

## Section 3

# SAMHSA Application Section

---

### Part I – Application Requirements

The following information must be included and in the following order for your SAMHSA section of the application to be complete. **In the event SAMHSA funds are not sought, a project narrative for mental health and substance abuse services is still required (Sections A-D). No other portions of this section are necessary.**

**FACE PAGE:** Use Standard Form 424 to identify the specific items related to mental health and substance abuse services. In signing the face page of the application, you are agreeing that the information is accurate and complete.

**BUDGET FORM:** Fill out sections B, C, and E of the Standard Form 424A. The budget information will describe how SAMHSA funds will be used to provide substance abuse treatment, mental health services and related support services by the lead and/or partnering agencies.

**PROJECT NARRATIVE:** The Project Narrative describes the specific mental health and substance abuse services and treatments that will be provided, who will provide them and how they will be provided. The Project Narrative may not be longer than 25 pages. You must use a font size of 12 point or equivalent. Applications exceeding 25 single-spaced pages and not meeting the font point size requirement will not be reviewed. Reviewers will be looking for evidence of cultural competence in each section of the Project Narrative. Points will be assessed on the cultural competency as well as the review criteria. See Appendix D for SAMHSA’s guidelines for cultural competence.

The project narrative should address the following topics:

#### Section A: Substance Abuse Treatment and Mental Health Services (10 points)

1. Describe how funds will be used to improve, expand, coordinate, or develop substance abuse, mental health, and/or co-occurring treatment services and related supports for persons experiencing chronic homelessness.
2. Document that the proposed intervention approach is an evidence-based/promising practice. SAMHSA has a description of important information about best practice for the organization, structure, content and effectiveness of mental health and substance abuse services for persons with a history of chronic homelessness. You can find it by going to [www.samhsa.gov](http://www.samhsa.gov) and clicking on “homelessness” under “hot topics”.
3. Document how the target population will receive appropriate assessment, determination of level-of-care, and effective treatment.
4. Document how substance abuse and mental health treatment services will be effectively linked with programs that provide permanent housing.
5. Document how the basic needs of service recipients for food, clothing and safety will be met.
6. Where relevant, document the ability of the system to move clients from one treatment system component to another with no gap in service (e.g., from inpatient to outpatient treatment).
7. Discuss age, race/ethnic, cultural, language, sexual orientation, disability, literacy, and gender issues relative to the target population, and how the project will address these issues.

8. Describe how client and program information will be coordinated and client services will be tracked through the treatment and service network. Describe the current and proposed information systems and their compatibility for communication across sites and agencies.
9. Describe the involvement of members of the target population and/or their advocates in the design and implementation of the proposed project.

**Section B: Sustainability (7 points)**

1. Describe the approach that will be taken to develop enduring partnerships with established mental health and substance abuse treatment programs to serve grant participants.
2. Describe the process for identifying participants' eligibility for public entitlements and how they will be helped to become enrolled.
3. Describe the business practices that will be employed to ensure that the applicant has the capacity to bill for behavioral health services to target mainstream healthcare payers such as Medicaid.

**Section C: Evaluation/Methodology (3 points)**

1. Describe plans to comply with GPRA requirements, including the collection of CMHS's and CSAT's GPRA Core Client Outcomes. You can find these by going to [www.samhsa.gov](http://www.samhsa.gov) and clicking on "homelessness" under "hot topics".
2. Describe the plans for conducting a process evaluation of the implementation of the proposed program.
3. Discuss plans for evaluating outcomes of the program including how GPRA client outcomes measures will be used as well as any additional outcome measures to be collected.
4. Describe plans for using interim evaluation findings to improve the quality of services.
5. Describe plans for reporting and disseminating the project's findings.
6. State agreement to participate in all technical assistance and training activities designed to support GPRA and other evaluation requirements.

**Section D: Project Management: Implementation Plan, Organization, Staff, Equipment/Facilities, and Other Support (5 points)**

1. Demonstrate the capability of the lead applicant or partnering agency that will be receiving SAMHSA funds, its commitment to serving the target population, and its experience with similar activities and populations, including current or past participation in homeless programs supported by foundations, Federal government, or other sources.
2. Provide a staffing plan, including the level of effort and qualifications of the key personnel.
3. Present a management plan for how the services will be provided, including any sub-contractual arrangements proposed; describe the organizations that have committed to be involved in this activity; present their roles in the project; and address their relevant experience.
4. Present a time line for implementing the services and treatment, and demonstrate that the project can be fully operational within four months.
5. Describe the resources available (e.g., facilities, equipment); provide evidence that services will be provided in locations and facilities that are adequate, accessible, ADA compliant, and conducive to serving

the target population.

6. Provide evidence that the proposed staff has requisite training, experience, and cultural sensitivity to provide services to the target population. Show evidence of the appropriateness of the proposed staff to the language, age, gender, sexual orientation, disability, literacy, and ethnic, racial, and cultural factors of the target population.
7. Provide evidence that required resources not included in the Federal budget request are adequate and accessible.
8. Provide evidence that SAMHSA funds will complement or leverage funds from other sources.
9. Provide a plan to secure resources or obtain support to continue activities funded by this program at the end of the period of Federal funding.

**SUPPORTING DOCUMENTATION:** The supporting documentation for your application should include the following:

- Literature Citations. This section must contain complete citations, including titles and all authors, for any literature you cite in your application.
- Budget Justification, Existing Resources, Other Support. You must provide a narrative justification for 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.
- Biographical Sketches and Job Descriptions. Include a biographical sketch for the project director and for other key positions. Each sketch should not be longer than 2 pages. If the person has not been hired, but has been identified, include a letter of commitment and biographical sketch from the individual. Include job descriptions for key personnel. They should not be longer than 1 page each.
- Confidentiality and SAMHSA Participant Protection (SPP). The seven areas you need to address in this section are outlined after the Project Narrative description in this document.

#### **APPENDICES TO THE APPLICATION**

- Use only the appendices listed below.
- Do not use appendices to extend or replace any of the sections of the Project Narrative/Review Criteria.
- Do not use more than **30 pages** for Appendices 1 through 3.

**Appendix 1:** Non-Supplantation of Funds Letter

**Appendix 2:** Sample Consent Forms (no page limit)

**Appendix 3:** Confidentiality and SAMHSA Participant Protection (SPP)

**Appendix 4:** Data Collection Instruments/Interview Protocols

**Appendix 5:** Documentation of Licensure, Certification, or Accreditation

**Appendix 6:** Letter to Single State Authorities

SAMHSA has determined that grants awarded under this announcement must meet SAMHSA Participant Protection requirements. You must address 7 areas regarding confidentiality and participant protection in your supporting documentation. There are no page limitations, and no points will be assigned to this section.

This information will:

- Reveal if the protection of participants is adequate or if more protection is needed.
- Be considered when making funding decisions.
- SAMHSA will place restrictions on the use of funds until all participant protection issues are resolved.
- Some projects may expose people to risks in many different ways. In this section of your support documentation you will need to:
  - Report any possible risks for people in your project.
  - State how you plan to protect them from those risks.
  - Discuss how each type of risk will be dealt with, **or why it does not apply to the project.**

The following 7 issues must be discussed:

1. Protect Clients and Staff from Potential Risks:

- Identify and describe any foreseeable physical, medical, psychological, social, legal, or other risks or adverse effects.
- Discuss risks that are due either to participation in the project itself, or to the evaluation activities.
- Describe the procedures that will be followed to minimize or protect participants against potential health or confidentiality risks. Make sure to list potential risks in addition to any confidentiality issues.
- Give plans to provide help if there are adverse effects to participants, if needed in the project.
- Where appropriate, describe alternative treatments and procedures that might be beneficial to the subjects.
- Provide reasons if you do not decide to use other beneficial treatments.

2. Fair Selection of Participants:

- Describe the target population(s) for the proposed project. Include age, gender, racial/ethnic background. Address other important factors such as, foster children, children of substance abusers, or other special population groups.
- Explain the reasons for including or excluding special types of participants, such as pregnant women and teens, mentally or physically disabled homeless people, or others who are likely to be vulnerable.
- 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 it is required. For example, court orders requiring persons who are homeless to participate in a program.
- If you plan to pay participants, state how participants will be awarded money or gifts.
- State how volunteer participants will be told that they may receive services and incentives even if they do not complete the study.

#### 4.Data Collection:

- Identify from whom you will collect data. For example, participants themselves, family members, teachers, others. Explain how you will collect data and list the site. For example, will you use school records, interviews, psychological assessments, observation, questionnaires, or other sources?
- Identify what type of specimens (e.g., urine, blood) will be used, if any. State if the material will be used just for evaluation and research or if other use will be made. Also, if needed, describe how the material will be monitored to ensure the safety of participants.
- Provide in Appendix No. 4, "Data Collection Instruments/Interview Protocols," copies of all available data collection instruments and interview protocols that you plan to use.

#### 5.Privacy and Confidentiality:

- List 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. Include how the data will be used and how you will keep the data private.
- State:
  - If their participation is voluntary.
  - Their right to leave the project at any time without problems.
  - Risks from the project.
  - Plans to protect clients from these risks.
- Explain how you will get consent for homeless participants in general, and for the homeless and/or guardians with limited reading skills, and for the homeless and/or guardians who do not use English as their first language.

Note: If the project poses potential physical, medical, psychological, legal, social, or other risks, you should get written informed consent.

- Indicate if you will get informed consent from participants or 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 sample consent forms in Appendix 2 of your application, titled "Sample Consent Forms." 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 the treatment intervention and for the collection of data. 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.

**ASSURANCES NON-CONSTRUCTION PROGRAMS** - This list of Assurances for Non-Construction Programs (Standard Form 424B) must be reviewed, signed on the second page by the individual identified in Item 18a of the Face Page and submitted with the application. Failure to submit the signed 424B with the application will delay any possible awards.

**CERTIFICATIONS** - A list of Certifications is included in the PHS 5161-1. This list must be reviewed, signed on the last page by the individual identified in Item 18a of the Face Page and submitted with the application. Failure to submit the signed Certifications list with the application will delay any possible award.

**DISCLOSURE OF LOBBYING ACTIVITIES** - The guidance and format for disclosing lobbying activities is located on the last several pages of the PHS 5161-1. Do not fill out these forms unless you are disclosing any lobbying activities that have taken place.

## **PART II - SPECIAL CONSIDERATIONS/REQUIREMENTS**

### **Population Inclusion Requirement**

Regulations of the Department of Health and Human Services (45 CFR 80) regarding Title VI of the Civil Rights Act of 1964, as implemented by SAMHSA in accordance with its administrative policies, require that no person shall be excluded from participation, denied benefits, or discriminated against because of race, color, national origin, sexual orientation, gender, age and ability.

SAMHSA expects applicants to include all populations with cultural-, age-, ability-, socioeconomic status- and gender-specific needs in the target population where feasible and appropriate. The project's design, intervention strategies and staff qualifications must ensure appropriateness, and competence to address the requisites of these groups. In general, all components of the project should reflect the needs, culture, and demographics of the targeted population.

Applicants cannot exclude individuals from participation because of race/ethnicity, gender, sexual orientation, age, or ability. When a proposal excludes any one of these groups from the project's target population, a justification for this action must be included in the application.

In general, when evaluating projects using a common intervention with populations differing by race/ethnicity, gender, or developmental age group, it is important to ascertain whether the intervention is differentially effective for the different populations. Such statistical analyses should be done whenever the size of the subpopulation(s) can support such analysis. The results should be reported to include information about as many demographics as feasible.

### **Government Performance Monitoring**

The Government Performance and Results Act (GPRA) was enacted in 1993 to hold Federal agencies accountable for achieving program results. Its provisions were phased in over several years and became fully effective in FY 1999. The law places increased emphasis on evaluation and on the collection and reporting of performance data, particularly outcome data. The performance reporting requirements of this law may result in the need to request additional data, including client outcome data where appropriate, from funded programs.

### **Healthy People 2000**

The Public Health Service (PHS) is committed to achieving the health promotion and disease prevention objectives of Healthy People 2000, a PHS-led national activity for setting priority areas. Part I-Programmatic Guidance lists the priority area(s) applicable to the particular program under which you are applying. Potential applicants may obtain a copy of Healthy People 2000 (Full Report: Stock No. 017-001-00474-0; or Summary Report: Stock No. 017-001-00473-1) through the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402-9325 (Telephone: 202-512-1800).

### **Consumer Bill of Rights and Responsibilities**

Where applicable, service projects are encouraged to follow the Consumer Bill of Rights and Responsibilities as developed by the President's Advisory Commission on Consumer Protection and Quality in the Health Care Industry.

Potential applicants may obtain a free copy of the Commission's Final Report, *Quality First: Better Health Care for All Americans* (ISBN 0-16-049533-4) from: Consumer Bill of Rights; Box 2429; Columbia, MD 21045-1429 or by calling (800) 358-9295 or via the Internet at (<http://www.hcqualitycommission.gov/final>).

### **Promoting Nonuse of Tobacco**

SAMHSA and the PHS strongly encourage all grant and contract recipients to provide a smoke-free workplace and to promote the nonuse of all tobacco products. In addition, Public Law 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities (or in some cases, any portion of a facility) in which regular or routine education, library, day care, health care or early childhood development services are provided to children. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

### **Supplantation of Existing Funds**

It is the intent of this program to support new or enhanced projects; therefore, the Center, in its award decision making process, will give special consideration to applicants who certify that Federal funds will not be used to supplant or replace funds already budgeted for proposed projects. A letter certifying that Federal funds will not be used to supplant/replace funds already committed may be provided in an appendix entitled "Non-Supplantation of Funds."

### **Continuation of Services**

It is important to ensure that services funded under SAMHSA programs do not cease abruptly with the end of Federal funding. Therefore, proposed projects must include plans for phasing out services, ensuring appropriate referrals of patients/clients still requiring services, or obtaining support to continue services after the grant project period has ended.

### **Single State Agency (SSA) Coordination**

Coordination with the SSA helps ensure communication, reduce duplication, and facilitate continuity. Therefore, applicants who are not the SSA, must include in an appendix to the application entitled "Letter to SSA," a copy of a letter sent to the SSA that (1) transmits a copy of the face page of the application (Standard Form 424) and a copy of the project abstract, and (2) notifies the State that, if it wishes to comment on the proposal, its comments should be sent not later than 60 days after the deadline date for the receipt of applications to:

Division of Extramural Activities, Policy, and Review  
 Substance Abuse and Mental Health Services Administration  
 Parklawn Building, Room 17-89  
 5600 Fishers Lane  
 Rockville, MD 20857  
 ATTN: SSA - GFA No.  
 [Note: Applicants should fill in the pertinent GFA number.]

Applicants may request that the SSA send them a copy of any State comments.

A listing of SSAs can be found in the grant application kit. If the proposed project falls within the jurisdiction of more than one State, all representative SSAs should be involved.

### **Intergovernmental Review (E.O. 12372)**

Executive Order 12372, as implemented through DHHS regulations at 45 CFR Part 100, sets up a system for State and local government review of applications for Federal financial assistance. Applicants (other than federally recognized Indian tribal governments) should contact the State's Single Point of Contact (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, the applicant is advised to contact the SPOC of each affected State. A current listing of SPOCs is included in the application kit. The SPOC should send any State review process recommendations to the following address:

Division of Extramural Activities, Policy, and Review  
Substance Abuse and Mental Health Services Administration  
Parklawn Building, Room 17-89  
5600 Fishers Lane  
Rockville, MD 20857  
ATTEN: SPOC - GFA No.  
[Note: Applicants should fill in the pertinent GFA number.]

The due date for State process recommendations is no later than 60 days after the deadline date for the receipt of applications. SAMHSA does not guarantee to accommodate or explain SPOC comments that are received after the 60-day cut-off.

### **Public Health System Reporting Requirements**

**[Note: State and local governments and Indian tribal government applicants are not subject to the following Public Health System Reporting Requirements.]**

The Public Health System Impact Statement (PHSIS) is intended to keep State and local health officials apprised of proposed health services grant applications submitted by community-based nongovernmental organizations within their jurisdictions.

Community-based nongovernmental service providers who are not transmitting their applications through the State must submit a PHSIS to the head(s) of the appropriate State and local health agencies in the area(s) to be affected not later than the pertinent receipt date for applications. This PHSIS consists of the following information:

- a. A copy of the face page of the application (Standard Form 424).
- b. A summary of the project (PHSIS), not to exceed one page, which provides:
  - (1) A description of the population to be served.
  - (2) A summary of the services to be provided.
  - (3) A description of the coordination planned with the appropriate State or local health agencies.

---

**TERMS/CONDITIONS/REQUIREMENTS**

---

**Terms and Conditions of Support**

Federal regulations at Title 45 CFR Parts 74 and 92, generic requirements concerning the administration of grants, are applicable to SAMHSA awards.

Grants must be administered in accordance with the PHS Grants Policy Statement, DHHS Publication No. (OASH) 94-50,000 (Rev. April 1, 1994).

Grant funds may be used only for reasonable expenses clearly allocable to and necessary for carrying out the approved activities, including both direct costs, which can be specifically identified with the project, and allowable indirect costs. In order to recover the allowable indirect costs of a project, it may be necessary to negotiate and establish an indirect cost rate (unless such a rate has already been established for the applicant organization). For information and assistance regarding the timing and submission of an indirect cost rate proposal, applicants should contact the appropriate office of the DHHS Division of Cost Allocation referenced in the list of "Offices Negotiating Indirect Cost Rates," included in the application kit. No grantee can receive a profit from any DHHS grant.

All grantees are required to comply with the audit requirements at Title 45 CFR 74.26 or 92.26, as appropriate.

**Allowable Items of Expenditure**

Subject to applicable cost principles, allowable items of expenditure for which grant support may be requested include:

- o Salaries, wages, and fringe benefits of professional and other supporting staff engaged in the project activities.
- o Travel required for carrying out activities under the approved project.
- o Supplies, communications, and rental of equipment and space directly related to approved project activities.
- o Contracts for performance of activities under the approved project.
- o Other such items necessary to support approved project activities so long as they are allowable under the applicable cost principles.

Funds cannot be used for the purchase or construction of a facility to house any portion of the proposed project. Any funds proposed to be utilized for renovation expenses must be detailed and linked directly to programmatic activities. Any lease arrangements in association with the proposed project utilizing PHS funds may not be funded by PHS beyond the project period nor may the portion of the space leased with PHS funds be used for purposes not supported by the program.

**Alterations and Renovations**

Costs for alterations and renovations (A&R) will be allowable only where such alterations and renovations are necessary for the success of the project. Also, consistent with the PHS Grants Policy Statement, the maximum amount of funds budgeted or used for A&R under a single grant during three consecutive budget periods (whether or not the 3 years overlap two distinct competitive segments of support) cannot exceed the lesser of \$150,000 or 25 percent of the total funds reasonably expected to be awarded by PHS for direct costs for such 3-year period. (The maximum amount of PHS grant funds that may be applied to any single A&R project is \$150,000.) Construction costs are never allowed.

**Reporting Requirements**

Annual and final progress reports and financial status reports will be required as specified in the PHS Grants Policy Statement requirements.

**Lobbying Prohibitions**

Appropriated funds may not be used, other than for normal and recognized executive-legislative relationships, for lobbying the Congress or State legislatures. Specifically, Federal law prohibits the use of appropriated funds for publicity or propaganda purposes or for the preparation, distribution, or use of information designed to support or defeat legislation pending before the Congress or State legislatures. This has been construed to include "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. This prohibition applies not only to Federal agencies, but also prohibits grantees and contractors of Federal agencies from using Federal funds to conduct such activities. In addition to "grass roots" lobbying, Federal grantees are prohibited from using Federal funds to conduct any direct lobbying activities. This includes any activities designed to influence legislation appropriations pending before the Congress or any State legislature.



## APPENDIX A

**INSTRUCTIONS FOR COMPLETING NEW  
APPLICATION FOR FEDERAL ASSISTANCE  
STANDARD FORM 424 (Rev. 4/88)**

Standard Form (SF) 424, "Application for Federal Assistance," is also known as the "Face Page" of the PHS Grant Application Form 5161-1 (Rev. 5/96). The following instructions replace those found on the reverse side of the SF 424.

- Block 1.**        **Type of Submission:** Under "Application" check "Non-Construction". Under "Preapplication" leave both boxes blank.
- Block 2.**        **DATE SUBMITTED:** Insert the date the application is sent to the State or the Federal agency.
- **Applicant Identifier:** Insert the applicant's control number (if applicable).
- Block 3.**        **(State Use Only.) DATE RECEIVED BY STATE:** (if applicable).
- **State Application Identifier:** Insert the applicant's control number (if applicable).
- Block 4.**        **(Federal Use Only.) DATE RECEIVED BY FEDERAL AGENCY:** Leave this block blank.
- **Federal Identifier:** Leave this block blank.
- Block 5.**        **APPLICANT INFORMATION:**
- **Legal Name:** Insert the legal name of the applicant organization.
- **Organizational Unit:** Insert the name of the primary organizational unit which will undertake the proposed activity.
- **Address:** Insert the complete mailing address of the applicant organization.
- **Name and telephone number of the person to be contacted on matters involving this application (give area code):** Insert the name, area code and telephone and FAX numbers and an E-mail/Internet address (if available) for the project director/principal investigator. Project director/principal investigator is defined as an employee of the applicant organization who will direct the grant. **NOTE: This individual must be the same person identified in the right-hand block of Part C of the Checklist in the PHS Grant Application Form 5161-1. This is the individual responsible for directing the proposed program or project. (This is usually not the authorized representative as defined in Block 18.)**
- Block 6.**        **EMPLOYER IDENTIFICATION NUMBER (EIN):** Insert the 9-digit EIN as assigned by the Internal Revenue Service.
- Block 7.**        **TYPE OF APPLICANT:** Insert the appropriate letter in the box provided. (Non-profit applicant organizations should be identified as such under N. Other.)
- Block 8.**        **TYPE OF APPLICATION:** Check "New."
- Block 9.**        **NAME OF FEDERAL AGENCY:** Insert SAMHSA and the specific Center (either CMHS, CSAP or CSAT) from which support is being requested.

- Block 10**      **CATALOG OF FEDERAL DOMESTIC ASSISTANCE (CFDA) NUMBER:** Insert the CFDA number that is provided on the cover page of the GFA.
- **Title:** Insert the GFA number and the short title of the GFA. (Refer to the Application Procedures section of the GFA.)
- Block 11.**      **DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:** Insert a brief descriptive title of the proposed project. Do not exceed 56 typewritten spaces, including spaces between words and all punctuation. A new application must have a different title from any other PHS project with the same project director/principal investigator.
- Block 12.**      **AREAS AFFECTED BY PROJECT:** Insert the name of the largest political jurisdictions affected (e.g., the name of the specific State, counties, cities).
- Block 13.**      **PROPOSED PROJECT:** Leave the Start and Ending Date blocks blank. These dates will be determined if the project is funded.
- Block 14.**      **CONGRESSIONAL DISTRICTS OF:**
- **a.    Applicant:** Insert the applicant organization's Congressional District.
- **b.    Project:** Insert any Congressional District(s) directly affected by the project.
- Block 15.**      **ESTIMATED FUNDING:**
- **a.    Federal:** Insert the total amount of **direct** costs being requested from SAMHSA under this GFA for the **first 12-month period** of support. (This figure should be the same amount as that indicated on Form 424A, Section B, column (1) line 6.i.)
- **b.-e. Applicant, State, Local, Other:** Insert the amount to be contributed and/or the value of in-kind contributions for the first 12-month period of support by each contributor (i.e., Applicant, State, Local, Other), as appropriate. [These figures should be the same amounts as those indicated on Form 424A, Section C, line 12, columns (b), (c), and (d)].
- **f.    Program Income:** Insert the amount of Program Income anticipated to be earned by the grantee for the first 12-month period of support, if any. (This figure should be the same amount as that indicated on Form 424A, Section B, line 7, column (1).
- Program income is defined as income earned by a grantee from activities part or all of the cost of which is borne as a direct cost by a grant **or** income that would not have occurred except for the existence of the grant supported project. Examples of program income are: fees for services supported with grant funds such as laboratory drug testing, rental or usage fees for use of equipment purchased with grant funds, third-party patient reimbursement where such reimbursement occurs because of the grant-supported activity (including Medicaid/Medicare), sale of commodities such as educational materials (including curricula) developed under the grant or equipment purchased with grant funds. Not included would be revenues raised by a government recipient under its governing powers, interest on grant funds, rebates, credits, discounts, or refunds, results of fund raising (given that no grant funds were used to accomplish the fund raising activity) and income earned by procurement contractors under a procurement contract awarded by the grantee.
- **g.    TOTAL:** Insert the total of lines 15a through 15f.
- Block 16.**      **IS APPLICATION SUBJECT TO REVIEW BY STATE UNDER EXECUTIVE ORDER 12372 PROCESS?** Applicants should refer to the GFA to determine if the program is covered by

the Federal Executive Order (E.O.) 12372. If the program is covered, applicants should refer to the listing of those States that currently participate in the E.O. 12372 process. This listing is provided in the application kit. If your State does participate, you should communicate with the State Single Point of Contact (SPOC) to ascertain whether this program has/has not been selected for review by the State. Based on answers to the above, the appropriate sections of Block 16 should be completed.

**Note: If this program is covered by E.O. 12372, applications must be made available for State review, and the applicant should advise the State to submit comments within 60 days of the application receipt date to the individual identified in the GFA, under the E.O. 12372 section.**

**Block 17.** **IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?** This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans and taxes.

**Block 18.**

-- **a., b. and c.:** Insert the name, title, area code and telephone number of the authorized representative of the applicant organization in the spaces provided.

**Note: The authorized representative is the individual with the legal authority to obligate the applicant organization financially and otherwise.**

-- **d. and e.:** The authorized representative is required to sign and date the application in the spaces provided.



## APPENDIX B

### INSTRUCTIONS FOR COMPLETING BUDGET INFORMATION -- Non-Construction Programs Standard Form 424A (Rev. 4/88)

Standard Form (SF) 424A, "Budget Information -- Non-Construction Programs," is a double-sided form composed of Sections A through F. Because the 424A is a generic form that was designed to be used by agencies across the Federal Government, the instructions have been adapted for use by SAMHSA. **The following instructions replace those found immediately following the SF 424A.**

**SECTION A - BUDGET SUMMARY** - Leave this section blank.

#### **SECTION B - BUDGET CATEGORIES**

**NOTE: The budget indicated in Section B should include only the funds that are requested from SAMHSA for the first budget period (i.e., the first 12 months) of the proposed project. If funds for the project are also being provided, or requested, from other sources, such funds should not be included in the budget indicated in this section.**

**Complete only column (1), lines 6a through 6k (as applicable) and line 7.**

1. In **Section B**, column (1), lines **6a-6h**, insert the dollars requested from SAMHSA for all Object Class Categories, for the first 12-month budget period. Because there is no separate Object Class Category for "consultant costs," include any "consultant costs" in the "Other" Object Class Category (line **6h**). If the GFA does not specify that alteration and renovation costs will not be paid, necessary alteration and renovation costs may be entered under line **6g** by crossing out "Construction" and typing in "Alteration and Renovation." Cost breakout and description of proposed alteration and renovation should be included in the budget justification. (Construction costs are not allowable.)

**NOTE: A detailed line-item budget computation and justification should be provided on a separate page(s) for all object class categories. A sample detailed line-item budget computation and justification is attached as EXAMPLE A.**

In column (1), line **6i Total Direct Charges (sum of 6a-6h)**, insert the sum of lines **6a-6h**.

In column (1), line **6j Indirect Charges**, insert the amount of indirect costs if these costs are being requested and your organization has negotiated an indirect cost rate with an agency of the Federal Government. Also submit a copy of notice of your organization's most current indirect cost rate agreement to substantiate your request. Failure to submit a copy of this notice may result in delay of any possible award.

If an indirect cost rate has not been established, insert "0" in column (1), line **6j**. In order to recover allowable indirect costs of a project, it may be necessary to negotiate and establish an indirect cost rate (unless such a rate has already been established for the applicant organization). For information and assistance regarding the timing and submission of an indirect cost rate proposal, applicants should contact the appropriate office of the DHHS Division of Cost Allocation referenced in the list of "Offices Negotiating Indirect Costs Rates," provided in the application kit. A note that the applicant organization either waives or will negotiate, within 90 days after grant award issuance, and establish an indirect cost rate with the appropriate office of the DHHS Division of Cost Allocation should be included in the detailed line-item budget computation and justification.

In column (1), line **6k. TOTALS (sum of 6i and 6j)**, insert the total of lines 6i and 6j.

2. In **Section B**, column (1), line **7 Program Income**, if applicable, insert any program income anticipated to be generated during the proposed first 12-month budget period. See Appendix A, Item 15f, for the definition of program income.

3. Leave the remaining columns, (2) through (5) in **Section B** blank.

**SECTION C - NON-FEDERAL RESOURCES**

1. In **Section C**, line 12, columns (b) **Applicant**, (c) **State**, and (d) **Other Sources**, insert any funds to be contributed to the project by these entities for the first 12-month budget period. (Leave lines 8-11 blank.)
2. In **Section C**, line 12, column (e) **TOTALS**, insert the total of line 12, columns (b)-(d), if any.

**SECTION D - FORECASTED CASH NEEDS** - Leave this section blank.

**SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT** - This section should reflect the proposed direct cost budgets for years 2 - 5. However, unless the GFA states that projects may be funded beyond 3 years, proposed direct costs should be provided for years 2 and 3 only. The totals should be derived from the detailed line-item budget computation and justification for future year direct costs. (A sample is provided as EXAMPLE A.)

1. **Section E**, line 20 **TOTALS (sum of lines 16-19)**, column (b) **First** represents the second 12-month period (02 Period). Insert the total FEDERAL direct cost dollars requested for **all** object class categories for this second year.
2. **Section E**, line 20, column (c) **Second** represents the third 12-month period (03 Period). Enter the total FEDERAL direct cost dollars requested for **all** object class categories for this third year.
3. **Section E**, line 20, column (d) **Third**. Leave blank unless the GFA states that projects may be funded for up to 4 years.
4. **Section E**, line 20, column (e) **Fourth**. Leave blank unless the GFA states that projects may be funded for up to 5 years.

**SECTION F - OTHER BUDGET INFORMATION** - Leave this section blank.

**EXAMPLE A**ILLUSTRATION OF DETAILED WORKSHEET FOR COMPLETING  
SF 424A: SECTION B FOR 01 BUDGET PERIOD

## OBJECT CLASS CATEGORIES

**Personnel**

Job Title	Name	Salary	Annual Effort	Level of Effort	Salary being Requested
Project Director	J. Doe	30,000		1.0	\$ 30,000
Secretary	Unnamed	18,000	0.5		9,000
Counselor	R. Down	25,000	1.0		25,000
<b>Enter subtotal on 424A, Section B, 6.a.</b>					<b>64,000</b>

<b><u>Fringe Benefits</u> (24%)</b>	<b>424A, Section B, 6.b.</b>	<b>15,360</b>
-------------------------------------	------------------------------	---------------

**Travel**

2 trips for SAMHSA Meetings for 2 Attendees (airfare @ \$600 x 4 = \$2,400) + (per diem @ \$120 x 4 x 6 days = \$2,880)	5,280
Local Travel (500 miles x .24 per mile)	120
<b>Enter subtotal on 424A, Section B, 6.c.</b>	<b>5,400</b>

**Equipment (List Individually)**

"Equipment" means an article of nonexpendable, tangible personal property having a useful life of more than one year and an acquisition cost which equals the lesser of (a) the capitalization level established by the governmental unit or nongovernmental applicant for financial statement purposes, or (b) \$5000.

**Enter subtotal on 424A, Section B, 6.d.**

**Supplies**

Office Supplies	500
Computer Software - 1 WordPerfect	500
<b>Enter subtotal on 424A, Section B, 6.e.</b>	<b>1,000</b>

**Contractual****Evaluation**

Evaluator J. Wilson	0.5	\$24,000
Other Staff	1.0	18,000
Fringe Benefits (25%)		10,500
Travel (2 trips x 1 Evaluator (\$600 x 2 = \$1,200)+(per diem @ \$120 x 6 = \$720)		1,920
Supplies (General Office)		500

Evaluation Subtotal	54,920
Indirect Costs (19%) (Copy of negotiated rate agreement attached)	10,435

**Training**

Personnel	
Coordinator M. Smith 0.5	12,000
Admin.Assist. 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	40,025

**Enter subtotal on 424A, Section B, 6.f. 105,380**

**Other**

Consultants = Expert @ \$250/day X 6 day 1,500 (If expert is known, should list by name)	
<b>Enter subtotal on 424A, Section B, 6.h.</b>	<b>1,500</b>

**Total Direct Charges (sum of 6.a-6.h)**

**Enter Total Direct on 424A, Section B, 6.i. \$192,640**

**Indirect Costs**

15% of Salary and Wages (copy of negotiated indirect cost rate agreement attached)

**Enter subtotal of 424A, Section B, 6.j. 9,600**

**TOTALS**

**Enter TOTAL on 424A, Section B, 6.k. \$202,240**

**JUSTIFICATION**

PERSONNEL - Describe the role and responsibilities of each position.

FRINGE BENEFITS - List all components of the fringe benefit rate.

EQUIPMENT - List equipment and describe the need and the purpose of the equipment in relation to the proposed project.

SUPPLIES - Generally self explanatory; however, if not, describe need. Include explanation of how the cost has been estimated.

TRAVEL - Explain need for all travel other than that required by SAMHSA.

CONTRACTURAL COSTS - Explain the need for each contractual arrangement and how these components relate to the overall project.

OTHER - Generally self explanatory. If consultants are included in this category, explain the need and how the consultants' rate has been determined.

If your organization has no indirect cost rate, please indicate whether your organization plans to a) waive indirect costs if an award is issued, or b) negotiate and establish an indirect cost rate with DHHS within 90 days of award issuance.

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

Review and verify the accuracy of future year budget estimates. Are any unusual increases or decreases in the future years explained/justified? Future year escalation is limited to the unusual increases or decreases only, no cost of living increase will be honored. (NOTE: new salary cap of \$125,900 is effective for all FY 1999 awards.)

Personnel	First 12-month Period	Second 12-month Period	Third 12-month Period
Proj. 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

\*Increased from 50% to 100% effort in 02 through 03 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
Tot. Direct Costs	192,640	205,934	208,653	
Indirect Costs (15% S&W)		9,600	10,950	10,950
TOTAL COSTS	202,240	216,884	219,603	

The Federal dollars requested for all object class categories for the first 12-month 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 periods are entered on Form 424A, Section E, columns (b) - (e), line 20. The GFA will specify the maximum number of years of support that may be requested.

## APPENDIX C

### INSTRUCTIONS FOR CHECKLIST

A Checklist is provided in the PHS Grant Application Form 5161-1. The instructions within the Checklist are self-explanatory except for the following:

#### **Part A:**

4. Assurance of Compliance (Civil Rights, Handicapped Individuals, Sex Discrimination, Age Discrimination)

Before a grant or cooperative agreement award can be made, a domestic applicant organization must certify that it has filed with the DHHS Office for Civil Rights: an Assurance of Compliance (Form HHS 690) with Title VI of the Civil Rights Act of 1964 (P.L. 88-352, as amended), which prohibits discrimination on the basis of race, color, or national origin; Section 504 of the Rehabilitation Act of 1973 (P.L. 93-112, as amended), which prohibits discrimination on the basis of handicaps; Title IX of the Education Amendments of 1972 (P.L. 92-318, as amended) which prohibits discrimination on the basis of sex; and the Age Discrimination Act of 1975 (P.L. 94-135), which prohibits discrimination on the basis of age. The Assurance of Compliance Form HHS 690 is included in the application kit. (Note: Assurance of Compliance Form HHS 690 is now used in lieu of individual assurances: Form HHS 441 - Civil Rights; Form HHS 641 - Handicapped Individuals; Form HHS 639-A - Sex Discrimination; and Form HHS 680 - Age Discrimination.) On the blank lines provided under Part A: 4., please indicate the date on which each of the assurances was filed by the applicant organization.

5. Human Subjects Certification, when applicable (45 CFR 46)

Based on the information provided in the GFA, Part I. Programmatic Guidance, where SAMHSA has determined that projects funded under the GFA are subject to the requirements of 45 CFR Part 46, Protection of Human Subjects, applicants are required to indicate whether the Human Subjects Certification is included with the application. Where the SAMHSA Center Director has determined that projects funded under the GFA must meet SAMHSA Participant Protection (SPP) requirements, applicants must check the NOT applicable box.

#### **PART B:**

1. The Public Health System Impact Statement is applicable to some SAMHSA programs and must be completed and distributed where appropriate. See specific instructions in the GFA (Part I, Programmatic Guidance).

#### **PART C:**

1. The administrative official to be notified if an award is to be made may be the same as the authorized representative identified in Item 18 on the face page (SF 424) or may be the designated administrative/business official of the applicant organization. The official Notice of Grant Award will be mailed to the administrative official named in Part C.
2. If the applicant organization has already been assigned a modified EIN number because of receipt of another grant from the Department of Health and Human Services (DHHS), include the complete 12-digit number (1-digit prefix, 9-digit EIN, 2-digit suffix). Leave blank if the applicant organization has never been assigned a modified number from the DHHS.
3. The individual designated to direct the project must be the same as the individual identified in Item 5 on the face page of the application.

## APPENDIX D

### GUIDELINES FOR ASSESSING CULTURAL COMPETENCE

- o **Experience or track record of involvement with the target population** - The applicant organization should have a documented history of positive programmatic involvement with the population/community to be served; e.g., a history of involvement with the target population or community.
- o **Training and staffing** - The staff of the organization should have training in gender/age/cultural competence. Attention should be placed on staffing the initiative with people who are familiar with, or who are themselves members of, the population/community.
- o **Language** - If an organization is providing services to a multi-linguistic population, there should be multi-linguistic resources, including use of skilled bilingual and bicultural individuals whenever a significant percentage of the target population/community is more comfortable with a language other than English.
- o **Materials** - It should be demonstrated that material and products such as audio-visual materials, PSA's, training guides and print materials to be used in the project are gender/age/culturally appropriate or will be made consistent with the population/community to be served.
- o **Evaluation** - Program evaluation methods and instrument(s) should be appropriate to the population/community being served. There should be rationale for the use of the evaluation instrument(s) that are chosen, and the rationale should include a discussion of the validity of the instrument(s) in terms of the gender/age/culture of the group(s) targeted. The evaluators should be sensitized to the culture and familiar with the gender/age/culture whenever possible and practical.
- o **Community representation** - The population/community targeted to receive services should be a planned participant in all phases of program design. There should be an established mechanism to provide members, reflective of the target group to be served, with opportunities to influence and help shape the project's proposed activities and interventions. A community advisory council or board of directors of the organizations (with legitimate and working agreements) with decision-making authority should be established to affect the course and direction of the proposed project. Members of the targeted group should be represented on the council/board.
- o **Implementation** - There should be objective evidence/indicators in the application that the applicant organization understands the cultural aspects of the community that will contribute to the program's success and which will avoid pitfalls.

\* These guidelines were taken from a Center for Substance Abuse Prevention publication, The Fact Is.... February 1993.