

**Department of Health and Human Services
Substance Abuse and Mental Health Services
Administration**

**FY 2015 Program Supplement for Addiction Technology
Transfer Center (ATTC): Center of Excellence (CoE) on
Behavioral Health for Pregnant and Postpartum Women
(PPW) and their Families**

(Short Title: ATTC-CoE PPW)

(Initial Announcement)

Request for Applications (RFA) No.TI-15-008

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

PART 1: Programmatic Guidance

[Note to Applicants: This document must be used in conjunction with SAMHSA’s “Request for Applications (RFA): PART II – General Policies and Procedures Applicable to all SAMHSA Applications for Discretionary Grants and Cooperative Agreements”. PART I is individually tailored for each RFA. PART II includes requirements that are common to all SAMHSA RFAs. You must use both documents in preparing your application.]

Key Dates:

Application Deadline	Applications are due by May 11, 2015.
Intergovernmental Review (E.O. 12372)	Applicants must comply with E.O. 12372 if their state(s) participates. Review process recommendations from the State Single Point of Contact (SPOC) are due no later than 60 days after application deadline.
Public Health System Impact Statement (PHSIS)/Single State Agency Coordination	Applicants must send the PHSIS to appropriate state and local health agencies by application deadline. Comments from Single State Agency are due no later than 60 days after application deadline.

Table of Contents

EXECUTIVE SUMMARY	1
I. FUNDING OPPORTUNITY DESCRIPTION.....	2
II. AWARD INFORMATION.....	5
III. ELIGIBILITY INFORMATION	6
1. ELIGIBLE APPLICANTS.....	6
2. COST SHARING and MATCH REQUIREMENTS	6
IV. APPLICATION AND SUBMISSION INFORMATION	6
1. ADDITIONAL REQUIRED APPLICATION COMPONENTS.....	6
2. APPLICATION SUBMISSION REQUIREMENTS	7
3. FUNDING LIMITATIONS/RESTRICTIONS.....	7
V. APPLICATION REVIEW INFORMATION	7
1. EVALUATION CRITERIA.....	7
VI. ADMINISTRATION INFORMATION.....	9
1. REPORTING REQUIREMENTS	9
VII. AGENCY CONTACTS	9
Appendix I – Confidentiality and SAMHSA Participant Protection/Human Subjects Guidelines	11

EXECUTIVE SUMMARY

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT) announces the availability of two-year supplemental funding to enable one grantee from the fiscal year (FY) 2012 for Addiction Technology Transfer Centers (ATTC) cohort to expand/enhance grant activities required under the 2012 Request for Applications (RFA) by developing a Pregnant and Postpartum Women (PPW) Center of Excellence (CoE). This CoE will develop and strengthen the behavioral healthcare workforce that provides addiction treatment and recovery support services to PPW, their children, and their families. Information on the ATTC program may be found in the original funding announcement, TI-12-008, available on the SAMHSA website at <http://media.samhsa.gov/Grants/archives.aspx>.

Funding Opportunity Title:	Addiction Technology Transfer Center (ATTC) - Center of Excellence (CoE) on Behavioral Health for Pregnant and Postpartum Women (PPW) and their Families (ATTC-CoE PPW)
Funding Opportunity Number:	TI-15-008
Due Date for Applications:	May 11, 2015
Anticipated Total Available Funding:	Up to \$365,026 in year 1 of the award Up to \$634,409 in year 2 of the award
Estimated Number of Awards:	One award
Estimated Award Amount:	Up to \$365,026 in year 1 of the award Up to \$634,409 in year 2 of the award
Cost Sharing/Match Required	No
Length of Project Period:	Up to two years
Eligible Applicants:	Current SAMHSA FY 2012 Addiction Technology Transfer Center grantees [See Section III-1 of this RFA for complete eligibility information.]

Be sure to check the SAMHSA website periodically for any updates on this program.

I. FUNDING OPPORTUNITY DESCRIPTION

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT) announces the availability of two-year supplemental funding to enable one grantee from the fiscal year (FY) 2012 Addiction Technology Transfer Centers (ATTC) cohort to expand/enhance grant activities required under the 2012 Request for Applications (RFA) by developing a Pregnant and Postpartum Women (PPW) Center of Excellence (CoE). This CoE will develop and strengthen the behavioral healthcare workforce that provides addiction treatment and recovery support services to PPW, their children, and their families. Information on the ATTC program may be found in the original funding announcement, TI-12-008, available on the SAMHSA website at <http://media.samhsa.gov/Grants/archives.aspx>.

The purpose of the ATTC program is to develop and strengthen the workforce that provides addictions treatment and recovery support services to those in need. In partnership with Single State Authorities (SSAs), treatment provider associations, addictions counselors, multidisciplinary behavioral health professionals, faith and recovery community leaders, family members of those in recovery, and other stakeholders, the ATTCs assess the training and development needs of the substance use disorder workforce, and develop and conduct training and technology transfer activities to meet identified needs. Particular emphasis is on increasing knowledge and improving skills in using evidence-based and promising treatment/recovery practices in recovery-oriented systems of care.

SAMHSA currently funds 10 regional ATTCs that provide crucial support for addressing behavioral health issues at the regional and local levels. In addition, four ATTCs receive funding to address a national focus area and one ATTC serves as the national coordinating office. These 15 ATTCs provide comprehensive support with respect to developing and enhancing the workforce.

In order to develop and disseminate a PPW curriculum, a current ATTC grantee will develop a Center of Excellence (CoE) to develop and strengthen the behavioral healthcare workforce that provides addiction treatment and recovery support services to PPW, their children, and their families. The CoE will develop a training curriculum/toolkit for implementing the current PPW family-centered approach. Within the first year, the primary function of the ATTC-CoE is to develop a PPW family-centered curriculum by gathering, organizing, and evaluating current resources and research. The focus in year 2 will be on providing training (both face-to-face and on-line) and on disseminating the PPW curriculum/toolkit to agencies, other technical assistance providers, educational institutions, and individual practitioners implementing and adopting it.

At a minimum the funds awarded in year 1 will be used to conduct the following activities:

- Identify existing training curricula, training strategies and products currently being used nationally to support the implementation of family-centered approaches for addiction treatment and recovery support services for the PPW population.
- Inventory all existing ATTC products serving the PPW population of focus and identify those related to the use of a family-centered approach for addiction treatment and recovery support services.
- Conduct a critical review of SAMHSA products for the PPW population and obtain promising practices that have been used by SAMHSA grantees for PPW, their children and their families.
- Format and utilize products selected from these resources for the training of trainers, trainer curricula and technical assistance activities to develop the behavioral health workforce's knowledge, skills and attitudes in recruiting, engaging, and treating PPW, their children and their families for substance use, mental health and other primary/specialty behavioral healthcare services.
- Develop a high quality training curriculum, training activities and training resources to guide planning, developing and implementing a family-centered approach for addiction treatment and recovery support services for the PPW population.
- Develop a successful treatment model(s) curriculum/toolkit through reports and analyses that codify the service mix that needs to be included and the skills needed by the behavioral health workforce to implement a family-centered approach to addiction treatment and recovery support services for PPW
- Develop and implement a strategic plan to ensure issues facing PPW, their children and families are seen as key to stakeholders including: state authorities, local governments, and addiction professionals.

At a minimum the funds awarded in year 2 will be used to enhance the behavioral health workforce with training and expand the addiction workforce that can successfully treat PPW and their families by:

- Finalizing development of products. Conducting training and technology transfer activities and providing technical assistance on technology transfer to enhance the potential replication of activities and services across all ATTCs to make the results of this initiative available to the field. Strengthen the capacity and skills of the behavioral health workforce.

- Developing the behavioral health workforce's knowledge, skills and attitudes in recruiting, engaging, and treating PPW, their children and their families for substance use, mental health and other primary/specialty behavioral healthcare services.
- Maintaining an inventory and serving as a clearinghouse for existing evidence-based and promising practices in the provision of services for substance use disorders, mental health disorders and behavioral health prevention for PPW, their children and their families.
- Emphasizing multiple levels of implementation to include the role of learning communities, coaches, and the use of technology to maintain on-going support toward change aimed at individual clinical practice and organizational transformation in the provision of services.
- Ensuring a wide dissemination of products and identified best-practices through the use of webinars, on-line courses, and/or in-person trainings.
- Promoting the adoption and implementation of the identified treatment model(s) through evidence-based technology transfer strategies that focus on PPW, their children and their families.

The grantee will be expected to conduct the GPRA activities that are required for the current ATTC grant. As such, the grantee will be expected to report on the following measures:

- number of events per year
- number of participants per year
- participants' level of satisfaction with events
- usefulness of information presented at events
- application of information from each event

The data must be collected at the end of each event and 30 days following the event.

These activities will be collected separately from the current ATTC grant reporting activities.

ATTC grants are authorized under Section 509 of the Public Health Service Act, as amended. This announcement addresses Healthy People 2020 Substance Abuse Topic Area HP 2020-SA.

SAMHSA strongly encourages all grantees to provide a smoke-free workplace and to promote abstinence from all tobacco products (except in regard to accepted tribal traditions and practices).

NOTE: In addition to the above, grantees must comply with all of the requirements/expectations of the original grant for this program, including GPRA data collection.

II. AWARD INFORMATION

Funding Mechanism: Cooperative Agreement

Anticipated Total Available Funding: Up to \$365,026 in year 1 of the award
Up to \$634,409 in year 2 of the award

Estimated Number of Awards: One award

Estimated Award Amount: Up to \$365,026 in year 1 of the award
Up to \$634,409 in year 2 of the award

Length of Project Period: Up to two years

Proposed budgets cannot exceed the allowable amount of \$365,026 in year 1 of the award and cannot exceed \$634,409 in year 2 of the supplement. Annual continuation awards will depend on the availability of funds, grantee progress in meeting project goals and objectives, timely submission of required data and reports, and compliance with all terms and conditions of award.

Cooperative Agreement

This award is being made as a cooperative agreement because it requires substantial post-award federal programmatic participation in the conduct of the project. Under this cooperative agreement, the roles and responsibilities of the grantee and SAMHSA staff are:

Role of Grantee

The grantee is expected to participate and cooperate fully with SAMHSA staff in the implementation of this CoE. Activities must include: (1) compliance with all terms and conditions of the cooperative agreement; (2) cooperation with SAMHSA staff in accepting guidance and responding to requests for information and data; and (3) authorship or co-authorship of publications to make results of the program available to the field.

Role of Federal Staff

SAMHSA staff will work closely with the grantee to facilitate coordination of effort with other SAMHSA grantees, other federal agencies serving PPW and their minor children, the ATTC network, state and local governments as well as other service delivery

systems such as criminal justice, primary health care, child welfare, and others. SAMHSA staff will serve as collaborators with the Project Manager of the CoE and the Project Director of the ATTC grantee. SAMHSA staff will also provide guidance to help ensure that the necessary specialized expertise is available to assist projects and facilitate coordination of these projects with other SAMHSA initiatives. SAMHSA staff will also direct the overall coordination of the ATTC Network to avoid duplication of effort, help ensure replication of promising approaches across states, communities and treatment providers. In addition, SAMHSA staff will: provide guidance on existing publications on evidence-based and promising treatment/recovery practices for PPW and their minor children; assist in the coordination with SAMHSA's Regional Administrators; provide technical assistance on technology transfer to enhance potential replication of activities and services across all ATTCs; conduct periodic site visits; provide guidance regarding any SAMHSA modification in program direction and priorities; and author or co-author publications to ensure the results of this program are available to the treatment field.

III. ELIGIBILITY INFORMATION

1. ELIGIBLE APPLICANTS

Eligibility for this funding opportunity is limited to SAMHSA FY 2012 ATTC grantees. SAMHSA believes that the most effective way to accomplish the goals of this two-year supplemental program is to limit eligibility to the identified existing SAMHSA ATTC grantees because they have the infrastructure, partnerships, and necessary knowledge and skills already in place to rapidly implement the Center of Excellence without a lengthy start-up period or lengthy breaks in service.

2. COST SHARING and MATCH REQUIREMENTS

Cost sharing/match is not required in this program.

IV. APPLICATION AND SUBMISSION INFORMATION

In addition to the application and submission language discussed in PART II: Section I, you must include the following in your application:

1. ADDITIONAL REQUIRED APPLICATION COMPONENTS

- **Project Narrative and Supporting Documentation** – The Project Narrative describes your project. It consists of Sections A through D. Sections A-D together may not be longer than 25 pages. (Remember that if your Project Narrative starts on page 5 and ends on page 30, it is 26 pages long, not 25 pages.) More detailed instructions for completing each section of the Project Narrative are provided in [Section V – Application Review Information](#) of this document.

The Supporting Documentation provides additional information necessary for the review of your application. This supporting documentation should be provided immediately following your Project Narrative in Sections E and F. There are page limits for Section E, Biographical Sketches/Job Descriptions, but there are no page limits for Section F, Confidentiality and SAMHSA Participant Protection/Human Subjects. Additional instructions for completing these sections are included in PART II-V: Supporting Documentation. Supporting documentation should be submitted in black and white (no color).

- **Attachments 1 through 3** – Use only the attachments listed below. 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. Please label the attachments as: Attachment 1, Attachment 2, etc.
 - **Attachment 1:** Data Collection Instruments/Interview Protocols – If you are using standardized data collection instruments/interview protocols, you do not need to include these in your application. Instead, provide a web link to the appropriate instrument/protocol. If the data collection instrument(s) or interview protocol(s) is/are not standardized, you must include a copy in Attachment 1.
 - **Attachment 2:** Sample Consent Forms
 - **Attachment 3:** Letter to the SSA (if applicable; see PART II: Appendix C – Intergovernmental Review (E.O. 12372) Requirements).

2. APPLICATION SUBMISSION REQUIREMENTS

Applications are due by **11:59 PM** (Eastern Time) on May 11, 2015.

3. FUNDING LIMITATIONS/RESTRICTIONS

You must comply with the same funding restrictions that applied to the original grant.

V. APPLICATION REVIEW INFORMATION

1. EVALUATION CRITERIA

Your application will be reviewed and scored against the requirements listed below for developing the Project Narrative (Sections A-D). Independent reviewers will review and score your application and report to SAMHSA on the quality of your response to the requirements listed below, on issues that may impede the effective implementation of your project, and on participant protection issues that may need to be addressed. Deficiencies in your application may delay or prevent grant award or lead to special terms and conditions being placed on your award. In Sections A-D of the Project

Narrative, you must clearly describe how you intend to use grant funds. Sections A-D of your application may not exceed 25 pages.

- You must use the four sections/headings listed below in developing your Project Narrative. **You must indicate the Section letter and number in your response or it will not be considered, i.e., type “A-1”, “A-2”, etc., before your response to each question.** Your application will be scored according to how well you address the requirements for each section of the Project Narrative.
- Although the budget and supporting documentation for the proposed project are not scored review criteria, the Review Group will consider their appropriateness after the merits of the application have been considered. (See PART II: Section V and Appendix F).

Section A: Progress to Date (20 points)

1. Describe your organization’s experience with the existing grant program. Report on accomplishments to date. Discuss any obstacles/problems that have been encountered and actions taken towards their resolution.

Section B: Proposed Approach for Program Expansion/Enhancement (35 points)

1. Describe your plans to expand or enhance your existing program and how your planned activities will meet the expected goals and objectives of the supplemental program. Clearly describe all activities that will be supported with the supplemental grant funds. Discuss how the supplemental activities will be integrated into the ongoing project. Describe roles and responsibilities of collaborating organizations, where applicable. Provide the projected number of trainings and other technology transfer activities including the number of curricula to be developed, the number of webinars, on-line courses, and/or in-person training to be held. Demonstrate how the proposed approach appropriately addresses factors such as age, race, ethnicity, culture, language, sexual orientation, disability, literacy and gender of the population.

Section C: Implementation Plan and Staffing (30 points)

1. Present your plan for implementing and managing the supplemental activities. Include a timeline for implementation showing key activities, milestones and responsible staff. These key activities should include the requirements outlined in Section I. Identify any cash or in-kind contributions that will be made to the project by the applicant or other partnering organizations.

Section D: Data Collection and Performance Measurement (15 points)

1. Provide an updated performance measurement plan that incorporates the new activities to be funded with supplemental funds. Identify data that will be

collected to provide regular feedback to the project to determine if the goals of the supplemental program are being met. The performance measurement plan should include both process and outcome requirements. Include copies of the instruments and/or protocols you will use in **Attachment 1** of your application (if you are not providing a web link) and copies of consent forms in **Attachment 2**.

2. Describe how you will incorporate the supplemental activities into your ongoing Government Performance and Results (GPRA) Modernization Act of 2010 activities. Remember to include data collection and performance measurement costs in your requested budget.

SUPPORTING DOCUMENTATION

Section E: Biographical Sketches and Job Descriptions

See PART II: Appendix E – Biographical Sketches and Job Descriptions, for instructions on completing this section.

Section F: Confidentiality and SAMHSA Participant Protection/Human Subjects

You must describe procedures relating to Confidentiality, Participant Protection and the Protection of Human Subjects Regulations in Section F of your application. See [Appendix I](#) of this document for guidelines on these requirements.

VI. ADMINISTRATION INFORMATION

1. REPORTING REQUIREMENTS

In addition to the data reporting requirements of your original grant, grantees must comply with the reporting requirements listed on the SAMHSA website at <http://www.samhsa.gov/grants/grants-management/reporting-requirements>.

VII. AGENCY CONTACTS

For questions about program issues contact:

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Center for Substance Abuse Treatment
Substance Abuse and Mental Health Services Administration
1 Choke Cherry Road
Room 5-1091
Rockville, Maryland 20857
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andrea.kopstein@samhsa.hhs.gov

For questions on grants management and budget issues contact:

Eileen Bermudez
Office of Financial Resources, Division of Grants Management
Substance Abuse and Mental Health Services Administration
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Appendix I – Confidentiality and SAMHSA Participant Protection/Human Subjects Guidelines

Confidentiality and Participant Protection:

Because of the confidential nature of the work in which many SAMHSA grantees are involved, it is important to have safeguards protecting individuals from risks associated with their participation in SAMHSA projects. All applicants must address the two elements below. While we encourage you to keep your responses brief, there are no page limits for this section and no points will be assigned by the Review Committee. Problems with confidentiality and participant protection identified during peer review of the application must be resolved prior to funding.

1. Privacy and Confidentiality

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

2. Adequate Consent Procedures

- List what information will be given to people who participate in the project. Include the type and purpose of their participation. Identify the data that will be collected, how the data will be used and how you will keep the data private.
- State:
 - Whether or not their participation is voluntary.
 - Their right to leave the project at any time without problems.
 - Possible risks from participation in the project.
 - Plans to protect clients from these risks.

- Explain how you will get consent for youth, the elderly, people with limited reading skills, and people who do not use English as their first language.
- Include, as appropriate, sample consent forms that provide for: (1) informed consent for participation in service intervention; (2) informed consent for participation in the data collection component of the project; and (3) informed consent for the exchange (releasing or requesting) of confidential information. The sample forms must be included in **Attachment 2, “Sample Consent Forms”**, of your application. If needed, give English translations.
- Describe if separate consents will be obtained for different stages or parts of the project. For example, will they be needed for both participant protection in treatment intervention and for the collection and use of data?
- Additionally, if other consents (e.g., consents to release information to others or gather information from others) will be used in your project, provide a description of the consents. Will individuals who do not consent to having individually identifiable data collected for evaluation purposes be allowed to participate in the project?