

**Follow the Six Steps
in the Application Process**

- 1. Review the Opportunity**
- 2. Get Ready to Apply**
- 3. Prepare Your Application**
- 4. Learn About Review and Award**
- 5. Submit Your Application**
- 6. Learn About What Happens After Award**

Substance Abuse and Mental Health Services Administration (SAMHSA)

NOFO Name: Statewide Family Network

NOFO Number: SM-25-004

Step 1: Review the Opportunity

Basic Information

NOFO Name: Statewide Family Network Program

Short Title: SFN

Initial Announcement

Funding Opportunity Number: SM-25-004

Assistance Listing Number: 93.243

Application Deadline: March 17, 2025

Eligible Applicants: Domestic public and private nonprofit entities. See [Eligibility](#) for complete eligibility information.

Electronic Application Submission Requirements: See [Step 2](#).

Important Resources

Applicants are expected to follow guidance provided in the ***FY 2025 NOFO [Application Guide](#)*** (the *Application Guide*). This document provides information about the application process, including registration, required attachments, budget, and federal policies and regulations. In addition, see [Grants Glossary](#) for definitions of terms used in this NOFO.

Authorizing Statute

Section 520A of the Public Health Service Act (42 USC 290bb-32)

Agency Contacts

Program and Eligibility Questions

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Review Process and Application Status Questions

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Executive Summary

The purpose of this program is to provide resources to enhance the capacity of statewide mental health family-controlled organizations to support, train, and mentor family members/primary caregivers who are raising children, youth, and young adults with serious emotional disturbance (SED) and/or co-occurring disorders (COD). SAMHSA aims to transform mental health and related systems in states by empowering family-controlled organizations to participate meaningfully in SED/COD policy development and service delivery.

Key Dates

Application Deadline: March 17, 2025

Expected Award Date: No later than September 29, 2025

Expected Start Date: September 30, 2025

Response to Executive Order 12372: see [Intergovernmental Review](#) and [Section J in the Application Guide](#).

Funding Details

Funding Type: Grant

Estimated Total Available Funding: \$1,142,585

Estimated Number of Awards: 9

Estimated Award Amount: Up to \$ 120,000 per year per award

Length of Project Period: Up to 3 years

Your annual budget cannot be more than \$120,000 in total costs (direct and indirect) in any year of the project. Annual continuation awards are contingent on the availability of funds, progress in meeting project goals and objectives, timely submission of required data and reports, and compliance with all terms and conditions of award.

Funding estimates for this announcement are based on an annualized Continuing Resolution and do not reflect the final FY 2025 appropriation. The amount of funding awarded is dependent on the availability of funds.

Program Description

Purpose

The purpose of this program is to provide resources to enhance the capacity of statewide mental health family-controlled organizations¹ to support, train, and mentor family members/primary caregivers² who are raising children, youth, and young adults with serious emotional disturbance (SED) and/or co-occurring disorders (COD). Support, training, and mentorship will build skills in primary caregivers to advocate for their child's and family's needs within child-serving systems and to participate in the policy and planning of those child-serving systems.

The population of focus is family members and primary caregivers who are raising children, youth, and young adults with SED, early serious mental illness (ESMI), and/or COD. These children, youth, and young adults may be involved in service systems such as mental health, substance use, child welfare/child protective services, juvenile justice, supported education, and intellectual/developmental disabilities.

The Surgeon General released a [National Advisory on the Mental Health and Well-being of Parents](#) in August 2024 that said, "Over the past decade, parents have been consistently more likely to report experiencing high levels of stress compared to other adults" (p. 9). The advisory also notes that 33 percent of parents reported high levels of stress in the past month compared to 20 percent of other adults, and that when stress is severe or prolonged, it can have a harmful effect on the mental health of parents and caregivers, which in turn also affects the well-being of the children they raise.

Family members/caregivers of children, youth and young adults with serious emotional disturbance often experience further increased stress stemming from caring for a child with significant behavioral health needs, and from the difficulty of navigating complex systems to access the services and supports their children, youth, and young adults require.

SAMHSA encourages you to address the behavioral health needs of all people including [underserved](#) communities. You must comply with [federal civil rights laws](#) that prohibit discrimination based on race, color, national origin, disability, age, religion, sex, and sexual orientation. You must also agree to comply with [federal conscience laws](#), if applicable.

¹ A mental health family--controlled organization is one where more than 50 percent of the organization's Board of Directors are family members who have primary daily responsibility for the raising of a child or youth with a serious emotional disturbance (SED).

² A primary caregiver is an individual who has day to day decision making responsibility for and provides a significant level of care and support for the child, youth, or young adult with SED. Examples of a primary caregiver include a biological parent, an adoptive parent, foster parent, grandparent, sibling, kinship caregiver, and others as defined by a family.

SAMHSA, in working with tribes, the Indian Health Service, and National Indian Health Board, developed [The National Tribal Behavioral Health Agenda \(TBHA\)](#). The TBHA addresses foundational elements, priorities, and strategies. You are encouraged to briefly cite the TBHA, if applicable.

Key Personnel

Key Personnel are staff members who make significant contributions to the project, even if they do not receive a salary from the project. They are expected to regularly participate in program monitoring activities.

This program's Key Personnel is the Project Director (PD). This position has a required minimum level of effort of 10 percent FTE.

The PD is responsible for oversight of the project, including project implementation and data management.

If awarded funding, you will be notified if your proposed PD has been approved. If your organization needs to replace the PD during your project period, SAMHSA needs to review their resume and job description to determine whether the replacement can be approved.

Required Activities

Funds must be primarily used to support capacity building. Capacity building involves strengthening the ability of your organization to meet the identified goals so that it can sustain or improve the delivery of services.

In the Project Narrative ([B.2](#)), you will provide a description of how you will implement all the required activities listed below.

1. Provide Family Advocacy and Support

Provide individual family advocacy, coaching, and support to families/primary caregivers raising children with SED/COD to navigate any service system in which their child is involved.

- Support can be delivered by phone, in virtual meetings, or in person.
- Support can include attending and participating with the family in meetings (e.g., individualized education programs (IEPs) at schools; juvenile justice court hearings; service planning meetings with child welfare; and wraparound service planning meetings.)

2. Provide Training

In partnership with local family and caregiver organizations, provide workshops and trainings addressing the needs of families and caregivers raising children, youth, and young adults with SED/COD. Training can include:

- Mental health awareness and support approaches
- Ways to navigate child-serving systems and organizations
- Family/caregiver rights and responsibilities under federal law within various child-serving systems
- Information on policy, service planning, and systems operations so families and primary caregivers can meaningfully participate on workgroups, councils, or policy committees

3. Provide Outreach and Education

Provide targeted outreach to families and primary caregivers raising children, youth, and young adults with SED/COD. Targeted outreach should include:

- Providing educational resources about issues experienced by families and primary caregivers raising children, youth and young adults with SED or COD.
- Identifying available support options for families and primary caregivers.
- Identifying any challenges specific to underserved and/or culturally, racially, and ethnically diverse families.

4. Enhance Family Empowerment

Enhance family empowerment for families and caregivers with children, youth, and young adults with SED or COD. This could include the following:

- Providing families and caregivers training and education to facilitate their participation in state and community agencies' improvements to treatment and service systems.
- Supporting the development of state-wide peer supports for families and primary caregivers.
- Increasing the number of families and primary caregivers on workgroups, councils, and committees.

5. Provide Training on Best Practices

Educate child-serving systems, administrators, and service providers about best practices in family-driven and youth-guided care. This could include:

- Best practices to ensure that youth and families are the primary decision-makers in their care plans.
- Best practices on the engagement and support of families and caregivers at all system levels.

6. **Build Partnerships**

Build partnerships with community-based organizations, and state and local administrations to support the diverse needs of families/primary caregivers raising children, youth, and young adults with SED/COD. This could include:

- Collaborating with local and state networks representing adult and youth peers with lived experience with mental health systems and services.
- Working with the state education agency and other state offices to encourage screening and early identification in schools of children and youth with SED/COD.
- Working with state agencies to promote the expansion and accessibility of critical resources for primary caregivers and children, youth and young adults with SED/COD, including respite care and youth-specific mobile crisis services.

7. **Family Leadership Development**

Provide leadership development and mentorship opportunities to families and primary caregivers so they can meaningfully participate with state and community agencies on behavioral health policy, planning and implementation.

8. **Participate in Formal State Peer Support Implementation**

Participate in and inform the implementation of statewide processes addressing peer support services for families/primary caregivers. This may include:

- Training
- Supervision
- Workforce development
- Certification and reimbursement mechanisms

Allowable Activities

Allowable activities are **not** required. However, your organization may propose to use funds for the following activities:

1. Provide training and technical assistance to grassroots family-run and/or youth-run recovery support service organizations. Topic areas can include:
 - Organizational development
 - Nonprofit management
 - Community development
 - Services financing

- Respite care
- Sustainability
- Leadership development
- Recovery programming
- Rights protection
- Digital peer support
- Support for families/caregivers of adult children

Note: Capitalizable infrastructure, such as computer systems/software and Health Information Technology (HIT), are recoverable as depreciation through an approved negotiated indirect cost rate or 15 percent de minimis rate in accordance with your organization's existing capitalization/amortization policies. See guidelines for HIT at [Frequently Asked Questions \(FAQs\)](#).

Eligibility

Eligible Applicants

Domestic public and private nonprofit entities, including:

- States and territories (Guam, the Commonwealth of Puerto Rico, the Northern Mariana Islands, the Virgin Islands, American Samoa, the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau), including the District of Columbia,
- Political subdivisions of states,
- Indian tribes, or tribal organizations (as such terms are defined in [Section 5304 of Title 25](#)),
- Health facilities or programs operated by or in accordance with a contract or award with the Indian Health Service,
- Public or private institutions of higher education, and
- Public or private nonprofit organizations. (NOTE: If you are a nonprofit organization, you must provide documentation of your nonprofit status in **Attachment 8** of your application.)

SAMHSA will only make one award per state where there is not a currently funded SFN award. Applications from states with a currently funded SFN will be screened out and not reviewed.

The following states are currently SFN-funded:

- Massachusetts
- Rhode Island
- North Carolina
- West Virginia
- Kentucky
- Pennsylvania
- Hawaii
- Missouri
- Nebraska

SAMHSA will only fund family-controlled organizations that are comprised of more than 50 percent family members/primary caregivers who are currently raising children, youth, or young adults with SED/COD. Your organization must submit a statement of assurance from the Board of Directors that the Board of Directors is comprised of more than 50 percent family members/caregivers with lived experience caring for a child, youth, or young adult with SED/COD. This letter must be included in **Attachment 10 of your application**. For other factors that will disqualify an applicant, see [Application Review](#).

For general information on eligibility for federal awards, see <https://www.grants.gov/learn-grants/grant-eligibility>. For specific eligibility questions, see [Agency Contacts](#).

Cost Sharing

Cost sharing/match is not required for this program.

Data Collection, Performance Measurement, and Performance Assessment

You must collect and report data and document your plan for data collection and reporting in [Section D](#) of your Project Narrative.

You must collect and report in SAMHSA's Performance Accountability and Reporting System (SPARS) project-level data on assigned performance monitoring indicators on a quarterly basis. Training and technical assistance on data collection and reporting in SPARS will be provided after award.

You must collect and report data on the following Infrastructure Development, Prevention, and Mental Health Promotion (IPP) indicators:

- The number of individuals who have received training in prevention or mental health promotion

- The number of consumers/family members representing consumer/family organizations who are involved in ongoing mental health-related planning and advocacy activities as a result of the grant
- The number of organizations collaborating/coordinating/sharing resources with other organizations as a result of the grant

The data you collect allows SAMHSA to report on key outcome measures. Performance measures are also used to show how programs reduce disparities in behavioral health access, increase client retention, expand service use, and improve outcomes.

Performance data will be reported to the public as part of SAMHSA's Congressional Budget Justification.

Performance Assessment

Your organization is required to submit programmatic progress reports that discuss if you are meeting the objectives you selected for this project, achieving the outcomes you anticipated, and if any changes need to be made. You must review your performance data to find out if you are making progress and improving project management. Refer to [Reporting Requirements](#) for information on submitting these reports.

Differential Impact Statement (DIS)

The Differential Impact Statement (DIS) statement is designed to help SAMHSA grantees show differential rates of involvement across populations in their grant funded projects. A key element of performance assessment is determining if your project is improving or expanding the reach of populations, including those who have not received services, in the project. The DIS is a requirement of all discretionary grant recipients. If your application is funded, you must develop a **DIS** no later than 90 days after award. You are expected to collect data to evaluate if the disparities you identified in your DIS are being addressed.

For more information on completing this section, see [Developing Goals and Measurable Objectives](#) and [Developing the Plan for Data Collection and Performance Measurement](#).

SAMHSA Core Principles and Other Expectations

When developing your project, you must consider SAMHSA's core principles of recovery, trauma informed approaches, access to high quality services for all populations, and commitment to data and evidence. SAMHSA has a person-centered mission, vision, goals, and guiding principles that can be found in the SAMHSA 2023-2026 Strategic Plan. In addition, there are other expectations included in [Section H in the Application Guide](#) that you must consider as you design your project.

Recipient Meetings

We plan to hold one grantee meeting, either virtual or in person, and your full participation in this meeting is expected. You will be given more information about this meeting at a future date. If the meeting is held in person and your agency has not budgeted for travel and accommodations, budget revisions will be permitted.

Funding Restrictions and Limitations

The following are funding restrictions for this project:

- Food is an unallowable expense.

You must also comply with SAMHSA's Standards for Financial Management and Standard Funding Restrictions in [Section F](#) in the *Application Guide*.

Step 2: Get Ready to Apply

Get Registered

SAM.gov

You must have an active account with SAM.gov. This includes having a Unique Entity Identifier (UEI). SAM.gov registration can take several weeks. Begin that process today.

To register, go to [SAM.gov Entity Registration](#) and select **Get Started**. From the same page, you can also select the Entity Registration Checklist for the information you will need to register.

Grants.gov

You must also have an active account with [Grants.gov](#). You can see step-by-step instructions at the Grants.gov [Quick Start Guide for Applicants](#).

eRA Commons

You must register in [eRA Commons](#). Register at least 6 weeks before the application deadline.

See guidance at [eRA Help and Tutorials](#) and [Section A](#) of the *Application Guide*.

Find the Application Package

The application package has all the forms you need to apply. You can find it online. Go to [Grants Search at Grants.gov](#) or [eRA ASSIST](#) and search for opportunity number: SM-25-004.

If you can't use Grants.gov to download application materials, you may request them from dgr.applications@samhsa.hhs.gov.

Step 3: Prepare Your Application

Application Contents and Format

Applications include five main components. This section includes guidance on each.

Make sure you include each of the following:

Component	Submission format
Project Abstract	Use the Project Abstract Summary form.
Project Narrative	Use the Project Narrative Attachment form.
Budget Narrative	Use the Budget Narrative Attachment form.
Attachments	Insert each in the Other Attachments form.
Other Required Forms	Upload using each required form.

See the [Application Checklist](#) for a full list of all requirements.

The following links contain information on:

- [Formatting instructions and information on system validation requirements](#)
- [Completing forms and required components](#) ([Section A](#) in the *Application Guide*)

Project Abstract

Page limit: 1 page

Your project abstract should include the project name, population of focus (demographics and clinical characteristics), strategies and interventions, project goals, and measurable objectives that include the number of people to be served annually and throughout the lifetime of the project.

In the first 5 lines or less of your abstract, write a summary of your project that can be used in publications, reports to Congress, and press releases, if you are funded.

Project Narrative

Page limit: 10 pages

Filename: Project narrative

In developing your project narrative:

- Provide a detailed response to the [merit review criteria](#).
- Follow the [required formatting instructions](#).
- Stay within the page limit or we will not review your application. We recommend page limits for the subsections, but they are for guidance only. You may place citations in an attachment, which does not count in the 10-page limit.

Budget Narrative

Page limit: none

Filename: BNF

The budget narrative supports the information you provide in Standard Form 424-A. See [other required forms](#).

It includes added detail and justifies the costs you ask for. As you develop your budget, consider:

- If the costs are reasonable and consistent with your project's purpose and activities.
- The restrictions on spending funds. See [funding limitations](#).

To create your budget narrative, see detailed instructions and a template in [Section E in the Application Guide](#).

Attachments

You will upload attachments in Grants.gov using the **Other Attachments form** or in eRA ASSIST using the **Other Narratives Attachment form**.

Use only the following attachments listed. If your application includes any attachments not required in this document, they will be disregarded.

Do not use attachments to extend or replace any of the sections of the project narrative. Reviewers will not consider them if you do.

Name the attachments: Attachment 1, Attachment 2, and so on.

Attachment 1: Letters of Commitment (LOC)

Include LOCs from any organization(s) partnering in the project. **Do not include any letters of support. Reviewers will not consider them.** A letter of support describes general support of the project while an LOC outlines the specific contributions an organization will make in the project.

Attachment 2: Data Collection Instruments or Interview Protocols

Provide the data collection instruments you will use.

Attachment 3: Sample Consent Forms

Include, as appropriate, informed consent forms for participation in the training/TA event and for the collection of data.

Attachment 4: Project Timeline

Page limit: 2 pages

This attachment is scored by reviewers. Provide a chart or graph depicting a realistic timeline for the entire 3 years of the project period. Show dates, key activities, and responsible staff. The key activities must include the requirements outlined in [required activities](#).

Attachment 5: Biographical Sketches and Position Descriptions

See [biographical sketches and position descriptions](#) for more information. Position descriptions should be no longer than 1 page each and biographical sketches should be 2 pages or less.

Attachment 6: Confidentiality and SAMHSA Participant Protection

This **required** attachment is in response to [Section D](#) in the *Application Guide* and reviewers will assess the response.

Attachment 7: Letter to the State Point of Contact

Review information on [Intergovernmental Review](#) and in [Section J](#) in the *Application Guide* for detailed information on E.O. 12372 requirements to determine if this applies.

Attachment 8: Documentation of Nonprofit Status

Proof of nonprofit status must be submitted in your application by private nonprofit organizations. Any of the following is acceptable evidence of nonprofit status:

- A reference to the applicant organization's listing in the Internal Revenue Service's (IRS) most recent list of tax-exempt organizations, as described in section 501(c)(3) of the IRS Code
- A copy of a current and valid IRS tax exemption certificate
- A statement from a state taxing body, state attorney general, or other appropriate state official certifying the applicant organization has nonprofit status
- A certified copy of the applicant organization's certificate of incorporation or similar document that establishes nonprofit status
- Any of the above proof for a state or national parent organization and a statement signed by the parent organization that the applicant organization is a local nonprofit affiliate

Attachment 9: Negotiated Indirect Cost Rate Agreement (NICRA)

If you have a Negotiated Indirect Cost Rate Agreement, the document must be submitted.

Attachment 10: Letter Certifying Composition of Board of Directors

A letter must be submitted certifying that your Board of Directors is comprised of more than 50 percent family members/primary caregivers who are currently raising children, youth, or young adults with SED/COD.

Other Required Forms

You will need to complete some standard forms. Upload the following standard forms listed at Grants.gov. You can find them in the NOFO [application package](#) or review them and their instructions at [Grants.gov Forms](#).

Forms	Submission Requirement
Application for Federal Assistance (SF-424)	With application
Budget Information for Non-Construction Programs (SF-424A)	With application
Assurances for Non-Construction Programs (SF-424B)	With application
Project/Performance Site Location(s) Form	With application
Grants.gov Lobbying Form	With application
HHS 690 Form	With application

- **SF-424** – Fill out all sections of the SF-424.
 - In **Line 4** (Applicant Identifier), enter the eRA Commons Username of the Project Director (PD)/Principal Investigator (PI).
 - In **Line 8f**, enter the name and contact information of the PD identified in the budget and in Line 4 (eRA Commons Username).
 - In **Line 17** (Proposed Project Date), enter: a. Start Date: 9/30/2025; b. End Date: 9/29/2028.
 - In **Line 18** (Estimated Funding), enter the amount requested or to be contributed for the first budget/funding period only by each contributor.
 - **Line 21** is the Authorized Representative and should not be the same individual as the PD in Line 8f.

It is recommended you review the sample of a [completed SF-424](#).

- **SF-424A BUDGET INFORMATION FORM** – Fill out all sections of the SF-424A using the instructions below. **The totals in Sections A, B, and D must match.**
Section A – Budget Summary:
 - As cost sharing/match is **not required**, use the first row only (Line 1) to report the total federal funds (e) and non-federal funds (f) requested for the **first year** of your project only.

Section B – Budget Categories:

- As cost sharing/match is **not required**, use the first column only (Column 1) to report the budget category breakouts (Lines 6a through 6h) and indirect charges (Line 6j) for the total funding requested for the **first year** of your project only.

Section C – Non-Federal Resources:

- As cost sharing/match is **not required**, leave this section blank.

Section D – Forecasted Cash Needs:

- Enter the total funds requested, broken down by quarter, only for **Year 1** of the project period.
- Use the first row for federal funds and the second row (Line 14) for **non-federal** funds.

Section E – Budget Estimates of Federal Funds Needed for the Balance of the Project:

- Enter the total funds requested for the out years (e.g., Year 2 and Year 3). For example, if funds are being requested for 3 years total, enter the requested budget amount for each of those budget periods in columns b and c.
(b) First column is the budget for the second budget period;
(c) Second column is the budget for the third budget period;
Use Line 16 for federal funds and Line 17 for non-federal funds.

See [Formatting Requirements](#) to review common errors in completing the SF-424 and the SF-424A. These errors will prevent your application from being successfully submitted.

It is highly recommended you use the [Budget Template](#) on the SAMHSA website.

See the [Budget Template Users Guide](#) and the sample completed SF-424A forms at: [Sample SF-424A \(No Match Required\)](#).

Step 4: Learn About Review and Award

Application Review

Initial Review

We review each application to make sure it meets basic requirements. We will not consider an application that:

- Is from an organization that does not meet all eligibility criteria.
- Is submitted after the [deadline](#).
- Exceeds the 10-page limit for the Project Narrative.

Merit Review

Project Narrative: Your Project Narrative describes the proposed project. Peer reviewers will assess your response to the criteria below.

The following instructions should be considered as you develop the Project Narrative:

- The Project Narrative cannot be longer than ten pages.
- There are four sections (Sections A-D) and you must use the section numbers and headings listed in the Evaluation Criteria.
- Include the section letter and number (e.g., A.1, B.2) **before the response to each criterion**. You do not need to type the full criterion in each section.
- Do not combine two or more criteria or refer to another section of the Project Narrative in your response.
- Reviewers will only consider information included in the appropriate numbered criterion.
- The number of points after each section heading is the maximum number of points a reviewer may give for that section.
- Unless required, cost-sharing will not be a factor in the review of your response to the criteria.

A: Population of focus and need statement (15 points – approximately 1 page)

1. Identify and describe the geographic area where the project will be implemented and the families/primary caregivers of children, youth, and young adults with SED/COD that will be impacted by the capacity building in the targeted systems or agencies.
2. To the extent possible, provide a demographic profile of the families/primary caregivers of children, youth, and young adults with SED/COD in the catchment area in terms of race, ethnicity, federally recognized tribe (if applicable), language, sex, sexual orientation, age, and socioeconomic status.
3. Describe the need to increase the capacity of your organization to implement, sustain, and improve behavioral health treatment and support services for families/primary caregivers who are raising children, youth, or young adults with SED/COD. Include information on the service gaps and other problems related to the need for capacity building. Identify the source of the data (for example, the [National Survey on Drug Use and Health \(NSDUH\)](#), [County Health Rankings](#), [Social Vulnerability Index](#), etc.). (Note: citations may be put in an attachment.)

B: Proposed implementation approach (35 points, approximately 5 pages)

1. Describe the goals and measurable objectives of your proposed project. (See [Developing Goals and Measurable Objectives](#).) They must align them with the Statement of Need in A.3.
2. Describe how you will implement all the [required activities](#) in Step 1.
3. In [Attachment 4](#), provide no more than a two-page chart or graph depicting a realistic timeline for the entire 3 years of the program. It must include dates, all required activities, and responsible staff. The timeline does not count towards the page limit for the Project Narrative.

C: Organizational experience and staffing (30 points, approximately 3 pages)

1. Describe the experience of your organization:
 - With similar projects and/or providing services to families/primary caregivers of children, youth, and young adults with SED/COD.
 - Working with diverse populations including underserved populations.
2. Identify any other organization(s) that will partner with you on this project. Describe their specific roles and responsibilities for this project. Letters of Commitment from each partner organization must be included in **Attachment 1**. Indicate if you are not partnering with any other organizations.
3. Provide a complete list of all significant staff positions for the project, including the Key Personnel (Project Director). For each, describe their:
 - Role
 - Level of effort (LOE), stated as a percentage of employment (e.g., 1.0 FTE = full-time)
 - Qualifications, including their experience providing services to the families/primary caregivers who are raising children, youth, or young adults with SED/COD, their familiarity with family peer support, with the culture(s) and language(s) of these individuals, and any experience working with underserved populations.
4. Submit a letter certifying (Attachment 10) that your Board of Directors is comprised of more than 50 percent family members/primary caregivers who are currently raising children, youth, or young adults with SED/COD.

D: Data collection and performance measurement (20 points – approximately 2 pages)

1. Describe how you will collect the required data for this project and how such data will be used to manage, monitor, and enhance the program. (See [Developing the Plan for Data Collection and Performance Measurement](#).)

Risk Review

Before making an award, we review the risk that you will not prudently manage federal funds. We need to make sure you've handled any past federal awards well and demonstrated sound business practices.

We use SAM.gov [Responsibility/Qualification](#) to check this history for all awards likely to be over \$250,000.

You can comment on your organization's information in SAM.gov. We'll consider your comments before making a decision about your level of risk.

If we find a significant risk, we may choose not to fund your application or to place specific conditions on the award.

For more details, see [45 CFR 75.205](#).

Review and Selection Process

When making funding decisions, we consider:

- Peer review results. These are key in making decisions but are not the only factor. The program office and approving official make the final determination for funding.
- Availability of funds.
- Submission of any required documentation that must be submitted prior to making an award.
- SAMHSA will only make one award per state where there is not a currently funded SFN award. The following states have an active FY24 SFN award and therefore should not apply for funding under this NOFO: Massachusetts, Rhode Island, North Carolina, West Virginia, Kentucky, Pennsylvania, Hawaii, Missouri, Nebraska. Applications from these states will be screened out and not reviewed.
- SAMHSA will only fund family-controlled organizations that are comprised of more than 50 percent family members/primary caregivers who are currently raising children, youth, or young adults with SED/COD. Your organization must submit a letter certifying that the Board of Directors is comprised of more than 50 percent family members/caregivers with lived experience caring for a child, youth, or young adult with SED/COD in **Attachment 10**.

Award Notices

You will receive an email from eRA Commons that describes how you can access the application review results, including the application score. If your application is approved for funding, a [Notice of Award \(NoA\)](#) will be emailed to: (1) the Signing Official identified on page 3 of the SF-

424 (Authorized Representative section); and (2) the Project Director identified on page 1 of the SF-424 (8f).

If your application is not funded, an email will be sent to you from eRA Commons. This email will include a summary of the peer reviewer comments and scores. It may take up to four months from a program's award date for this information to be sent to you.

The NoA is the only document that authorizes recipients to receive federal funding for a project.

Step 5: Submit Your Application

Submission Requirements and Deadlines

Go to [Find the Application Package](#) to make sure you have everything you need.

Make sure you are current with SAM.gov and UEI requirements. See [Get Registered](#).

You must maintain your registration throughout the life of any award.

Deadlines

Application

Due on March 17, 2025.

- For electronic submissions, the due time is 11:59 p.m. ET.
- If you receive an exemption from electronic submission, the due time is 4:30 p.m. ET. See exemptions for paper applications (3.2) in [Section A in the Application Guide](#).

Intergovernmental Review

You will need to submit application information for intergovernmental review under [Executive Order 12372](#). Under this order, states may design their own processes for obtaining, reviewing, and commenting on some applications. Some states have this process, and others don't.

To find out your state's approach, see the [list of state single points of contact](#). If you find a contact on the list for your state, contact them as soon as you can to learn their process. If you do not find a contact for your state, submit a Public Health System Impact Statement to appropriate state and local health agencies. See [Section J in the Application Guide](#).

Application Checklist

Make sure that you have everything you need to apply:

Component	Form to use	Page limit
<u>Project Abstract</u>	Use the Project Abstract Summary Form.	1 page
<u>Project Narrative</u>	Use the Project Narrative Attachment form.	10 pages 10 pages
<u>Budget Narrative</u>	Use the Budget Narrative Attachment form.	None
<u>Attachments</u>	Insert each in a single Other Attachments form.	
1. Letters of commitment, if applicable		None
2. Data collection instruments and interview protocols		None
3. Sample consent forms		None
4. Project timeline		2 pages
5. Biographical sketches and position descriptions		See: <u>Biographical Sketches</u>
6. Confidentiality and SAMHSA Participant Protection		None
7. Letter to State Point of Contact		None
8. Documentation of Nonprofit Status		None
9. Negotiated Indirect Cost Rate Agreement (NICRA), if applicable		None
<u>Other required forms/documents</u>	Upload using each required form.	
<input type="checkbox"/> Application for Federal Assistance (SF-424)		None
<input type="checkbox"/> Budget Information for Non-Construction Programs (SF-424A)		None
<input type="checkbox"/> Assurances for Non-Construction Programs (SF-424B)		None
<input type="checkbox"/> Project/Performance Site Location(s) Form		None
<input type="checkbox"/> Grants.gov Lobbying Form		None
<input type="checkbox"/> HHS 690 Form		None
<input type="checkbox"/> Other Active Federal Awards, if applicable		None

Step 6: Learn What Happens After Award

Post-award Requirements and Administration

Administrative and National Policy Requirements

There are important rules you need to know if you get an award. You must follow:

- All terms and conditions in the Notice of Award. You can see SAMHSA's [standard terms and conditions](#) on our website.
- The rules listed [45 CFR part 75](#), Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards.
- The HHS [Grants Policy Statement](#) (GPS). This document has terms and conditions tied to your award. If there are any exceptions to the GPS, they'll be listed in your Notice of Award.
- All federal statutes and regulations relevant to federal financial assistance, including those highlighted in [HHS Administrative and National Policy Requirements](#). See [Section G in the Application Guide](#).

Nondiscrimination and Assurance

- If you receive an award, you must follow all applicable nondiscrimination laws. You agree to this when you register in SAM.gov. You must also submit an Assurance of Compliance ([HHS-690](#)).
- To learn more, see the [Laws and Regulations Enforced by the HHS Office for Civil Rights](#).

Reporting Requirements

The recipient is required to submit an **annual Programmatic Progress Report (PPR)** in Years 1-2 and a Final Progress Report (FPR) in Year 3. The annual PPR is due within 90 days of the end of each budget period. The FPR must be submitted within 120 days after the end of the project period. This report must be cumulative and include all activities during the entire project period.

You must use the OMB-approved Programmatic Progress Report (PPR) template for your program. The template format is Excel (.xlsx). You will need to submit your completed PPR in eRA Commons.

For more information on the PPR template and information required for your program refer to <https://www.samhsa.gov/grants/gpra-measurement-tools/cmhs-gpra/programmatic-progress-reports>.

The PPR must include the following information:

- Key personnel and staffing updates;
- Changes in project budget, scope, and/or implementation;
- Progress towards implementation of the required activities and project goals as stated in your grant application, including project activity accomplishments, implementation facilitators, implementation challenges, and plans/actions for leveraging success and/or overcoming challenges
- DIS progress towards goals, barriers encountered and efforts to overcome, monitoring activities, and quality improvement plan adjustments and success stories.