

FEMA

Crisis Counseling Assistance and Training Program (CCP)

Regular Services Program Application Supplemental Instructions

CCP Application Toolkit, Version 6.0, October 2023

Note: Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Mental Health Services (CMHS) project officers are available to provide technical assistance and consultation on the Crisis Counseling Assistance and Training Program (CCP). If you would like to speak with a CMHS project officer, please contact the SAMHSA Disaster Technical Assistance Center (DTAC) at 1-800-308-3515 (Monday-Friday 9 a.m.-5 p.m. ET), and a staff member will forward your request to the appropriate project officer.

You may obtain CCP applications, supplemental instructions, and guidance documents by calling SAMHSA DTAC as indicated above or by emailing SAMHSA DTAC at dtac@samhsa.hhs.gov.



FEMA



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Mental Health Services
www.samhsa.gov

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Crisis Counseling Assistance and Training Program

Regular Services Program Application Supplemental Instructions

These supplemental instructions describe the purpose of each section of the Crisis Counseling Assistance and Training Program (CCP) Regular Services Program (RSP) application and provide an explanation of how to complete the required forms and questions. These instructions are most useful when reviewed simultaneously with the RSP application and the CCP Guidance. Text in ***bold and italics*** was taken directly from the RSP application.

Please note that throughout the RSP supplemental instructions, the terms “applicant” and “state” are intended to include all qualified federal award applicants (i.e., states, U.S. territories, and federally recognized tribes).

The Complete RSP Application

The RSP application consists of the following:

- **Standard Form 424 Request for Federal Assistance (SF-424)**: A federal form the Office of Management and Budget (OMB) requires for grant applications. All entities that apply for CCP funds must submit a completed SF-424 signed by the head of the state mental health authority (SMHA) or chief tribal executive.
- **Standard Form 424A Budget Information: Non-Construction Programs (SF-424A)**: A federal form the OMB requires for grant applications. Complete column one of “Section B—Budget Categories,” for the total CCP budget.
- **Standard Form 424B: Assurances for Non-Construction Programs (SF-424B)**: The SF-424B is used to assure compliance with statutory requirements for non-construction grant programs. The federal awarding agencies and OMB use information reported on this form for general management of federal assistance awards programs.
- **Project/Performance Site Location(s)**: A federal form required for the CCP RSP. The applicant should complete a form for each site where providers will perform project work.
- **Disclosure of Lobbying Activities (SF-LLL)**: A required form for the CCP RSP. The applicant may indicate “N/A” on the form if it is not applicable.

- **RSP Application Form:** A form used to apply for an RSP grant.
 - **Part I. General Application Information:** Gathers information about the declaration, preparer, point of contact (POC), and amount requested for the RSP funding.
 - **Part II. Response Activities From Date of Incident:** Describes state and local crisis counseling response activities from the date of the disaster incident to the date of the application submission. If the state received an Immediate Services Program (ISP) grant, completion of this section meets the requirement for an ISP Mid-Program Report.
 - **Part III. Geographic Areas and Needs Assessment:** Includes an estimate of the number of people who would benefit from crisis counseling services and the estimated number of people expected to receive services. It also includes an explanation of special circumstances related to the disaster that may increase the need for crisis counseling services.
 - **Part IV. Resources and Capabilities:** Describes the state and local mental health systems and funding and explains why these resources cannot meet the estimated disaster crisis counseling needs.
 - **Part V. Program Administration:** Includes a state staffing plan, provider staffing plan(s), an overall program management plan, and a description of consultants and trainings. Section must include an organizational chart for the project.
 - **Part VI. Budget:** Includes a format for state and individual provider budgets and line-item budget narratives.
 - **Part VII. Assurances:** Must indicate that the assurances listed have been completed and attached to the application. This section includes the signature of the governor’s authorized representative (GAR) or chief tribal executive.
 - **Part VIII. Application Checklist:** Lists the items to be submitted, including the RSP application; SF-424: Request for Federal Assistance; SF-424a: Budget Information - Non-Construction Programs; SF-424b: Assurances for Non-Construction Programs; the Budget Narrative; the organizational chart; and the assurance forms (i.e., SF-LLL Disclosure of Lobbying Activities, Disbarment and Suspension and Other Responsibility Matters, and HHS Project Site Location/Key Contacts Form).

Part I. General Application Information (Questions #1–6)

The applicant should include declaration information, preparer information, point of contact information, and the amount requested for RSP funding.

Part II. Response Activities From Date of the Incident (Questions #7–11)

- 7. Describe State and local crisis counseling activities from the date of the incident to the date of this application. Enter “N/A” if no crisis counseling activities have been conducted to date.**

Describe the types of crisis counseling services provided; specify who provided the services, where the services were provided, and the number of recipients. Displaying this information in a table may be helpful.

States that received an ISP grant will be providing a detailed account of ISP services in Questions #8-10. States that did not receive an ISP grant should prepare a comprehensive response to this question to demonstrate that disaster needs were significant enough to warrant a disaster behavioral health or crisis counseling response.

If an Immediate Services Program (ISP) was implemented for this disaster, please answer questions #8-10 below. Otherwise, skip to question #11.

- 8. Please provide a brief summary of the ISP currently in place. Please include information on the population served, any extensions (date and amount), the number of providers, and the start and end dates of the program, and summarize any trends. Include any best practices as well as any challenges and describe how those challenges were addressed or will be addressed in the RSP.**

Most ISPs provide the full range of crisis counseling services, but they typically focus on high-intensity, low-volume individual services to directly affected survivors and high-risk groups or populations. In the RSP phase, it is typical to experience a gradual shift in service delivery, with a focus on low-intensity, high-volume services such as group crisis counseling and public education. Describe the outreach emphasis in the ISP and the rationale for this emphasis.

High-risk groups or populations were identified in the ISP initial needs assessment. The groups targeted for services in the ISP application should be discussed here. It is common for additional high-risk groups or populations that were not identified in the original ISP application to be encountered after outreach begins. These groups or communities should be referenced here. Note that new high-risk groups or populations should be included in the RSP needs assessment to continue to target them for services in the program going forward.

Different types of disasters can raise different types of issues and reactions. Reactions will vary depending on whether the disaster was natural or human caused; the extent of the damage, death, or injury; the nature of the evacuation process; and whether or not there was warning. Discuss the issues and reactions encountered in the context of the type of disaster that occurred.

9. If applicable, explain why any service providers not included in the ISP were added to this RSP application. Additionally, explain why any service providers included in the ISP are excluded from the proposed RSP.

In some cases, the state may have sought approval from its Federal Emergency Management Agency (FEMA) and Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Mental Health Services (CMHS) project officers to discontinue service providers included in the ISP application or to add service providers not included in the original application.

10. Describe how the RSP will build on the work done in the ISP. Describe how contacts and resources identified during the ISP will be leveraged during the RSP.

The applicant should describe how the outreach activities started during the ISP will expand and continue to grow during the RSP. This section should also describe the applicant's plan for continued resource development.

The transition from ISP to RSP must be carefully planned. Administrative issues to address include the following:

- Putting state fiscal mechanisms in place to affect a seamless transition from ISP to RSP funding.
- Meeting state procurement or contracting requirements to continue ISP service providers into the RSP or add new providers.
- Programmatic issues to address in the response include the following:
 - Planning for training of existing or new staff and providers on both crisis counseling and RSP requirements.
 - Working with providers to expand high-volume services, such as group crisis counseling and public education.
 - Ensuring that referral mechanisms are in place for survivors requiring traditional mental health or substance abuse treatment.
 - Expanding networking with community partners to promote collective recovery.
 - Promoting the RSP so survivors are aware of, and can easily access, CCP services.

11. Please provide a brief summary that provides key information on the scope and magnitude of the disaster, how the Grantee and providers propose to provide services during the RSP, and the nature and location of the proposed services. Please include a description of the length of time services will be required and describe how long-term cases will be handled. Please describe the nature of psychological and social problems observed and the types of mental health problems encountered by disaster survivors.

In this section, the applicant should describe the disaster event and the plan to meet the needs of the communities impacted.

- Specify what type of disaster occurred and whether it was natural, or human caused. If human caused, was it deliberate or accidental?
- Identify the locations of significant disaster damage and indicate whether they were clustered together or widely dispersed. Including a map may be helpful.
- Include plans for RSP services. The applicant should take into consideration the social, economic, and demographic characteristics of the affected communities and whether the communities are primarily rural, suburban, or urban. High-risk groups or populations should also be addressed.
- The applicant should determine, according to the magnitude and population impacted from the disaster, whether the RSP will require the full 9 months allotted or phase down early. Include justification for your response.
- Provide examples of major damage and the effect on survivors. The state should use this section to provide a contextual background to the disaster event, rather than attempt to provide a comprehensive list of disaster damage.

Part III. Geographic Areas and Needs Assessment (Question #12)

12. Estimated Population To Be Served

The applicant is asked to develop appropriate and reasonable targets for providing CCP grant services to individuals affected by the disaster. The applicant is strongly advised to consult with its FEMA and SAMHSA CMHS project officers to identify an appropriate number based on the size and scope of the disaster, the types of needs caused by the disaster, the special groups affected, and the geographic and demographic regions to be served.

Formal sources for needs assessment may include analysis of damage assessments and registrants for services from FEMA or the CCP, and the needs assessment may involve other data sources, including special use surveys and assessment tools. A needs assessment also may rely on corroborative data, including anecdotal evidence from crisis counselors or feedback from other disaster relief providers.

Applicants should choose either Option A or Option B depending on the nature of the disaster. The applicant should include an explanation as to why either option was chosen.

Option A: Federal award applicants may opt to use their own method for determining the estimated population to be served. Please cite data sources used. Please also list the proposed providers and the number of direct and non-direct staff anticipated.

If Option A is selected, SAMHSA CMHS and FEMA recommend that applicants use the SAMHSA CMHS Needs Assessment Worksheet to determine the estimated numbers of people to be served by the program. This worksheet uses a needs assessment formula based on historic CCP grant program data. Please see Appendix A for a copy of the worksheet and additional instructions.

Other potential sources of information for Option A may include the FEMA regional office; voluntary agencies, such as the American Red Cross; and media sources. In addition, any crisis counselors and other human service workers deployed by the applicant or other public agencies in the immediate aftermath of a disaster may provide information on crisis counseling needs.

Option B: Use the following table to estimate the impacted population for each requested service area (county, parish, tribal land, etc.). Populate the table using census data for the total population for each designated service area. Please select a "Percentage Impact Factor" between .75% (multiply the "Total Census Population by 0.0075) and 2% (multiply the "Total Census Population" by 0.02) to determine "Estimated Population to be Served". Please also list the number of direct and non-direct staff anticipated. Provide a brief justification for the "Percentage Impact Factor" chosen in the box below. Please also list the proposed providers and the number of direct and support staff anticipated.

CCPs are typically able to reach between ¾ percent (.0075) and 2 percent (.02) of their affected populations during a grant. When selecting Option B, applicants should choose a percentage impact factor that fits with the magnitude and unique composition of the population affected by the disaster. For example, a program in a densely populated area may have an easier time locating and seeing more survivors each day than a program in a rural area where travel times make it difficult to see many survivors; so, the program in the dense area may target 2 percent of the population while the rural program may target less. If an applicant would like to use a percentage impact factor smaller or larger than that range, SAMHSA CMHS and FEMA staff should be consulted prior to the application deadline.

Option A or Option B

Please note that SAMHSA CMHS and FEMA recommend a 300:1 ratio of survivors to crisis counselor and team leaders and a 3:1 ratio of crisis counselors to team leaders. The CCP is a basic supportive program that emphasizes face-to-face contact with survivors and individuals within high-risk groups or populations.

Therefore, CCP grant-funded non-direct service staff should not exceed 15 to 20 percent of the total grant-funded full-time equivalent (FTE) workforce.

Describe any circumstances not captured in the table above that will have an impact on the need for and equitable delivery of crisis counseling services. Include any high-risk groups or populations of concern (e.g., children, adolescents, older adults, individuals with disabilities; cultural needs; access and functional needs; lower income populations; first responders; etc.). Please include your plan to ensure the RSP is accessible.

To complete an RSP application, applicants are required to conduct a comprehensive assessment of need, including a detailed assessment of the needs of high-risk groups or populations who may be especially vulnerable to disaster effects or who may have unique needs. Children, adolescents, and older adults may be affected most by disasters, but the state should identify what other special groups are affected by this specific disaster. Special circumstances might include the type of disaster, a rapid onset of disaster with little warning, a recent history of disaster in the designated regions, or whether the disaster was human caused. Provide a brief rationale for including these additional groups as well as your plans for outreach.

Part IV. Resources and Capabilities (Questions #13–14)

13. Describe the current mental health resources and explain why they cannot meet the disaster-related mental health needs caused or aggravated by this disaster.

The federal government is required to verify that the needs are beyond state and local resources and capabilities before federal funds may be awarded. The RSP is a supplemental grant, so a clear description of why state and local resources cannot meet the disaster-related behavioral health needs is essential.

14. Has the Federal award applicant received funds for mental health disaster response from any other source (e.g., Department of Education, Foundations)? If so, how much and how are these funds used?

The applicant should list any additional funds granted by another source for mental health disaster response. A plan for how the funds will be used should be included as well as the amount of funds received.

Part V. Program Administration (Questions #15–28)

15. Will the State, Tribal Government, or Territory be providing any direct crisis counseling services?

Please answer yes or no to indicate whether the applicant plans to directly provide crisis counseling services. If yes, include a brief description of your plans for service when completing question 17.

16. Attach an overall organizational chart for this project.

To provide a better understanding of the staffing plan for the CCP, the state is required to include an organizational chart. A comprehensive organizational chart includes the location of the state project and grant staff within the overall state system and the breakdown of state RSP staff as well as the staff with each individual service provider by FTE and staff position title. Clear lines of reporting from the provider to the state RSP leadership should be shown. The RSP positions listed should be consistent with those proposed in the staffing and plan of service and those included in the budget.

17. Provide a brief description of administrative oversight plans (supervision and monitoring of crisis counselors, team leads, data collection efforts, managing and monitoring staff stress, etc.).

Describe how the organizational structure of the RSP will promote effective state oversight and support clear communication and staff supervision at both the state and individual provider levels.

The applicant will be the main contact for FEMA/SAMHSA CMHS and will be responsible for program reporting and sharing information from FEMA/SAMHSA CMHS with service providers. While local service providers typically conduct RSP services, the applicant is expected to maintain clear oversight of program operations.

Please refer to Appendix B for a list of potential CCP positions.

CCPs typically use a mix of behavioral health professionals (often in team leader roles) and trained paraprofessional staff (often in crisis counselor roles). If professional staff are used as crisis counselors, they should be paid at the state's customary rates for a similar paraprofessional position. Paraprofessional staff with experience in disaster behavioral health or crisis counseling may also serve as team leaders.

CCP staff are required to be deployed in teams of two to be able to promote safety, with a team leader available to coordinate deployment and provide guidance if severe reactions are encountered. The CCP is an outreach-oriented program. Most services should take place in the community rather than in the provider's office.

CCP service providers most often are community behavioral health agencies with a preexisting organizational relationship with the applicant. However, because fiscal and administrative procedures and service delivery in the CCP are substantially different from those in other state behavioral health programs, specialized training and planning is crucial to ensure an effective RSP response. If service providers have not been selected and trained prior to a disaster, the state will have to work closely with service providers to familiarize them with the procedures and requirements of the program. If an applicant chooses to use a temporary employment agency to provide crisis counseling services, a clearly defined service plan must be identified, including supervision, office space, hiring protocols, communication strategies, and access to all necessary supplies.

The applicant is encouraged to select providers indigenous to the communities they will serve. Describe the mechanisms the applicant will use to maintain contact with service providers to share program information and updates, provide training and direction regarding CCP procedures, and gather information from providers for ongoing needs assessment and required reporting to FEMA/SAMHSA CMHS. Applicants should include a plan for analysis of the CCP data and communicating the results back to the providers to direct the service plan. Describe how the applicant's oversight will ensure a cohesive program identity for the RSP.

Providers should describe how they will target both directly affected survivors and members of high-risk groups or populations in their community. The applicant should ensure that any targeted special populations are also identified in the needs assessment section.

By its very nature, crisis counseling entails stress risks to staff. Providers should demonstrate how they will support their staff (e.g., careful supervision, reasonable workload, and opportunities for stress management activities).

18. How will the non-Federal entity monitor the organization and deployment of crisis counseling teams? If more than one provider agency will be delivering services, please describe the plan to coordinate services. If more than one provider will cover a service area, please attach or include a map that shows how the responsibility for that service area will be divided.

The applicant, working with the local service providers, should determine the designated service area, or areas, that the providers will serve in the RSP. If two or more providers are serving an individual designated service area, the process is more complex. In this case, the applicant must work with the providers to divide and distribute the total service targets among the providers selected to serve the designated area. This must be done in a manner that ensures service coverage for all individuals targeted for service and minimizes duplication of service. The application should include a map for how this will be divided.

19. Describe the Federal award applicant's plan for quality control methods to ensure appropriate services reach survivors.

As the RSP may be administered by several different service providers, perhaps in different geographical regions, the applicant must ensure that high-quality services consistent with the CCP model are delivered.

20. With what organizations and community stakeholders will you partner? Select all that apply:

- Community Mental Health and Substance Abuse Centers**
- Schools**
- Faith-Based Organizations**
- First Responders**
- Community-based Cultural Organizations**
- Law Enforcement**
- Local Elected Officials**
- Long-Term Recovery Groups**
- Other:**

The applicant should select all types of organizations that will work with the CCP staff. Any organizations not listed that the program will work with should be included under "Other."

The state is encouraged to select providers and partner organizations indigenous to the communities they will serve. Providers should describe how they will target both directly affected survivors and members of high-risk groups or populations in their community. The state should ensure that any targeted populations are also identified in the needs assessment section.

The longer timeframe of the RSP allows for increased partnership with community stakeholders. If the state had an ISP, it is likely to have partnered with several stakeholder groups. States are expected to establish and expand their partnerships in the RSP; a comprehensive plan for partnerships is required for the RSP.

21. Briefly describe how you will engage with the partners identified above.

Please describe your plans to involve the partner organizations listed in the question above. If the state had an ISP, the plan should include a strategy to maintain or further relationships with previous partners.

22. What primary CCP services will you provide? Please select all that apply.

- Individual crisis counseling**
- Group crisis counseling**
- Brief educational or supportive contact**
- Public education**
- Assessment, referral, and resource linkage**
- Community networking and support**

Providers should select the services they intend to provide during the RSP. It is common for providers to select all primary services listed. The state is encouraged to tailor these services to meet the needs of survivors and high-risk groups or populations, but they must stay within the outlined parameters. Note that the CCP does not support critical incident stress debriefing or management, traditional mental health or substance abuse treatment, medications, and hospitalization. The CCP also does not support services such as transporting survivors to appointments or delivering food or other basic needs.

Crisis counselors can provide community resources and make referrals for survivors to meet those basic needs, but they do not provide case management.

Please refer to Appendix C for allowable CCP services.

23. What secondary CCP services will you provide? Please select all that apply.

- Development and distribution of educational materials**
- Media and public service announcements**

The applicant should select all the secondary services the CCP staff plan to administer during the program.

24. State Staffing Plan. Please provide information on the staffing at the Grantee level. Include leadership positions and direct staff if the State, Territory, or Tribe is providing any direct services. Do not include provider-level staff.

The state staffing plan typically consists of state leadership positions such as the state CCP program manager or director, fiscal administrator, administrative assistant, and data/evaluation specialist. Large programs may have additional staff positions based on the needs of the program. In some cases, the state may also choose to directly provide primary services. In this case, the state staffing plan would also include direct service staff such as crisis counselors and team leaders. The applicant should ensure the types of state staff correspond accurately to the state staff positions depicted in the organizational chart.

25. Describe the Federal award applicant’s plan to ensure clear program identity (educational materials, wellness messaging, logos, etc.) and market the program (including website, hotline, social media, public service announcements, etc.).

The applicant should provide a general description of how the state’s oversight will ensure a cohesive program identity for the RSP. Provide approaches or strategies for how the state will market the CCP program.

26. Briefly describe the facilities to be utilized and your plan for securing office space for this project.

The CCP provides most services in the communities where survivors live or work. However, reasonable office space for program administrative operations is necessary. Specify whether this space will be available as an in-kind contribution. If the space is not available as an in-kind contribution to the CCP, carefully justify why funding is necessary; include the type, intended use, cost of the space, and which staff will be occupying the space.

27. The CCP requires mandatory training during the RSP as described in the CCP guidance. Please describe the proposed training program for project staff, indicating the number of workers needing such training. Also include additional training (if any) that you plan to provide and the rationale for such training.

Trainers teach crisis counselors and team leaders to carry out CCP services or address special issues related to the disaster or special populations. Trainers providing the required CCP trainings must have extensive experience in the CCP. All trainers must be approved by FEMA and SAMHSA CMHS to be funded.

Trainers are distinct from consultants, who are individuals with extensive experience in the CCP and provide guidance to state and service provider leadership staff regarding program administration, services, fiscal management, or evaluation.

28. Does the State, Territory, or Tribe have any experienced trainers who can provide training on the CCP model?

Recommendations for approved FEMA/SAMHSA CMHS trainers are available via the SAMHSA Disaster Technical Assistance Center (DTAC). If the state chooses to use trainers who have not been prequalified by FEMA/SAMHSA CMHS, they must attach résumés of these individuals to seek approval.

PART VI. Budget (Questions #29–30)

An accurate budget allows for successful implementation, management, and operation of program services and activities. CCP funds can be used to provide services for survivors and special populations identified in the needs assessment. The plan of services should correspond to the needs assessment and identify staff needed to reach target populations. The budget should reflect how the identified services will be funded. The budget is determined by the needs assessment and staffing levels, which guide the plan of service.

When drafting the budget, the applicant should base all program cost estimates on **189 business days**. This number (189 days) is approximately the number of business days in the total length of the RSP program and should be used to calculate all program expenses.

Budget Formats

The RSP application requires several specific budget formats:

- Estimated funding section on the main SF-424
- SF-424a (serves as a total budget for the program)
- Applicant and provider projected narrative budget worksheets

The applicant, provider, and SF-424a budgets must have consistent line-item rates and costs. As the applicant oversees the development of the application, it should collaborate with providers to assist them in developing consistent individual provider budgets. The budgets must be in accordance with CCP expectations, part of a cohesive program, and reflective of the needs identified in each provider's service area. The applicant must ensure that all fundable expenses detailed in the plan of services are included in the budget (e.g., FTE staff, supplies, and consultants/trainers).

Indirect Costs

As a supplemental program, the CCP does not fund a line-item category for indirect costs. All charges must be direct.

In-Kind Resources

While there are no requirements for applicants to match CCP funds, regulations require the "identification of the resources the state and local governments will commit to both services and training." Applicants have provided in-kind resources such as personnel, overhead or administrative costs (e.g., office and meeting space, utilities, equipment such as computers, printers, mobile phones), advertising, and public service announcements. Communities or groups (e.g., voluntary organizations active in disaster, local faith-based organizations) may contribute in-kind resources as well (e.g., meals, refreshments for program-related meetings or support groups, toys, meeting space, recreational items).

The process for completing the budgets is as follows:

1. The individual provider line-item figures must be totaled and rolled into the state budget. Those states that contract with service providers must roll individual service provider budgets into the Provider Contractual Costs line item of the state budget. Those states that do not contract with service providers must reflect all costs by line item in the state budget.
2. The state budget is then entered in the SF-424a.
3. The SF-424a lines should then be collapsed further and included in the estimated funding section on the main SF-424.

29. Attach a Standard Form 424: Request for Federal Assistance (SF-424) and Standard Form 424a: Budget Information - Non-Construction Programs (SF-424a). These forms should include all projected operating costs.

SF-424 and SF-424a are federal forms required by the OMB on grant applications. All states applying for RSP funds must submit an SF-424 signed by the head of the SMHA or tribal chief executive and an SF-424a. These forms are available online at the [SAMHSA DTAC CCP Toolkit](https://www.samhsa.gov/dtac/ccp-toolkit) (https://www.samhsa.gov/dtac/ccp-toolkit).

Please refer to Appendix D: Tips for Completing the SF-424 and SF-424a.

30. Attach a budget narrative explaining each line item on the SF-424a.

Applicant Budget:

A detailed line-item narrative is critical for budget review and approval. Every line in the budget must have a detailed narrative. In the RSP Budget Narrative Tool Excel spreadsheet, a column is provided where you can include the detailed explanation for cost calculations and cost justifications.

Provider Budget:

A detailed line-item narrative is critical for budget review and approval. Every line in the budget must have a detailed narrative. In the RSP Budget Narrative Tool Excel spreadsheet, a column is provided where you can include the detailed explanation for cost calculations and cost justifications. An individual budget narrative for each provider working on the CCP grant is critical for budget review and approval.

For more information regarding the budget narrative, please refer to the SAMHSA DTAC CCP Toolkit at the [SAMHSA DTAC CCP Toolkit](https://www.samhsa.gov/dtac/ccp-toolkit) (https://www.samhsa.gov/dtac/ccp-toolkit).

Part VII: Assurances (Questions #31–33)

31. Please indicate whether the following assurances have been completed and submitted with this application:

- a. SF-LLL Disclosure of Lobbying Activities** Yes No
- b. Disbarment and Suspension and other Responsibility Matters** Yes No
- c. HHS Project Site Location/Key Contacts Form** Yes No

32. The Governor or Chief Tribal Executive or their authorized representative agrees to and/or certifies that:

- The requirements are beyond the State, local, Territory, or Tribal government’s capabilities.*
- The program, if approved, will be implemented according to the plan contained in the application approved by the Assistant Administrator for the Recovery Directorate.*
- The State, Tribal Government, or Territory will maintain close coordination with and provide reports to the Regional Administrator, the Assistant Administrator for the Recovery Directorate and the Secretary.*
- The State, Tribal Government, or Territory’s emergency plan, prepared under Title II of the Stafford Act, will include disaster mental health planning.*

33. By signing below, the Governor’s Authorized Representative (GAR) or the Chief Tribal Executive affirms that the foregoing questions have been answered correctly and truthfully to the best of their knowledge.

The RSP application must contain the signature of the GAR or the chief tribal executive. The GAR is the only state official authorized to represent the governor in applying for RSP funding. The RSP application will not be accepted by FEMA/SAMHSA CMHS without the GAR’s signature.

Part VIII: Application Checklist (Question #34)

34. The following documents are being submitted with this grant application:

- | | | |
|--|------------------------------|-----------------------------|
| <i>d. Completed RSP Application</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <i>e. Request for Federal Assistance (SF-424)</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <i>f. Budget Information – Non-Construction Programs (SF-424a)</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <i>g. Assurances for Non-Construction Programs (SF-424b)</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <i>h. Budget Narrative</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <i>i. Organizational Chart</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <i>j. Assurance Forms From Question 31 Above</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

All required documents must be submitted for the RSP application to be complete. The RSP application must be submitted 60 days from the Presidential disaster declaration date.

Appendix A: SAMHSA CMHS Needs Assessment Worksheet

| CMHS Needs Assessment Formula—Estimated Crisis Counseling Needs | | | | | | |
|--|---------------|---|---|---|-----------------------------|--|
| Disaster declaration number: | | | | | | |
| This is an estimate for the following designated service area: | | | | | | |
| Complete a SAMHSA Center for Mental Health Services (CMHS) Needs Assessment Formula sheet for the entire program service area and each designated area. To complete the sheet, follow these steps: | | | | | | |
| <ol style="list-style-type: none"> 1. Identify the number of people for each loss category from collected needs assessment information. 2. Identify any disaster- or region-specific “other” loss categories and establish a traumatic impact risk ratio for any other loss categories. Note that other loss categories are not multiplied by the household size multiplier, which is the average number of people per household (ANH). 3. Determine the total number of people who would benefit from Crisis Counseling Assistance and Training Program (CCP) services for each loss category by multiplying across each row as follows: (number of people) × (household size multiplier) × (traumatic impact risk ratio) = (total number of people who would benefit from CCP services). 4. Add all the results in the column of the total number of people who would benefit from CCP services to determine the number of people who would benefit from crisis counseling services. | | | | | | |
| Loss Category | No. of People | | Household Size Multiplier ² (ANH = 2.5) | | Traumatic Impact Risk Ratio | Total People Who Would Benefit From Services |
| Dead | | × | ANH × 4 | × | 100% | = |
| Hospitalized | | × | ANH × 1 | × | 100% | = |
| Nonhospitalized Injured | | × | ANH × 1 | × | 50% | = |
| Homes Destroyed | | × | ANH × 1 | × | 100% | = |
| Homes With Major Damage | | × | ANH × 1 | × | 20% | = |
| Homes With Minor Damage | | × | ANH × 1 | × | 10% | = |
| Disaster Unemployed | | × | ANH × 1 | × | 10% | = |
| Other ¹ | | | | × | 80% | = |
| | | | | | TOTAL: | = |

¹If appropriate, the state may identify other loss category groups related to the disaster. These categories are not multiplied by a household size multiplier. The state should also identify a traumatic impact risk ratio for each additional loss category specified. Add rows as necessary.

²Household size multiplier means the average number of people per household, or ANH. The national average is 2.5, but applicants should consult U.S. Census information for state or county averages.

For each designated service area, complete the table of estimated number of people to be served (below). Use the following steps to complete the table:

1. For each loss category, list the total number of people who would benefit from CCP services based on the SAMHSA CMHS Needs Assessment Formula table.
2. Identify a percent multiplier for CCP services. These multipliers indicate the percentage of people the program expects to serve out of the total number of people who would benefit from CCP services in the designated area. Percent multipliers may vary between 60 and 80 percent according to the loss category.
3. To determine the estimated number of people to be served through CCP services for each loss category, multiply the total number of people for each loss category by the percent multiplier: (total number of people who would benefit from CCP services) × (percent multiplier) = (number of people to be served through CCP services).
4. Sum the Number of People to be Served column items to identify a total for each designated service area.

| Loss Category | Total Number of People Who Would Benefit From Services | Estimated Number of People To Be Served | |
|-------------------------|--|---|-------------------------------|
| | | Percent Multiplier | Number of People to be Served |
| Dead | | | |
| Hospitalized | | | |
| Nonhospitalized Injured | | | |
| Homes Destroyed | | | |
| Homes With Major Damage | | | |
| Homes With Minor Damage | | | |
| Disaster Unemployed | | | |
| Other | | | |
| TOTAL: | | | |

Appendix B: Potential Crisis Counseling Assistance and Training Program (CCP) Positions

Typical CCP Positions and Job Descriptions

State CCP Program Manager/Director

- Acts as lead coordinator and manager for the state crisis counseling response and is the main point of contact (POC) for the Federal Emergency Management Agency (FEMA) and the Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Mental Health Services (CMHS).
- Oversees staffing, training, reporting, data analysis, and fiscal monitoring.
- Works with other disaster service agencies to ensure coordination of behavioral health response and no duplication of services.
- Conducts regular site visits to providers and accompanies crisis counselors as an observer to ensure appropriate services are delivered.
- Represents the CCP at high-level meetings within the community and state leadership meetings.
- In some cases, often with smaller CCPs, may be the state disaster behavioral health (DBH) coordinator (i.e., the individual identified by the state mental health authority as responsible for state DBH preparedness and response).

Team Leader

- Leads a team of crisis counselors in the field.
- Is usually an experienced DBH worker or behavioral health professional who supervises paraprofessional or less experienced crisis counselors.
- May help to assess people who require traditional mental health or substance use treatment.
- May be one of several team leads on staff with a provider, depending on the size and scope of the disaster.
- Trains, debriefs, and provides supervision for the crisis counselors.
- Uses data to conduct ongoing needs assessment.
- Coordinates data collection activities and reviews data form submissions for accuracy.
- Provides coordination and oversight of the crisis counselors' plans of service.
- May perform crisis counseling as needed.

Crisis Counselor

- Works with individuals, families, and groups to provide outreach, emotional support, individual and group crisis counseling, public education, and referrals when needed.
- Is synonymous with term "outreach worker."
- Represents the program in the community and networks with other agencies and partners to ensure needs of survivors are met.
- Provides presentations to community groups on disaster reactions, coping skills, stress management, and the CCP.

Typical CCP Positions and Job Descriptions

Data/Evaluation Specialist

- Implements and oversees the CCP data collection activities and is the POC for entering data into the CCP web-based system.
- Collects and analyzes data, collects provider and participant surveys, reports data to FEMA and SAMHSA CMHS, and provides data analysis and feedback to state and provider leadership staff to improve program services.
- Trains CCP staff on data collection forms. Works closely with the program manager to ensure accuracy of completed forms.
- Supports the program manager and team leaders.

Administrative Assistant

- Provides administrative support including, but not limited to, collecting and verifying timesheets, collecting data forms, ordering supplies, answering office phone calls, photocopying, faxing, and emailing CCP information.
- Schedules events and related training activities.

Consultant/Trainer

- Hired through the CCP to train program staff or provide consultation to program leadership.
- Should be experienced in the CCP model, training topics, and/or grant writing.
- Must be approved by FEMA and SAMHSA CMHS to conduct the trainings specified by the state.

Fiscal Specialist

- Tracks and monitors funds, reviews and submits requests for program budget modifications to FEMA and SAMHSA CMHS, and prepares fiscal reports.
- Performs quality control and oversight of program purchases.
- Works closely with CCP leadership staff to ensure that funds are accessible to providers and are being appropriately used for crisis counseling services.
- Ensures all contracts are appropriate and compliant with state and federal mandates.
- May be responsible for processing timesheets and payroll.

Additional Positions Encountered in the CCP

Provider Project Manager

- Often found in larger provider staffing plans.
- Acts as lead coordinator for the crisis counseling response at the provider agency and is the main POC for the state CCP program manager/director.
- Oversees staffing, training, reporting, and fiscal monitoring for the provider.
- Sometimes serves as a team leader.

Additional Positions Encountered in the CCP

Community Liaison/Resource Linkage Coordinator

- Facilitates entry on behalf of CCP into local communities and works with community organizations.
- May serve as a cultural broker and as liaison between the CCP and a cultural group.
- Provides intensive resource linkage for survivors struggling to access disaster relief assistance.
- Networks with community resources to identify referral mechanisms.
- Provides training to crisis counselors and other service providers regarding referral resources and mechanisms.

Media/Social Media/Communications Specialist

- Establishes and maintains cooperative relationships with representatives of business, community, media, public interest, and school groups.
- Writes, edits, and coordinates the design for internal and external CCP publications, the media, the internet, social media, marketing collateral, and other related materials.
- Assists in coordination of events, activities, and branding related to the promotion of the CCP.
- Serves as a media liaison for general and routine media inquiries and pitches in conjunction with project leadership.

Child Specialist

- Establishes and maintains cooperative relationships with representatives of community, day care, faith-based, and school groups.
- Provides crisis counseling services for children and adolescents, parent education, and supportive family services focused on grief and loss.
- Promotes resilience and successful coping techniques using individual, group, and family evidence-based strategies.
- Provides culturally sensitive education and training about the effects of trauma on young children and their families.
- Delivers training that includes reactions to disasters, creating safe environments, creating classroom communities, and healthy responses to life-changing events.

Crisis Counseling Hotline Staff

- Provides emotional support in a compassionate and professional manner to individuals calling the program call line/hotline.
- Offers information and referrals to community services, using a warm handoff when possible.
- Returns voicemails and emails from individuals contacting the program.
- Represents the program in the community and networks with other agencies and partners to ensure the needs of survivors are met.

Additional Positions Encountered in the CCP

Senior Care Specialist

- Establishes and maintains cooperative relationships with representatives of community organizations and programs serving the needs of older adult populations.
- Provides crisis counseling services for older adults and their families and caregivers.
- Promotes resilience and successful coping techniques using individual and group evidence-based strategies.
- Provides culturally sensitive education and training about the effects of trauma on older adults including reactions to disasters, creating safe environments, and healthy responses to life-changing events.

Web/Technology Specialist

- Writes, reviews, edits, and updates digital content for the program website, blogs, and other technology communication platforms.
- Conducts research to stay informed of information and resources important to support and inform disaster survivors.
- Analyzes content performance metrics such as views and engagement to inform future content strategies.
- Optimizes content for search engines and social media platforms to increase visibility and reach.

Information Technology Liaison

- Serves as the first POC for program staff seeking technical assistance with hardware and software issues.
- Provides information about basic features and functioning internet browsing, mobile applications, and software, especially those items used to support the organization's business functioning.
- Effectively advises and assists staff on appropriate actions. Identifies and escalates situations requiring attention.

Appendix C: Allowable Crisis Counseling Assistance and Training Program (CCP) Services

Brief Educational or Supportive Contact

- Lasts for fewer than 15 minutes.
- Provides basic educational or emotional support to individuals or groups related to disaster reactions.

Individual Crisis Counseling

- Lasts for more than 15 minutes.
- Helps disaster survivors understand their situation and reactions, review their options, and connect with other individuals and agencies that may assist them.
- Includes working with an individual or family unit.
- Involves active listening by staff, who provide emotional support, identify and teach coping skills and stress management techniques, and help prioritize needs for the survivors.

Group Crisis Counseling

- Provides group members with emotional support and helps them to understand their situation and reactions and to review their options.
- May involve group activities, which must be appropriate to the age category and may be on emotional or practical concerns.
- Assists group members by referring them to other services and provides them with skills to cope with their situation and reactions.
- Involves situations in which group members do most of the talking.

Public Education

- Provides general educational information to survivors on disaster services available and key concepts of disaster behavioral health (DBH).
- May involve such common activities as public speaking at community forums, in-service group meetings, and local government meetings.
- Involves situations in which a crisis counselor does most of the talking and is presenting information.

Assessment, Referral, and Resource Linkage

- Assessment determines the need for referral to additional services, such as disaster relief or traditional mental health or substance use treatment.
- Referral directs survivors to formal mental health or substance use treatment if they are experiencing severe reactions.
- Referral may also direct survivors to other disaster relief resources that meet a wide range of physical, structural, or economic needs.
- Resource linkage connects disaster survivors with health and behavioral health services, disaster recovery resources, and tangible goods.

Community Networking and Support

- Networking allows for stronger community coalitions to promote recovery and access to services.
- Crisis counselors may be available at community events to provide a compassionate presence and crisis counseling services.
- These services involve coordinating with school personnel, community centers, community leaders, and/or faith-based organizations in order to provide crisis counseling services.

Distribution of Educational Materials

- Typically includes flyers, brochures, tipsheets, guidance documents, or website content.
- Includes topics such as basic disaster information, key concepts of disaster behavioral health, disaster reactions and coping skills, and individual or community recovery or resilience.
- Should include materials that address the needs of special populations and are available in multiple languages.
- Does not include data collection tools, such as the Participant Feedback Survey and Provider Feedback Survey forms.

Media and Public Service Announcements

- This category of services refers to activities and public messaging conducted in partnership with media, state and local governments, charitable organizations, or other community brokers of information.
- Activities and messaging are designed to reach a large number of people in order to promote access to CCP services or to provide basic information concerning disaster, key concepts of disaster behavioral health, disaster reactions and coping skills, and individual or community recovery and resilience.
- Venues for this messaging are varied and might include media interviews with CCP spokespeople, television or radio public service announcements, use of websites or email, advertising, and social media such as Facebook.

Appendix D: Tips for Completing SF-424 and SF-424a

This tipsheet provides additional information specifically related to Crisis Counseling Assistance and Training Program (CCP) applications. Please also refer to the instructions for the SF-424 (OMB 4040-004, expiration date 11/30/2025) and SF-424a (OMB 4040-0006, expiration date 02/28/2025).

| Application for Federal Assistance (SF-424) | |
|---|---|
| Item No. | Tip |
| 1 | Check "Application." |
| 2 | Check "New." |
| 3 | Leave blank. |
| 4 | Leave blank. |
| 5a | Leave blank. |
| 5b | Leave blank. |
| 6 | Leave blank. |
| 7 | Leave blank. |
| 8a | For the Immediate Services Program (ISP) application, enter the legal name of the applicant (the governor's authorized representative [GAR]) and the organization (the state emergency management agency [SEMA]) that will undertake the assistance activity. This is the organization that has registered with the System for Award Management (SAM). Information on registering with SAM may be obtained by visiting SAM.gov. |
| 8b | For the ISP application, the Employer/Taxpayer Identification Number can be obtained from the SEMA. For the Regular Services Program (RSP) application, the Employer/Taxpayer Identification Number can be obtained from the department of mental health's fiscal management office. |
| 8c | For the ISP application, the organization's UEI is to be listed and can be obtained from the SEMA. The UEI is a unique 12-character organization identifier received from SAM. Information on registering with SAM may be obtained by visiting the SAM.gov website. For the RSP application, the UEI can be obtained from the department of mental health's fiscal management office. |
| 8d | Enter the GAR's complete address here. |
| 8e | Enter the GAR's department and division name here. |
| 8f | Typically, the disaster behavioral health coordinator's contact information is entered here. |
| 9 | Only the first line for "Applicant 1" should be filled out. The type of applicant is "A. State Government." |

Application for Federal Assistance (SF-424)

| Item No. | Tip |
|----------|--|
| 10 | The federal agency is the “Federal Emergency Management Agency.” |
| 11 | For both the ISP and the RSP, states should enter the CFDA number 97.032 and the CFDA title “Crisis Counseling.” For the RSP, SAMHSA Grants Management also requires the SAMHSA CFDA number, 93.982, and the CFDA title, “DHHS Mental Health Disaster Assistance and Emergency Mental Health,” to be entered. |
| 12 | Per FEMA, leave the Funding Opportunity Number blank. |
| 13 | Leave blank. |
| 14 | The CCP application must correspond with areas listed in the Presidential disaster declaration. Generally, declarations specify counties as geographic units included in the declaration, but they may also specify parishes, municipalities, or other large geographic areas. Applicants should list declared counties, parishes, or municipalities to be served. |
| 15 | This may be listed as “Immediate Services Program (or Regular Services Program)—Crisis Counseling Assistance and Training Program,” or, if the state has already titled the project (e.g., Project Recovery), that title may be used instead. |
| 16a | Enter the two-letter state abbreviation, followed by “-all” (e.g., “MD-all” for an application from the State of Maryland). |
| 16b | This item should specify the state congressional districts included in the geographic units identified in item number 14. If the counties, parishes, or municipalities identified are all included in one state congressional district, then the code will include the two-letter state abbreviation followed by the number of the congressional district (e.g., CA-012). If the identified geographical area includes more than one congressional district, they should all be identified (e.g., NY-105, NY-106, NY-107). |
| 17 | The ISP is a 60-day program that begins on the date of the Presidential disaster declaration (day 0). Day 1 is the day after the declaration. Costs incurred to carry out services funded by the CCP may be reimbursed from the date of the disaster through the date the ISP application is submitted. Note that separate budgets are required for the projected program period and the reimbursable period leading up to the submission of the ISP application. For example, if the President declares a disaster March 1, the 60-day ISP program period will begin that day, which is day 0. The 60-day period will end April 30. However, the proposed project dates on the SF-424 would be March 15 (accounting for the 14 days given to complete the ISP application) as a start date and April 30 as an end date. The reimbursable budget would represent those costs incurred from the date of declaration (or the date of the disaster, if prior to the declaration) through March 15. The RSP provides funding for up to 9 months from the date the RSP is awarded. For example, if the ISP ended on April 30, the proposed project dates for the RSP might be May 1 through January 31. |

Application for Federal Assistance (SF-424)

| Item No. | Tip |
|----------|---|
| 18 | The amount of requested federal assistance should be listed on line (a). In-kind contributions should be listed on lines (c) or (d). There should be no program income listed on line (f). The estimated amounts should be rounded to the nearest dollar. |
| 19 | Disaster relief grants are exempt from this executive order. Applicants should check box “c.” |
| 20 | The state must answer this question in consultation with its fiscal management offices. |
| 21 | The signature block must be completed by the GAR or Chief Tribal Executive. No one else may sign for the Governor or Chief Tribal Executive. An SF-424 signed by anyone else will be returned and may delay processing of the application. |

Budget Information—Non-Construction Programs Form (SF-424a)

| Item No. | Tip |
|----------|--|
| 1a | Enter “Crisis Counseling” for the ISP and the RSP. |
| 1b | Enter 97.032 for the ISP and both 97.032 and 93.982 for the RSP. |