer and family participation, and evaluation); and
- enhanced instructions for completing the PHS 5161-1 application.

2. CONTENT AND FORM OF APPLICATION SUBMISSION

2.1 Application Kit

SAMHSA application kits include the following documents:

- PHS 5161-1 (revised July 2000) – Includes the face page, budget forms, assurances, certification, and checklist. You must use the PHS 5161-1. **Applications that are not submitted on the PHS 5161-1 will be screened out and will not be reviewed.**
- Request for Applications (RFA) – Provides specific information about the availability of funds along with instructions for completing the grant application. This document is the RFA. The RFA will be available on the SAMHSA web site (www.samhsa.gov) and on the Federal grants web site (www.grants.gov).

You must use all of the above documents in completing your application.

2.2 Required Application Components

To ensure equitable treatment of all applications, applications must be complete. In order for your application to be complete, it must include the required ten application components (Face Page, Abstract, Table of Contents, Budget Form, Project Narrative and Supporting Documentation, Appendices, Assurances, Certifications, Disclosure of Lobbying Activities, and Checklist).

- ❑ **Face Page** – Use Standard Form (SF) 424, which is part of the PHS 5161-1. [Note: Beginning October 1, 2003, applicants will need to provide a Dun and Bradstreet (DUNS) number to apply for a grant or cooperative agreement from the Federal Government. SAMHSA applicants will be required to provide their DUNS number on the face page of the application. Obtaining a DUNS number is easy and there is no charge. To obtain a DUNS number, access the Dun and Bradstreet web site at www.dunandbradstreet.com or call 1-866-705-5711. To expedite the process, let Dun and Bradstreet know that you are a public/private nonprofit organization getting ready to submit a Federal grant application.]
- ❑ **Abstract** – Your total abstract should not be longer than 35 lines. In the first five lines or less of your abstract, write a summary of your project that can be used, if your project is funded, in publications, reporting to Congress, or press releases.
- ❑ **Table of Contents** – Include page numbers for each of the major sections of your application and for each appendix.
- ❑ **Budget Form** – Use SF 424A, which is part of the 5161-1. Fill out Sections B, C, and E of the SF 424A. A sample budget and justification is included in Appendix D of this RFA.
- ❑ **Project Narrative and Supporting Documentation** – The Project Narrative describes your project. It consists of **Sections A through D**. These sections in total may not be longer than 30 pages. (For example, remember that if your Project Narrative starts on page 5 and ends on page 35, it is 31 pages long, not 30 pages). More detailed instructions for completing each section of the Project Narrative are provided in “Section V— Application Review Information” of this document.

The Supporting Documentation provides additional information necessary for the review of your application. This supporting documentation should be provided immediately following your Project Narrative in **Sections E through H**. There are no page limits for these sections, except for Section G, Biographical Sketches/Job Descriptions.

- *Section E* - Literature Citations. This section must contain complete citations, including titles and all authors, for any literature you cite in your application.

- *Section F* - Budget Justification, Existing Resources, Other Support. You must provide a narrative justification of the items included in your proposed budget, as well as a description of existing resources and other support you expect to receive for the proposed project. Be sure to show that no more than 20% of the total grant award will be used for data collection and evaluation.
- *Section G* - Biographical Sketches and Job Descriptions.
 - Include a biographical sketch for the Project Director and other key positions. Each sketch should be 2 pages or less. If the person has not been hired, include a position description and/or letter of commitment with a current biographical sketch from the individual.
 - Include job descriptions for key personnel. Job descriptions should be no longer than 1 page each.
 - Sample sketches and job descriptions are listed on page 22, Item 6 in the Program Narrative section of the PHS 5161-1.
- *Section H* - Confidentiality and SAMHSA Participant Protection/Human Subjects. Section IV-2.4 of this document describes requirements for the protection of the confidentiality, rights and safety of participants in SAMHSA-funded activities. This section also includes guidelines for completing this part of your application.
- **Appendices 1 through 4** – Use only the appendices listed below. If your application includes any appendices not required in this document, they will be disregarded. Do not use more than 30 pages for Appendices 1, 3 and 4 combined. There are no page limitations for Appendix 2. Do not use appendices to extend or replace any of the sections of the Project Narrative. Reviewers will not consider them if you do.
 - *Appendix 1*: Letters of Support
 - *Appendix 2*: Data Collection Instruments/Interview Protocols
 - *Appendix 3*: Sample Consent Forms
 - *Appendix 4*: Letter to the SSA (if applicable; see Section IV-4 of this document)
- **Assurances** – Non-Construction Programs. Use Standard Form 424B found in PHS 5161-1.
- **Certifications** – Use the “Certifications” forms found in PHS 5161-1.
- **Disclosure of Lobbying Activities** – Use Standard Form LLL found in the PHS 5161-1. Federal law prohibits the use of appropriated funds for publicity or propaganda purposes, or for the preparation, distribution, or use of the information designed to support or defeat legislation pending before the Congress or State legislatures. This includes “grass roots” lobbying, which consists of appeals to members of the public suggesting that they contact their elected representatives to indicate their support for or opposition to pending legislation or to urge those representatives to vote in a particular way.

- ❑ **Checklist** – Use the Checklist found in PHS 5161-1. The Checklist ensures that you have obtained the proper signatures, assurances and certifications and is the last page of your application.

2.3 Application Formatting Requirements

Applicants also must comply with the following basic application requirements. Applications that do not comply with these requirements will be screened out and will not be reviewed.

- ❑ Information provided must be sufficient for review.
- ❑ Text must be legible. (For Project Narratives submitted electronically in Microsoft Word, see separate requirements below under “Guidance for Electronic Submission of Applications.”)
 - Type size in the Project Narrative cannot exceed an average of 15 characters per inch, as measured on the physical page. (Type size in charts, tables, graphs, and footnotes will not be considered in determining compliance.)
 - Text in the Project Narrative cannot exceed 6 lines per vertical inch.
- ❑ Paper must be white paper and 8.5 inches by 11.0 inches in size.
- ❑ To ensure equity among applications, the amount of space allowed for the Project Narrative cannot be exceeded. (For Project Narratives submitted electronically in Microsoft Word, see separate requirements below under “Guidance for Electronic Submission of Applications.”)
 - Applications would meet this requirement by using all margins (left, right, top, bottom) of at least one inch each, and adhering to the 30 page limit for the Project Narrative.
 - Should an application not conform to these margin or page limits, SAMHSA will use the following method to determine compliance: The total area of the Project Narrative (excluding margins, but including charts, tables, graphs and footnotes) cannot exceed 58.5 square inches multiplied by 30. This number represents the full page less margins, multiplied by the total number of allowed pages.
 - Space will be measured on the physical page. Space left blank within the Project Narrative (excluding margins) is considered part of the Project Narrative, in determining compliance.

To facilitate review of your application, follow these additional guidelines. Failure to adhere to the following guidelines will not, in itself, result in your application being screened out and returned without review. However, following these guidelines will help reviewers to consider your application.

- ❑ Pages should be typed single-spaced in black ink, with one column per page. Pages should not have printing on both sides.

- ❑ Please number pages consecutively from beginning to end so that information can be located easily during review of the application. The cover page should be page 1, the abstract page should be page 2, and the table of contents page should be page 3. Appendices should be labeled and separated from the Project Narrative and budget section, and the pages should be numbered to continue the sequence.
- ❑ The page limit of a total of 30 pages for Appendices 1, 3 and 4 combined should not be exceeded.
- ❑ Send the original application and two copies to the mailing address in Section IV-6.1 of this document. Please do not use staples, paper clips, and fasteners. Nothing should be attached, stapled, folded, or pasted. Do not use heavy or lightweight paper or any material that cannot be copied using automatic copying machines. Odd-sized and oversized attachments such as posters will not be copied or sent to reviewers. Do not include videotapes, audiotapes, or CD-ROMs.

Guidance for Electronic Submission of Applications

SAMHSA is now offering the opportunity for you to submit your application to us either in electronic or paper format. Electronic submission is voluntary. No review points will be added or deducted, regardless of whether you use the electronic or paper format.

To submit an application electronically, you must use the www.Grants.gov apply site. You will be able to download a copy of the application package from www.Grants.gov, complete it off-line, and then upload and submit the application via the Grants.gov site. E-mail submissions will not be accepted.

You must search the Grants.gov site for the downloadable application package, by the Catalogue of Federal Domestic Assistance (CFDA) number. You can find the CFDA number on the first page of the funding announcement.

You must follow the instructions in the User Guide available at: www.Grants.gov apply site, on the Customer Support tab. In addition to the User Guide, you may wish to use the following sources for help:

- By e-mail: support@Grants.gov
- By phone: 1-800-518-4726 (1-800-518-GRANTS). The Customer Support Center is open from 7:00 a.m. to 9:00 p.m. Eastern Time, Monday through Friday.

If this is the first time you have submitted an application through Grants.gov, you must complete four separate registration processes before you can submit your application. Allow at least **two weeks** (10 business days) for these registration processes, prior to submitting your application. The processes are: DUNS Number registration, Central Contractor Registry (CCR) registration, Credential Provider registration, and Grants.gov registration.

It is strongly recommended that you submit your grant application using Microsoft Office products (e.g., Microsoft Word, Microsoft Excel, etc.). If you do not have access to Microsoft Office products, you may submit a PDF file. Directions for creating PDF files can be found on

the Grants.gov Web site. Use of file formats other than Microsoft Office or PDF may result in your file being unreadable by our staff.

The Project Narrative must be a separate document in the electronic submission. Formatting requirements for SAMHSA grant applications are described above, and in Appendix A of this announcement. These requirements also apply to applications submitted electronically, with the following exceptions only for Project Narratives submitted electronically in Microsoft Word. These requirements help to ensure the accurate transmission and equitable treatment of applications.

- *Text legibility:* Use a font of Times New Roman 12, line spacing of single space, and all margins (left, right, top, bottom) of one inch each. Adhering to these standards will help to ensure the accurate transmission of your document. If the type size in the Project Narrative of an electronic submission exceeds 15 characters per inch, or the text exceeds 6 lines per vertical inch, SAMHSA will reformat the document to Times New Roman 12, with line spacing of single space. Please note that this may alter the formatting of your document, especially for charts, tables, graphs, and footnotes.
- *Amount of space allowed for Project Narrative:* The Project Narrative for an electronic submission may not exceed 15,450 words. **Any part of the Project Narrative in excess of the word limit will not be submitted to review.** To determine the number of words in your Project Narrative document in Microsoft Word, select file/properties/statistics.

Applicants are strongly encouraged to submit their applications to Grants.gov early enough to resolve any unanticipated difficulties prior to the deadline. You may also submit a back-up paper submission of your application. Any such paper submission must be received in accordance with the requirements for timely submission detailed in Section IV-3 of this announcement. The paper submission must be clearly marked: “Back-up for electronic submission.” The paper submission must conform with all requirements for non-electronic submissions. If both electronic and back-up paper submissions are received by the deadline, the electronic version will be considered the official submission.

After you electronically submit your application, you will receive an automatic acknowledgement from Grants.gov that contains a Grants.gov tracking number. It is important that you retain this number.

The Grants.gov Web site does not accept electronic signatures at this time. Therefore, you must submit a signed paper original of the face page (SF 424), the assurances (SF 424B), and the certifications, and hard copy of any other required documentation that cannot be submitted electronically. **You must reference the Grants.gov tracking number for your application, on these documents with original signatures, and send the documents to the following address. The documents must be received at the following address within 5 business days of your electronic submission.** Delays in receipt of these documents may impact the score your application receives or the ability of your application to be funded.

For United States Postal Service:

Crystal Saunders, Director of Grant Review
Office of Program Services
Substance Abuse and Mental Health Services Administration
Room 3-1044
1 Choke Cherry Road
Rockville, MD **20857**
ATTN: Electronic Applications

For other delivery service (DHL, Falcon Carrier, Federal Express, United Parcel Service):

Crystal Saunders, Director of Grant Review
Office of Program Services
Substance Abuse and Mental Health Services Administration
Room 3-1044
1 Choke Cherry Road
Rockville, MD **20850**
ATTN: Electronic Applications

If you require a phone number for delivery, you may use (240) 276-1199.

2.4 SAMHSA Confidentiality and Participant Protection Requirements and Protection of Human Subjects Regulations

Applicants must describe procedures relating to Confidentiality, Participant Protection and the Protection of Human Subjects Regulations in Section H of the application, using the guidelines provided below. Problems with confidentiality, participant protection, and protection of human subjects identified during peer review of the application may result in the delay of funding.

Confidentiality and Participant Protection:

All applicants must describe how they will address the requirements for each of the following elements relating to confidentiality and participant protection.

1. Protect Clients and Staff from Potential Risks

- Identify and describe any foreseeable physical, medical, psychological, social, and legal risks or potential adverse effects as a result of the project itself or any data collection activity.
- Describe the procedures you will follow to minimize or protect participants against potential risks, **including risks to confidentiality**.
- Identify plans to provide guidance and assistance in the event there are adverse effects to participants.

- Where appropriate, describe alternative treatments and procedures that may be beneficial to the participants. If you choose not to use these other beneficial treatments, provide the reasons for not using them.

2. Fair Selection of Participants

- Describe the target population(s) for the proposed project. Include age, gender, and racial/ethnic background and note if the population includes homeless youth, foster children, children of substance abusers, pregnant women, or other targeted groups.
- Explain the reasons for including groups of pregnant women, children, people with mental disabilities, people in institutions, prisoners, and individuals who are likely to be particularly vulnerable to HIV/AIDS.
- Explain the reasons for including or excluding participants.
- Explain how you will recruit and select participants. Identify who will select participants.

3. Absence of Coercion

- Explain if participation in the project is voluntary or required. Identify possible reasons why participation is required, for example, court orders requiring people to participate in a program.
- If you plan to compensate participants, state how participants will be awarded incentives (e.g., money, gifts, etc.).
- State how volunteer participants will be told that they may receive services intervention even if they do not participate in or complete the data collection component of the project.

4. Data Collection

- Identify from whom you will collect data (e.g., from participants themselves, family members, teachers, others). Describe the data collection procedures and specify the sources for obtaining data (e.g., school records, interviews, psychological assessments, questionnaires, observation, or other sources). Where data are to be collected through observational techniques, questionnaires, interviews, or other direct means, describe the data collection setting.
- Identify what type of specimens (e.g., urine, blood) will be used, if any. State if the material will be used just for evaluation or if other use(s) will be made. Also, if needed, describe how the material will be monitored to ensure the safety of participants.

- Provide in **Appendix 2, “Data Collection Instruments/Interview Protocols,”** copies of all available data collection instruments and interview protocols that you plan to use.

5. Privacy and Confidentiality

- Explain how you will ensure privacy and confidentiality. Include who will collect data and how it will be collected.
- Describe:
 - How you will use data collection instruments.
 - Where data will be stored.
 - Who will or will not have access to information.
 - How the identity of participants will be kept private, for example, through the use of a coding system on data records, limiting access to records, or storing identifiers separately from data.

NOTE: If applicable, grantees must agree to maintain the confidentiality of alcohol and drug abuse client records according to the provisions of **Title 42 of the Code of Federal Regulations, Part II.**

6. Adequate Consent Procedures

- List what information will be given to people who participate in the project. Include the type and purpose of their participation. Identify the data that will be collected, how the data will be used and how you will keep the data private.
- State:
 - Whether or not their participation is voluntary.
 - Their right to leave the project at any time without problems.
 - Possible risks from participation in the project.
 - Plans to protect clients from these risks.
- Explain how you will get consent for youth, the elderly, people with limited reading skills, and people who do not use English as their first language.

NOTE: If the project poses potential physical, medical, psychological, legal, social or other risks, you **must** obtain written informed consent.

- Indicate if you will obtain informed consent from participants or assent from minors along with consent from their parents or legal guardians. Describe how the consent will be documented. For example: Will you read the consent forms? Will you ask prospective participants questions to be sure they understand the forms? Will you give them copies of what they sign?

- Include, as appropriate, sample consent forms that provide for: (1) informed consent for participation in service intervention; (2) informed consent for participation in the data collection component of the project; and (3) informed consent for the exchange (releasing or requesting) of confidential information. The sample forms must be included in **Appendix 3, “Sample Consent Forms”**, of your application. If needed, give English translations.

NOTE: Never imply that the participant waives or appears to waive any legal rights, may not end involvement with the project, or releases your project or its agents from liability for negligence.

- Describe if separate consents will be obtained for different stages or parts of the project. For example, will they be needed for both participant protection in treatment intervention and for the collection and use of data?
- Additionally, if other consents (e.g., consents to release information to others or gather information from others) will be used in your project, provide a description of the consents. Will individuals who do not consent to having individually identifiable data collected for evaluation purposes be allowed to participate in the project?

7. Risk/Benefit Discussion

Discuss why the risks are reasonable compared to expected benefits and importance of the knowledge from the project.

Protection of Human Subjects Regulations

Applicants may also have to comply with the Protection of Human Subjects Regulations (45 CFR 46), depending on the evaluation and data collection procedures proposed and the population to be served.

Applicants must be aware that even if the Protection of Human Subjects Regulations do not apply to all projects funded, the specific evaluation design proposed by the applicant may require compliance with these regulations.

Applicants whose projects must comply with the Protection of Human Subjects Regulations must describe the process for obtaining Institutional Review Board (IRB) approval fully in their applications. While IRB approval is not required at the time of grant award, these applicants will be required, as a condition of award, to provide the documentation that an Assurance of Compliance is on file with the Office for Human Research Protections (OHRP) and that IRB approval has been received prior to enrolling any clients in the proposed project.

General information about Protection of Human Subjects Regulations can be obtained on the web at <http://www.hhs.gov/ohrp>. You may also contact OHRP by e-mail (ohrp@osophs.dhhs.gov) or by phone (301/496-7005). SAMHSA-specific questions related to

Protection of Human Subjects Regulations should be directed to the program contact listed in Section VII of this RFA.

3. SUBMISSION DATES AND TIMES

Applications are due by close of business on July 1, 2005. **Hand carried applications will not be accepted. Applications may be shipped using only DHL, Falcon Carrier, Federal Express (FedEx), United Parcel Service (UPS), or the United States Postal Service (USPS).**

Your application must be received by the application deadline, or you must have proof of its timely submission as specified below.

- For packages submitted via DHL, Falcon Carrier, Federal Express (FedEx), or United Parcel Service (UPS), timely submission shall be evidenced by a delivery service receipt indicating the application was delivered to a carrier service at least 24 hours prior to the application deadline.
- For packages submitted via the United States Postal Service (USPS), proof of timely submission shall be a postmark not later than 1 week prior to the application deadline, and the following upon request by SAMHSA:
 - proof of mailing using USPS Form 3817 (Certificate of Mailing), or
 - a receipt from the Post Office containing the post office name, location, and date and time of mailing.

You will be notified by postal mail that your application has been received.

Applications not meeting the timely submission requirements above will not be considered for review. Please remember that mail sent to Federal facilities undergoes a security screening prior to delivery. Allow sufficient time for your package to be delivered.

If an application is mailed to a location or office (including room number) that is not designated for receipt of the application, and that results in the designated office not receiving your application in accordance with the requirements for timely submission, it will cause the application to be considered late and ineligible for review.

SAMHSA will not accept or consider any applications sent by facsimile.

SAMHSA is collaborating with www.grants.gov to accept electronic submission of applications. Please refer to Section IV-6.2 below for “Guidance for Electronic Submission of Applications.”

4. INTERGOVERNMENTAL REVIEW (E.O. 12372) REQUIREMENTS

Executive Order 12372, as implemented through Department of Health and Human Services (DHHS) regulation at 45 CFR Part 100, sets up a system for State and local review of applications for Federal financial assistance. A current listing of State Single Points of Contact (SPOCs) is included in the application kit and can be downloaded from the Office of Management and Budget (OMB) web site at www.whitehouse.gov/omb/grants/spoc.html.

- Check the list to determine whether your State participates in this program. You **do not** need to do this if you are a federally recognized Indian tribal government.
- If your State participates, contact your SPOC as early as possible to alert him/her to the prospective application(s) and to receive any necessary instructions on the State's review process.
- For proposed projects serving more than one State, you are advised to contact the SPOC of each affiliated State.
- The SPOC should send any State review process recommendations to the following address within 60 days of the application deadline:

For United States Postal Service:

Crystal Saunders, Director of Grant Review
 Office of Program Services
 Substance Abuse and Mental Health Services Administration
 Room 3-1044
 1 Choke Cherry Road
 Rockville, MD **20857**
 ATTN: SPOC – Funding Announcement No. SM-05-020

For other delivery service:

Crystal Saunders, Director of Grant Review
 Office of Program Services
 Substance Abuse and Mental Health Services Administration
 Room 3-1044
 1 Choke Cherry Road
 Rockville, MD **20850**
 ATTN: SPOC – Funding Announcement No. SM-05-020

In addition, community-based, non-governmental service providers who are not transmitting their applications through the State must submit a Public Health System Impact Statement (PHSIS) (approved by OMB under control no. 0920-0428; see burden statement below) to the head(s) of appropriate State or local health agencies in the area(s) to be affected no later than the pertinent receipt date for applications. The PHSIS is intended to keep State and local health officials informed of proposed health services grant applications submitted by community-based, non-governmental organizations within their jurisdictions. State and local governments and Indian tribal government applicants are not subject to these requirements.

The PHSIS consists of the following information:

- a copy of the face page of the application (SF 424); and

- a summary of the project, no longer than one page in length, that provides: 1) a description of the population to be served, 2) a summary of the services to be provided, and 3) a description of the coordination planned with appropriate State or local health agencies.

For SAMHSA grants, the appropriate State agencies are the Single State Agencies (SSAs) for substance abuse and mental health. A listing of the SSAs can be found on SAMHSA’s web site at www.samhsa.gov. If the proposed project falls within the jurisdiction of more than one State, you should notify all representative SSAs.

Applicants who are not the SSA must include a copy of a letter transmitting the PHSIS to the SSA in **Appendix 4, “Letter to the SSA.”** The letter must notify the State that, if it wishes to comment on the proposal, its comments should be sent not later than 60 days after the application deadline to:

For United States Postal Service:

Crystal Saunders, Director of Grant Review
 Office of Program Services
 Substance Abuse and Mental Health Services Administration
 Room 3-1044
 1 Choke Cherry Road
 Rockville, MD **20857**
 ATTN: SSA – Funding Announcement No. SM-05-020

For other delivery service:

Crystal Saunders, Director of Grant Review
 Office of Program Services
 Substance Abuse and Mental Health Services Administration
 Room 3-1044
 1 Choke Cherry Road
 Rockville, MD **20850**
 ATTN: SSA – Funding Announcement No. SM-05-020

In addition:

- Applicants may request that the SSA send them a copy of any State comments.
- The applicant must notify the SSA within 30 days of receipt of an award.

[Public reporting burden for the Public Health System Reporting Requirement is estimated to average 10 minutes per response, including the time for copying the face page of SF 424 and the abstract and preparing the letter for mailing. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0920-0428. Send

comments regarding this burden to CDC Clearance Officer, 1600 Clifton Road, MS D-24, Atlanta, GA 30333, ATTN: PRA (0920-0428).]

5. FUNDING LIMITATIONS/RESTRICTIONS

Cost principles describing allowable and unallowable expenditures for Federal grantees, including SAMHSA grantees, are provided in the following documents:

- Institutions of Higher Education: OMB Circular A-21
- State and Local Governments: OMB Circular A-87
- Nonprofit Organizations: OMB Circular A-122
- Appendix E Hospitals: 45 CFR Part 74

In addition, SAMHSA’s Technical Assistance Center for Mental Health Promotion and Youth Violence Prevention recipient must comply with the following funding restrictions:

- Funds must be used for purposes supported by TA Center for Mental Health Promotion and Youth Violence Prevention.
- No more than 20% of the grant award may be used for evaluation and data collection expenses.
- Funds may not be used to pay for the purchase or construction of any building or structure to house any part of the grant project. Applications may request up to \$75,000 for renovations and alterations of existing facilities.
- SAMHSA will not accept a “research” indirect cost rate. The grantee must use the “other sponsored program rate” or the lowest rate available.

6. OTHER SUBMISSION REQUIREMENTS

6.1 Where to Send Applications

Guidance for Electronic Submission of Applications is contained in Section IV-2.3 of this announcement. Following are instructions for submission of paper applications.

Send applications to the following address:

For United States Postal Service:

Crystal Saunders, Director of Grant Review
Office of Program Services
Substance Abuse and Mental Health Services Administration
Room 3-1044
1 Choke Cherry Road
Rockville, MD 20857

For other delivery service:

Crystal Saunders, Director of Grant Review
Office of Program Services
Substance Abuse and Mental Health Services Administration
Room 3-1044
1 Choke Cherry Road
Rockville, MD 20850

Do not send applications to other agency contacts, as this could delay receipt. Be sure to include “Technical Assistance Center for Mental Health Promotion and Youth Violence Prevention, RFA# **SM-05-020** in item number 10 on the face page of the application. If you require a phone number for delivery, you may use (240) 276-1199.

6.2 How to Send Applications

Guidance for Electronic Submission of Applications is contained in Section IV-2.3 of this announcement. Following are instructions for submission of paper applications.

Mail or deliver an original application and 2 copies (including appendices) to the mailing address provided above, according to the instructions in Section IV-3. The original and copies must not be bound. Do not use staples, paper clips, or fasteners. Nothing should be attached, stapled, folded, or pasted.

Hand carried applications will not be accepted. Applications may be shipped using only DHL, Falcon Carrier, Federal Express (FedEx), United Parcel Service (UPS), or the United States Postal Service (USPS).

SAMHSA will not accept or consider any applications sent by facsimile.

V. APPLICATION REVIEW INFORMATION

1. EVALUATION CRITERIA

Your application will be reviewed and scored according to the quality of your response to the requirements listed below for developing the Project Narrative (Sections A-D). These sections describe what you intend to do with your project.

- In developing the Project Narrative section of your application, use these instructions, which have been tailored to this program. **These are to be used instead of the “Program Narrative” instructions found in the PHS 5161-1.**
- You must use the four sections/headings listed below in developing your Project Narrative. Be sure to place the required information in the correct section, **or it will not**

be considered. Your application will be scored according to how well you address the requirements for each section.

- Reviewers will be looking for evidence of cultural competence in each section of the Project Narrative. Points will be assigned based on how well you address the cultural competence aspects of the evaluation criteria. SAMHSA’s guidelines for cultural competence can be found on the SAMHSA web site at www.samhsa.gov. Click on “Grants.”
- The Supporting Documentation you provide in Sections E-H and Appendices 1-5 will be considered by reviewers in assessing your response, along with the material in the Project Narrative.
- The number of points after each heading below is the maximum number of points a review committee may assign to that section of your Project Narrative. Bullet statements in each section do not have points assigned to them. They are provided to invite the attention of applicants and reviewers to important areas within each section.

Section A: Statement of Need (10 points)

- Describe the major issues involved in delivery of technical assistance services on an ongoing basis to diverse groups of grantees funded by different Federal initiatives while also considering each grantee’s current stage of grant implementation.
- Describe your understanding of grantee needs and issues in the following areas:
 - Service gaps, barriers, and other problems related to the need for infrastructure development to effect systemic change;
 - Engaging community stakeholders, including youth and family members, in all stages of strategic planning, implementation, evaluation, continuous quality improvement, and the sustaining of a project; and,
 - Implementing evidence based programs with an appropriate balance of fidelity and cultural adaptation.

Section B: Proposed Approach (40 points)

- Describe the purpose, goals, and objectives of the proposed project and offer evidence that the proposed activities meet all the guidelines set forth in Section I-2, “Expectations” of this document.
- Describe your current capability and plan for providing technical assistance services addressing all “Required Activities” set forth in Section I-2.1 of this document.
- Describe and justify the proposed technical assistance delivery services model.
- Describe the transition plan from the incumbent TA Center provider to ensure the coordination of an orderly transition of TA services, activities, and materials.

- Provide a logic model (see Glossary) that demonstrates the linkage between the identified need, the proposed approach, and outcomes.
- Describe how each grantee's stage of readiness in implementing grant activities will be addressed and how technical assistance service plans will be developed, implemented, and monitored.
- Discuss how you will ensure that the technical information you disseminate is relevant, reliable, culturally competent, and scientifically sound.
- Describe how you will develop, identify, maintain, and utilize a cadre of expert consultants for specialized technical assistance needs.
- Describe your approach in providing communications and social marketing technical assistance services.

Section C: Management and Staffing Plan (30 points)

- Provide a realistic time line (chart or graph) for the project, showing key activities, milestones, and responsible staff. [NOTE: The time line should be part of the Project Narrative. It should not be placed in an appendix.]
- Describe any other organizations that will participate, their roles and responsibilities, and their commitment to the project. Include letters of commitment/coordination/support from these organizations in Appendix 1 of the application.
- Identify key staff, personnel, and expert consultants, and their qualifications and experience for providing the types of technical assistance required by this project, demonstrating that they are appropriate and sufficient to conduct all technical assistance service activities. Provide a listing of all staff who will participate in the project, showing the role of each and their level of effort and qualifications.
- Discuss past management experience and current capability to deliver comprehensive, complex, and culturally appropriate technical assistance services across grant programs funded by various Federal initiatives.
- Describe the racial/ethnic characteristics of key staff and indicate how they are representative of the grantee communities.
- Describe how the steering committee will be utilized in managing the project, including but not be limited to proposed members, their resumes, and areas of expertise.
- Describe the resources available for the proposed project (e.g., facilities, equipment).

- Provide an organizational chart that clearly demonstrates reporting relationships and responsibilities and including the Steering Committee.

Section D: Evaluation and Data (20 points)

- Describe the process and outcome evaluation. Include specific performance measures and target outcomes related to the goals and objectives identified for the project in Section B of your Project Narrative.
- Document your ability to collect and report on the required performance measures as specified in Section I-2.2 of this document, including data required by SAMHSA to meet GPRA requirements. Specify and justify any additional measures you plan to use for your grant project.
- Describe plans for data collection, management, analysis, interpretation and reporting. Describe the existing approach to the collection of data, along with any necessary modifications. Be sure to include data collection instruments/interview protocols in **Appendix 2**.
- Describe a process to document lessons learned; barriers that inhibited implementation, how such barriers were resolved, and what should be done differently in the future to effect improvements.
- Discuss the reliability and validity of evaluation methods and instrument(s) in terms of diversity of the grantees to be served;
- Describe how collection, analysis and reporting of performance data will be integrated into the evaluation activities.
- Discuss how you will summarize findings in progress reports and in the final report of the project.

NOTE: Although the budget for the proposed project is not a review criterion, the Review Group will be asked to comment on the appropriateness of the budget after the merits of the application have been considered.

2. REVIEW AND SELECTION PROCESS

SAMHSA applications are peer-reviewed according to the review criteria listed above. For those programs where the individual award is over \$100,000, applications must also be reviewed by the appropriate National Advisory Council.

Decisions to fund a grant are based on:

- the strengths and weaknesses of the application as identified by peer reviewers and, when appropriate, approved by the appropriate National Advisory Council;

- availability of funds;
- equitable distribution of awards in terms of geography (including urban, rural and remote settings) and balance among target populations and program size; and
- after applying the aforementioned criteria, the following method for breaking ties: When funds are not available to fund all applications with identical scores, SAMHSA will make award decisions based on the application(s) that received the greatest number of points by peer reviewers on the evaluation criterion in Section V-1 with the highest number of possible points (Proposed Approach - 40 points). Should a tie still exist, the evaluation criterion with the next highest possible point value will be used, continuing sequentially to the evaluation criterion with the lowest possible point value, should that be necessary to break all ties. If an evaluation criterion to be used for this purpose has the same number of possible points as another evaluation criterion, the criterion listed first in Section V-1 will be used first.

VI. AWARD ADMINISTRATION INFORMATION

1. AWARD NOTICES

After your application has been reviewed, you will receive a letter from SAMHSA through postal mail that describes the general results of the review, including the score that your application received.

If you are approved for funding, you will receive an **additional** notice, the Notice of Grant Award, signed by SAMHSA's Grants Management Officer. The Notice of Grant Award is the sole obligating document that allows the grantee to receive Federal funding for work on the grant project. It is sent by postal mail and is addressed to the contact person listed on the face page of the application.

If you are not funded, you can re-apply if there is another receipt date for the program.

2. ADMINISTRATIVE AND NATIONAL POLICY REQUIREMENTS

2.1 General Requirements

- You must comply with all terms and conditions of the grant award. SAMHSA's standard terms and conditions are available on the SAMHSA web site at www.samhsa.gov/grants/generalinfo/grants_management.aspx.
- Depending on the nature of the specific funding opportunity and/or the proposed project as identified during review, additional terms and conditions may be negotiated with the grantee prior to grant award. These may include, for example:
 - actions required to be in compliance with human subjects requirements;
 - requirements relating to additional data collection and reporting;

- requirements relating to participation in a cross-site evaluation; or
 - requirements to address problems identified in review of the application.
- You will be held accountable for the information provided in the application relating to performance targets. SAMHSA program officials will consider your progress in meeting goals and objectives, as well as your failures and strategies for overcoming them, when making an annual recommendation to continue the grant and the amount of any continuation award. Failure to meet stated goals and objectives may result in suspension or termination of the grant award, or in reduction or withholding of continuation awards.
 - In an effort to improve access to funding opportunities for applicants, SAMHSA is participating in the U.S. Department of Health and Human Services “Survey on Ensuring Equal Opportunity for Applicants.” This survey is included in the application kit for SAMHSA grants. Applicants are encouraged to complete the survey and return it, using the instructions provided on the survey form.

3. REPORTING REQUIREMENTS

3.1 Progress and Financial Reports

- Grantees must provide semi annual and final progress reports. The final progress report must comprehensively summarize information from the semi annual reports, describe the accomplishments of the project, and describe next steps for implementing plans developed during the grant period.
- Grantees must provide annual and final financial status reports. These reports may be included as separate sections of semi annual and final progress reports or can be separate documents. Because SAMHSA is extremely interested in ensuring that infrastructure development and enhancement efforts can be sustained, your financial reports must explain plans to ensure the sustainability (see Glossary) of efforts initiated under this grant. Initial plans for sustainability should be described in year 1 of the grant. In each subsequent year, you should describe the status of the project, successes achieved and obstacles encountered in that year.
- SAMHSA will provide guidelines and requirements for these reports to grantees at the time of award and at the initial grantee orientation meeting after award. SAMHSA staff will use the information contained in the reports to determine the grantee’s progress toward meeting its goals.

3.2 Government Performance and Results Act

The Government Performance and Results Act (GPRA) mandates accountability and performance-based management by Federal agencies. To meet the GPRA requirements, SAMHSA must collect performance data (i.e., “GPRA data”) from grantees. The performance requirements for SAMHSA’s Technical Assistance Center for Mental Health Promotion and

Youth Violence Prevention cooperative agreement are described in Section I-2.2 of this document under “Data and Performance Measurement”.

3.3 Publications

If you are funded under this grant program, you are required to notify the Government Project Officer (GPO) and SAMHSA’s Publications Clearance Officer (240-276-2130) of any materials based on the SAMHSA-funded project that are accepted for publication.

In addition, SAMHSA requests that grantees:

- Provide the GPO and SAMHSA Publications Clearance Officer with advance copies of publications.
- Include acknowledgment of the SAMHSA grant program as the source of funding for the project.
- Include a disclaimer stating that the views and opinions contained in the publication do not necessarily reflect those of SAMHSA or the U.S. Department of Health and Human Services, and should not be construed as such.

SAMHSA reserves the right to issue a press release about any publication deemed by SAMHSA to contain information of program or policy significance to the substance abuse treatment/substance abuse prevention/mental health services community.

VII. AGENCY CONTACTS

For questions on program issues, contact:

Michelle Bechard
Division of Prevention, Traumatic Stress, and Special Programs
SAMHSA/Center for Mental Health Services
1 Choke Cherry Road, Room 6-1113
Rockville MD 20857
240-276-1872
Email: Michelle.bechard@samhsa.hhs.gov

For questions on grants management issues, contact:

Kimberly Pendleton
SAMHSA, Office of Program Services
Division of Grants Management
1 Choke Cherry Road, Room 7-1097
Rockville, MD 20857
240-276-1421
Email: kimberly.pendleton@samhsa.hhs.gov.

Appendix A – Checklist for Formatting Requirements and Screenout Criteria for SAMHSA Grant Applications

*SAMHSA's goal is to review all applications submitted for grant funding. However, this goal must be balanced against SAMHSA's obligation to ensure equitable treatment of applications. For this reason, SAMHSA has established certain formatting requirements for its applications. **If you do not adhere to these requirements, your application will be screened out and returned to you without review.** In addition to these formatting requirements, programmatic requirements (e.g., relating to eligibility) may be stated in the specific funding announcement. Please check the entire funding announcement before preparing your application.*

- Use the PHS 5161-1 application.
- Applications must be received by the application deadline or have a proof of timely submission, as detailed in Section IV-3 of this announcement.
- Information provided must be sufficient for review.
- Text must be legible. (For Project Narratives submitted electronically in Microsoft Word, see separate requirements in Section IV-2.3 of this announcement under “Guidance for Electronic Submission of Applications.”)
 - Type size in the Project Narrative cannot exceed an average of 15 characters per inch, as measured on the physical page. (Type size in charts, tables, graphs, and footnotes will not be considered in determining compliance.)
 - Text in the Project Narrative cannot exceed 6 lines per vertical inch.
- Paper must be white paper and 8.5 inches by 11.0 inches in size.
- To ensure equity among applications, the amount of space allowed for the Project Narrative cannot be exceeded. (For Project Narratives submitted electronically in Microsoft Word, see separate requirements in Section IV-2.3 of this announcement under “Guidance for Electronic Submission of Applications.”)
 - Applications would meet this requirement by using all margins (left, right, top, bottom) of at least one inch each, and adhering to the page limit for the Project Narrative stated in the specific funding announcement.
 - Should an application not conform to these margin or page limits, SAMHSA will use the following method to determine compliance: The total area of the Project Narrative (excluding margins, but including charts, tables, graphs and footnotes) cannot exceed 58.5 square inches multiplied by the total number of allowed pages. This number represents the full page less margins, multiplied by the total number of allowed pages.
 - Space will be measured on the physical page. Space left blank within the Project Narrative (excluding margins) is considered part of the Project Narrative, in determining compliance.

To facilitate review of your application, follow these additional guidelines. Failure to adhere to the following guidelines will not, in itself, result in your application being screened out and returned without review. However, the information provided in your application must be sufficient for review. Following these guidelines will help ensure your application is complete, and will help reviewers to consider your application.

- The 10 application components required for SAMHSA applications should be included. These are:
 - Face Page (Standard Form 424, which is in PHS 5161-1)
 - Abstract
 - Table of Contents
 - Budget Form (Standard Form 424A, which is in PHS 5161-1)
 - Project Narrative and Supporting Documentation
 - Appendices
 - Assurances (Standard Form 424B, which is in PHS 5161-1)
 - Certifications (a form in PHS 5161-1)
 - Disclosure of Lobbying Activities (Standard Form LLL, which is in PHS 5161-1)
 - Checklist (a form in PHS 5161-1)

- Applications should comply with the following requirements:
 - Provisions relating to confidentiality, participant protection and the protection of human subjects specified in Section IV-2.4 of the specific funding announcement.
 - Budgetary limitations as specified in Sections I, II, and IV-5 of the specific funding announcement.
 - Documentation of nonprofit status as required in the PHS 5161-1.

- Pages should be typed single-spaced in black ink, with one column per page. Pages should not have printing on both sides.

- Please number pages consecutively from beginning to end so that information can be located easily during review of the application. The cover page should be page 1, the abstract page should be page 2, and the table of contents page should be page 3. Appendices should be labeled and separated from the Project Narrative and budget section, and the pages should be numbered to continue the sequence.

- The page limits for Appendices stated in this announcement should not be exceeded.

- Send the original application and two copies to the mailing address in the funding announcement. Please do not use staples, paper clips, and fasteners. Nothing should be attached, stapled, folded, or pasted. Do not use heavy or lightweight paper or any material that cannot be copied using automatic copying machines. Odd-sized and oversized attachments such as posters will not be copied or sent to reviewers. Do not include videotapes, audiotapes, or CD-ROMs.

Appendix B – Glossary

Best Practice: Best practices are practices that incorporate the best objective information currently available from recognized experts regarding effectiveness and acceptability.

Cooperative Agreement: A cooperative agreement is a form of Federal grant. Cooperative agreements are distinguished from other grants in that, under a cooperative agreement, substantial involvement is anticipated between the awarding office and the recipient during performance of the funded activity. This involvement may include collaboration, participation, or intervention in the activity. HHS awarding offices use grants or cooperative agreements (rather than contracts) when the principal purpose of the transaction is the transfer of money, property, services, or anything of value to accomplish a public purpose of support or stimulation authorized by Federal statute. The primary beneficiary under a grant or cooperative agreement is the public, as opposed to the Federal Government.

Cost Sharing or Matching: Cost-sharing refers to the value of allowable non-Federal contributions toward the allowable costs of a Federal grant project or program. Such contributions may be cash or in-kind contributions. For SAMHSA grants, cost-sharing or matching is not required, and applications will not be screened out on the basis of cost-sharing. However, applicants often include cash or in-kind contributions in their proposals as evidence of commitment to the proposed project. This is allowed, and this information may be considered by reviewers in evaluating the quality of the application.

Cross-Site TA: Technical assistance services provided to groups of grantees based on shared demographic, geographic, and/or content specific issues. Examples of cross-site technical assistance include peer-to-peer mentoring; telephone conference calls; national conferences, grantee cohort and topic specific meetings, and new grantee orientation meetings; and on line learning forums and web based courses.

Evidence-based: The extent to which an intervention is supported by scientific data to indicate its effectiveness. Evidence based programs have met high standards of safety, efficacy, and effectiveness, based on the strength of the study design, magnitude of the beneficial effects of the intervention, sustainability of the effects over time, and replications of the benefits across different settings and populations.

Fidelity: Fidelity is the degree to which a specific implementation of a program or practice resembles, adheres to, or is faithful to the evidence-based model on which it is based. Fidelity is formally assessed using rating scales of the major elements of the evidence-based model. A toolkit on how to develop and use fidelity instruments is available from the SAMHSA-funded Evaluation Technical Assistance Center at <http://tecathsri.org> or by calling (617) 876-0426.

Grant: A grant is the funding mechanism used by the Federal Government when the principal purpose of the transaction is the transfer of money, property, services, or anything of value to accomplish a public purpose of support or stimulation authorized by Federal statute. The primary beneficiary under a grant or cooperative agreement is the public, as opposed to the Federal Government.

In-Kind Contribution: In-kind contributions toward a grant project are non-cash contributions (e.g., facilities, space, services) that are derived from non-Federal sources, such as State or sub-State non-Federal revenues, foundation grants, or contributions from other non-Federal public or private entities.

Logic Model: A logic model is a diagrammatic representation of a theoretical framework. A logic model describes the logical linkages among program resources, conditions, strategies, short-term outcomes, and long-term impact. More information on how to develop logics models and examples can be found through the resources listed in Appendix C.

Practice: A practice is any activity, or collective set of activities, intended to improve outcomes for people with or at risk for substance abuse and/or mental illness. Such activities may include direct service provision, or they may be supportive activities, such as efforts to improve access to and retention in services, organizational efficiency or effectiveness, community readiness, collaboration among stakeholder groups, education, awareness, training, or any other activity that is designed to improve outcomes for people with or at risk for substance abuse or mental illness.

Practice Support System: This term refers to contextual factors that affect practice delivery and effectiveness in the pre-adoption phase, delivery phase, and post-delivery phase, such as a) community collaboration and consensus building, b) training and overall readiness of those implementing the practice, and c) sufficient ongoing supervision for those implementing the practice.

Safe Schools/Healthy Students Initiative Grant Program: The SS/HS initiative is a collaborative grant program supported by three Federal departments (Education, Justice, and Health & Human Services) that provides funds for grantees to use state of the art knowledge about what programs and practices work best to foster resilience, promote safe and healthy environments in which children and youth can learn and develop, and prevent violence and substance abuse among youth, schools, and communities. A critical feature of the program is the linking and integration of existing and new services and activities into a comprehensive approach to violence prevention and healthy development that reflects the overall vision for the community, not the isolated objectives of a single agency or activity. The comprehensive plan SS/HS grantees develop must address the following six elements:

1. A safe school environment
2. Alcohol and other drug and violence prevention and early intervention programs
3. School and community mental health preventive and treatment intervention services
4. Early childhood psychosocial and emotional development services
5. Supporting and connecting schools and communities
6. Safe school policies

More information about SS/HS can be found at www.sshs.samhsa.gov.

Social Marketing: The social marketing concept differs from conventional “marketing” techniques. In social marketing, the objectives of the marketer are not focused on a product, but seek to use the core principles of marketing to influence social behaviors rather than to benefit the marketer. The beneficiaries of social marketing should be the “target audience” and the community served by the grant, and social marketing activities should ultimately enhance the health and well-being of the community. Examples of the types of social marketing services that could be provided include assistance with the development of grantee web sites; spokesperson training; assistance with the development of social marketing strategies; assistance with development of promotional materials; and, assistance with using technology in communications and social marketing tools for communicating among the coalition partners.

Stakeholder: A stakeholder is an individual, organization, constituent group, or other entity that has an interest in and will be affected by a proposed grant project.

Sustainability: Sustainability is the ability to continue a program or practice after SAMHSA grant funding has ended.

Targeted Capacity Expansion (TCE) Grant Program: TCE provides grant funds for mental health prevention and early intervention programs targeted to infants, toddlers, Pre School, and school aged children and/or adolescents in traditional and non-traditional mental health settings. The program asks grantees to:

1. Expand the capacity to implement evidence-based prevention programs and services that promote mental health, prevent mental and behavioral disorders, or intervene early in a population with a diagnosable disorder. This includes the establishment of appropriate training for service providers to develop expertise in evidence-based prevention and early intervention.
2. Build linkages among individuals and groups that serve the grantee’s targeted population.
3. Undertake community outreach to communicate to the larger community the importance of mental health and the capacity of well-executed preventive interventions to foster the development of all children.

More information about TCE can be found at http://www.samhsa.gov/Grants/grant_archives.aspx. Click on “FY 2003 Funding Announcements” then “SM-03-004 – Targeted Capacity Expansion: Prevention and Early Intervention”.

Target Population: The target population is the specific population of people whom a particular program or practice is designed to serve or reach.

Youth Violence Prevention (YVP) Grant Program: YVP provides funding for grantees to form and expand collaborations and programs dedicated to the prevention of youth violence, substance abuse, suicide, and other mental and behavioral problems. Grantees aim to reduce the prevalence and seriousness of youth violence and behavioral health problems by:

1. Building a community-wide understanding of the nature and extent of violence and other problem behaviors among youth in the community;
2. Mobilizing the community to address youth problems;
3. Implementing and evaluating effective prevention, early intervention, and treatment services to address youth violence; and
4. Being responsive to racial, ethnic, cultural, social, gender, sexual orientation, disability, linguistic, and age diversity in the community in all phases of collaborative activity, project implementation, service provision, and evaluation.

More information on YVP can be found at can be found at http://www.samhsa.gov/Grants/grant_archives.aspx. Click on “FY 2003 Funding Announcements” then “SM-03-005 – Community Collaborations to Prevent Youth Violence and Promote Youth Development”.

Wraparound Service: Wraparound services are non-clinical supportive services—such as child care, vocational, educational, and transportation services—that are designed to improve the individual’s access to and retention in the proposed project.

Appendix C – Logic Model Resources

Chen, W.W., Cato, B.M., & Rainford, N. (1998-9). Using a logic model to plan and evaluate a community intervention program: A case study. *International Quarterly of Community Health Education*, 18(4), 449-458.

Edwards, E.D., Seaman, J.R., Drews, J., & Edwards, M.E. (1995). A community approach for Native American drug and alcohol prevention programs: A logic model framework. *Alcoholism Treatment Quarterly*, 13(2), 43-62.

Hernandez, M. & Hodges, S. (2003). *Crafting Logic Models for Systems of Care: Ideas into Action*. [Making children's mental health services successful series, volume 1]. Tampa, FL: University of South Florida, The Louis de la Parte Florida Mental Health Institute, Department of Child & Family Studies. <http://cfs.fmhi.usf.edu> or phone (813) 974-4651

Hernandez, M. & Hodges, S. (2001). Theory-based accountability. In M. Hernandez & S. Hodges (Eds.), *Developing Outcome Strategies in Children's Mental Health*, pp. 21-40. Baltimore: Brookes.

Julian, D.A. (1997). Utilization of the logic model as a system level planning and evaluation device. *Evaluation and Planning*, 20(3), 251-257.

Julian, D.A., Jones, A., & Deyo, D. (1995). Open systems evaluation and the logic model: Program planning and evaluation tools. *Evaluation and Program Planning*, 18(4), 333-341.

Patton, M.Q. (1997). *Utilization-Focused Evaluation* (3rd Ed.), pp. 19, 22, 241. Thousand Oaks, CA: Sage.

Wholey, J.S., Hatry, H.P., Newcome, K.E. (Eds.) (1994). *Handbook of Practical Program Evaluation*. San Francisco, CA: Jossey-Bass Inc.

ILLUSTRATION OF DETAILED BUDGET AND NARRATIVE JUSTIFICATION (cont'd.)

Contractual Costs

Evaluation

Job Title	Name	Annual Salary	Salary being Requested	Level of Effort
Evaluator	J. Wilson	\$48,000	\$24,000	0.5
Other Staff		\$18,000	\$18,000	1.0
Fringe Benefits (25%)		\$10,500		

Travel

2 trips x 1 Evaluator (\$600 x 2)			\$ 1,200
per diem @ \$120 x 6			720
Supplies (General Office)			500
Evaluation Direct			\$54,920
Evaluation Indirect Costs (19%)			\$10,435
Evaluation Subtotal			\$65,355

Training

Job Title	Name	Level of Effort	Salary being Requested
Coordinator	M. Smith	0.5	\$ 12,000
Admin. Asst.	N. Jones	0.5	\$ 9,000
Fringe Benefits (25%)			\$ 5,250

Travel

2 Trips for Training			
Airfare @ \$600 x 2			\$ 1,200
Per Diem \$120 x 2 x 2 days			480
Local (500 miles x .24/mile)			120

Supplies

Office Supplies			\$ 500
Software (WordPerfect)			500

Other

Rent (500 Sq. Ft. x \$9.95)			\$ 4,975
Telephone			500
Maintenance (e.g., van)			\$ 2,500
Audit			\$ 3,000

Training Direct	\$ 40,025
Training Indirect	\$ -0-

Enter Contractual subtotal on 424A, Section B, 6.f. \$105,380

CALCULATION OF FUTURE BUDGET PERIODS
(based on first 12-month budget period)

Review and verify the accuracy of future year budget estimates. Increases or decreases in the future years must be explained and justified and no cost of living increases will be honored. (NOTE: new salary cap of \$180,100 is effective for all FY 2005 awards.) *

	First 12-month Period	Second 12-month Period	Third 12-month Period
Personnel			
Project Director	30,000	30,000	30,000
Secretary**	9,000	18,000	18,000
Counselor	25,000	25,000	25,000
TOTAL PERSONNEL	64,000	73,000	73,000

*Consistent with the requirement in the Consolidated Appropriations Act, Public Law 108-199.

**Increased from 50% to 100% effort in 02 through 03 budget periods.

Fringe Benefits (24%)	15,360	17,520	17,520
Travel	5,400	5,400	5,400
Equipment	-0-	-0-	-0-
Supplies***	1,000	520	520

***Increased amount in 01 year represents costs for software.

Contractual Evaluation****	65,355	67,969	70,688
Training	40,025	40,025	40,025

****Increased amounts in 02 and 03 years are reflected of the increase in client data collection.

Other	1,500	1,500	1,500
Total Direct Costs	192,640	205,934	208,653
Indirect Costs (15% S&W)	9,600	9,600	9,600
TOTAL COSTS	202,240	216,884	219,603

The Federal dollars requested for all object class categories for the first 12-month budget period are entered on Form 424A, Section B, Column (1), lines 6a-6i. The total Federal dollars requested for the second through the fifth 12-month budget periods are entered on Form 424A, Section E, Columns (b) – (e), line 20. The RFA will specify the maximum number of years of support that may be requested.