Statewide Consumer Network
Program Overview

March 24, 2022
2:00 PM. Eastern Standard Time

Please Stand By – This webinar will begin shortly.

To access the audio portion of this webinar,
Call 1(669)254-5252, *988328#

Application Link: https://www.samhsa.gov/grants/grant-announcements/sm-22-009
Funding Opportunity Number: SM-22-009

Estimated Total Available Funding: $720,000

Estimated Number of Awards: Up to 6

Estimated Award Amount: $120,000

Cost Sharing/Match Required: No

Length of Project Period: Up to 3 Years

Application Due Date: Monday, May 2, 2022

Anticipated Project Start Date: September 30, 2022
Program Purpose

1. Enhance statewide mental health consumer-run organizations to promote mental health and related service system capacity and infrastructure development to be consumer-centered targeted toward recovery and resiliency, and consumer-driven by promoting the use of consumers as agents of transformation.

2. Address the needs of underserved and under-represented consumers, including those from ethnic, racial, or cultural minority groups; sexual orientation and gender minority individuals; those with histories of chronic homelessness or involvement with the criminal justice system; and those with mental health and co-occurring disorders (COD).
Eligibility

• Domestic public or private non-profit organizations, including consumer-run organizations.

• State governments and territories.

• Governmental units within political subdivisions of a state (e.g., county, city, town).

• Federally recognized American Indian/Alaska Native (AI/AN) tribes, tribal organizations, Urban Indian Organizations, and consortia of tribes or tribal organizations.
Required Application Components

Budget Information (NOFO, p. 17)

SF-424A (p. 17)

Budget Justification and Narrative Example – See Appendix L (p. 72)

Project Narrative – No longer than 10 PAGES (p. 18)

Attachments 1-8 (18 - 19)

Attachment 1: Letters of Commitment from participating organizations (p. 18)

Attachment 2: Data Collection Instruments/Interview Protocols (p. 18)

Attachment 3: Sample Consent Forms (p. 18)
Attachment 4: Project Timeline (p. 19)

Attachment 5: Biographical Sketches and Position Descriptions - See Appendix G (p. 56)

Attachment 6: Letter to Single State Agency (SSA) - See Appendix J (p. 63)

Attachment 7: Confidentiality and Participant Protection/Human Subject Guidelines - See Appendix D (p. 46)

Attachment 8: Documentation of Non-Profit Status (p. 19)
All applicants must register with NIH’s eRA Commons in order to submit an application. This process takes up to six weeks. If you believe you are interested in applying for this opportunity, start the registration process immediately. Do not wait to start this process.

SEE APPENDIX A FOR DETAILED INSTRUCTIONS
You are required to complete four (4) registration processes:

• Dun & Bradstreet Data Universal Numbering System (DUNS number)
  Please review the information in Appendix A on the DUNS number transitioning to a new Unique Entity Identifier (UEI) effective April 2022.
• System for Award Management (SAM);
• Grants.gov; and
• eRA Commons.

If you have already completed registrations for DUNS, SAM, and Grants.gov, you need to ensure that your accounts are still active, and then register in eRA Commons.

SEE APPENDIX A FOR DETAILED INSTRUCTIONS
Required Activities

Build capacity and infrastructure of the statewide consumer network to cultivate the mission as a consumer-run organization and ensure effective consumer governance and management of the organization that has statewide reach to include:

• Leadership and management development and mentoring; Evidence-based and/or best practices for consumer-run organizations;
• Board recruitment and development;
• Membership recruitment; and
• Focus groups and key informant/stakeholder interviews.
Required Activities, Cont.

Enhance consumer voice, empowerment, and participation in behavioral health policy, planning, and implementation across the state to include:

- Increasing the number of consumers across the state in workgroups, advisory boards, and committees to effect systems change that is recovery focused, trauma-informed, culturally relevant, holistic, and resilience-oriented;
- Providing leadership development, training, outreach, and education for consumers;
- Partnering with state and community agencies in policy development to support needed consumer direction and participation in treatment and service systems improvements; and/or
- Supporting the development and implementation of statewide processes addressing mental health peer support for consumers (e.g., introduction and/or adoption of evidence-based and promising peer support practices, training, supervision, and/or certification).
Increase consumer involvement and leadership in workforce and program development to enhance access to and availability of evidence-based and promising practices that are holistic, consumer-driven, and trauma informed. Areas of focus shall include:

• Models and best practices for trauma-informed peer support and related systems change;

• Mental health peer support models for specific issues, including those involved in the criminal justice systems, older adults, and youth and young adults;

• Wellness and/or whole health integrated care models and supports;

• Crisis response services and supports across a continuum of need (e.g., warmlines, peer respites, mobile crisis services, peer bridgers); and

• Mental health peer workforce development in supported employment and supported education activities.
Promote recovery-oriented services based on emerging or existing needs in the state, such as:

- Justice-involved consumers;
- COD, including opioid disorders;
- Integrated care;
- Certified Community Behavioral Health Clinic implementation;
- Trauma-informed approaches;
- Crisis response and/or state 988 implementation; and
- Employment and education.
Recipients are required to report performance on the following measures:

- The number and percentage of work group/advisory group/council members who are consumers/family members.
- 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.
Funding Restrictions

The funding restrictions for this project are as follows. Be sure to identify these expenses in your proposed budget.

• No more than 15 percent of the total grant award for the budget period may be used for data collection, performance measurement, and performance assessment, including incentives for participating in the required data collection follow-up.
Application Evaluation Criteria

**Section A:** Population of Focus/Statement of Need (15 points – approximately 1 page)

**Section B:** Proposed Approach (30 points – approximately 5 pages)

**Section C:** Staff, Management and Relevant Experience (45 points approximately 3 pages)

**Section D:** Data Collection and Performance Measurement (10 points – approximately 1 page)
Section A: Statement of Need

1. Identify and describe the proposed geographic catchment area where the project will be implemented and how the population(s) of focus will be impacted by the infrastructure development intended to advance the ability of statewide mental health consumer-run organizations to promote mental health and related service system capacity. Provide a demographic profile of the population of focus.

2. Document the need for an enhanced infrastructure to increase the capacity to implement, sustain, and improve service system capacity that is consumer-driven and engaged with statewide stakeholders that is consistent with the purpose of this NOFO. Include information on the gaps and other problems related to the need for infrastructure development. Identify the source of the data.
1. Describe the goals and measurable objectives of your proposed project and describe how they align with the Statement of Need, including, but not limited to, outreach to this NOFO’s population of focus.

2. Describe how you will implement the Required Activities as stated in Section I, and how consumers will inform the implementation and performance of the proposed project.

3. Provide a chart or graph depicting a realistic timeline for the entire 3 years of the project period showing dates, key activities, and responsible staff.
Section C: Staff, Management, and Relevant Experience

1. Describe the experience your organization has operating as a consumer operated organization and supporting the population(s) of focus for this NOFO. In addition, document that your Board of Directors is comprised of more than 50 percent consumers. Identify any other organization(s) that will partner in the proposed project. Describe their specific roles and responsibilities in this project. If applicable, Letters of Commitment from each partner must be included Attachment 1 of your application. If you are not partnering with any other organization(s), indicate so in your response.

2. Describe how your organization uses and will continue to use the expertise of consumers to govern and guide the work of your organization (including executive and front-line staff) and how they reflect the culture and ethnicity of the consumers needing your support.

3. Provide a complete list of staff positions for the project, including the Key Personnel (Project Director) and the consumers that occupy leadership roles in the management of the organization. [NOTE: Identify in the list those positions that are held by consumers.] Describe the role of each, their level of effort, and qualifications, including their lived experience with mental illness and experience providing leadership on issues related to developing consumer-centered mental health systems that are oriented toward recovery and resiliency development.
1. Provide specific information about your how you will collect the required data for this program and how such data will be utilized to manage, monitor, and enhance the program.
Grants Management Overview

Division of Grants Management
Substance Abuse and Mental Health Services Administration
U.S. Department of Health and Human Services
1. Applying for a Grant - Available Resources
2. Applicable Policies & Regulations
3. Factors Affecting Allowability of Costs
4. Budget Narrative & Justification
5. Sample Budget Template
6. SF-424A
7. Key Personnel
8. Indirect Cost Rate
9. Funding Limitations/Restrictions
10. Questions/Technical Support
A manual is available for applicants: Developing a Competitive SAMHSA Grant Application (PDF | 1 MB).

This manual will provide applicants with valuable information about how to prepare a strong grant application.

Additional information can be found on: https://www.samhsa.gov/grants/grants-training-materials
Learn more about registering, searching, and applying for federal grant opportunities.

- **Recording of the SAMHSA Applicant Webinar (39 minutes)**
- **NOFO Applicant Webinar Presentation (PDF | 7 MB)**
- **Grants.gov Video Series**

For more information refer to: [https://www.samhsa.gov/grants/applying](https://www.samhsa.gov/grants/applying)

- **Note:** Effective April 4, 2022, the Data Universal Numbering System (DUNS) Number will be replaced by a Unique Entity Identifier (UEI) assigned by the System for Award Management (SAM.gov). For more information, please refer to [https://sam.gov/content/duns-uei](https://sam.gov/content/duns-uei).


• **Financial Management Requirements** - the financial management control areas provide recipients with guidance for ensuring their existing accounting and personnel policies and procedures (P&P) include the necessary controls. *The guidance is also used by SAMHSA to complete Financial Capability Reviews (FCRs) of new and prospective grantees.* Learn more about grantees financial management requirements.

• **The Notice of Funding Opportunity (NOFO)**
## APPLICABLE POLICIES & REGULATIONS (CONT’D.)

### 45 CFR PART 75—UNIFORM ADMINISTRATIVE REQUIREMENTS, COST PRINCIPLES, AND AUDIT REQUIREMENTS FOR HHS AWARDS

<table>
<thead>
<tr>
<th>Recipient Type</th>
<th>Uniform Admin Requirements</th>
<th>Cost Principles</th>
<th>Audit Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colleges &amp; Universities</td>
<td>45 CFR Part 75, Subpart C and D</td>
<td>45 CFR Part 75, Subpart E</td>
<td></td>
</tr>
<tr>
<td>Non-Profits</td>
<td></td>
<td>45 CFR Part 75, Subpart E</td>
<td></td>
</tr>
</tbody>
</table>
Proposed budgets must contain allowable, reasonable, and allocable costs, as defined under 45 CFR 75.403, 75.404, and 75.405.

- **Allowable** costs, unless otherwise authorized by program statute are necessary and reasonable for award performance and allowable under the cost principles.

- **Reasonable** costs are not in excess of what would normally be incurred by a prudent person under the circumstances prevailing at the time the decision was made, given market rates, effort and the organization’s documented policies.

- **Allocable** costs can be charged to a federal award if the goods or services are chargeable in accordance with relative benefits received.
• All applications must include a detailed budget and narrative justification that explains the federal and the non-federal expenditures.

• The detailed budget and narrative justification must be consistent with and support the Project Narrative.

• You must provide a description of existing resources and other support you expect to receive for the proposed project.

  ✓ Other support is defined as funds or resources, whether federal, non-federal, or institutional, in direct support of activities through fellowships, gifts, prizes, in-kind contributions, or non-federal means.
The Budget Narrative and justification must be concrete and specific. It must provide a justification for the basis of each proposed cost in the budget and how that cost was calculated. Examples to consider when justifying the basis of your estimates can be ongoing activities, market rates, quotations received from vendors, or historical records.

Detailed Breakdowns must be provided of the materials, quantities, number of persons, cost per unit/hour, number of hours/levels of effort, or other relevant basis to show how costs will be utilized towards achieving the grant’s goals and objectives. This is to facilitate the determination of whether the proposed costs are allowable, reasonable, and allocable.

An illustration of a budget and narrative justification is included in Appendix L of the NOFO.
To reduce errors and expedite the review of your budget, it is highly recommended you use the SAMHSA Budget Template to complete the Detailed Budget and Narrative Justification required for submission with your application.

• Over the years, numerous recipients requested a template to present budget information. We heard you!!
• The budget template was created with extensive recipient consultation and input and designed to avoid all the common budget preparation pitfalls.
• The SAMHSA Budget Template includes a wealth of helpful tooltips and resources to assist and guide you with preparation of your budget.
• The budget template is available at: https://www.samhsa.gov/grants/applying/forms-resources

Note: For SAMHSA to view all your budget data, you must flatten/convert the PDF to a non-editable format by PRINTING TO PDF before submission.

The following resources provide guidance on use of the budget template:

• Key Features of the Budget Template
• Budget Template Users Guide
• Budget Review Checklist (For review of your Detailed Budget before submission)
SAMPLE SF-424A (MATCH NOT REQUIRED)

<table>
<thead>
<tr>
<th>Grant Program Function or Activity (a)</th>
<th>Catalog of Federal Domestic Assistance Number (b)</th>
<th>Estimated Unobligated Funds</th>
<th>New or Revised Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Federal (c)</td>
<td>Non-Federal (d)</td>
</tr>
<tr>
<td>1. TI-18-016 - Federal</td>
<td>93,788</td>
<td>$247,500.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>4.</td>
<td></td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>5. Totals</td>
<td></td>
<td>$247,500.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

**SECTION B - BUDGET CATEGORIES**

<table>
<thead>
<tr>
<th>6. Object Class Categories</th>
<th>Grant Program, Function or Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Personnel</td>
<td>(1) TI-18-016 - Federal</td>
</tr>
<tr>
<td>b. Fringe Benefits</td>
<td>(2)</td>
</tr>
<tr>
<td>c. Travel</td>
<td>(3)</td>
</tr>
<tr>
<td>d. Equipment</td>
<td>(4)</td>
</tr>
<tr>
<td>e. Supplies</td>
<td>(5)</td>
</tr>
<tr>
<td>f. Contractual</td>
<td></td>
</tr>
<tr>
<td>g. Construction</td>
<td></td>
</tr>
<tr>
<td>h. Other</td>
<td></td>
</tr>
<tr>
<td>i. Total Direct Charges (sum of 6a-6i)</td>
<td></td>
</tr>
<tr>
<td>j. Indirect Charges</td>
<td></td>
</tr>
<tr>
<td>k. TOTALS (sum of 6i and 6j)</td>
<td>$247,500.00</td>
</tr>
</tbody>
</table>

Note: Section A Total must equal Section B Total.
**SAMPLE SF-424A (MATCH NOT REQUIRED)**

### SECTION C - NON-FEDERAL RESOURCES

<table>
<thead>
<tr>
<th>(Example only)</th>
<th>8.</th>
<th>TI-18-016 - Federal</th>
<th>(Example only)</th>
<th>(a) Grant Program</th>
<th>(b) Applicant</th>
<th>(c) State</th>
<th>(d) Other Sources</th>
<th>(e) TOTALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>13. Federal</td>
<td>14. Non-Federal</td>
<td>15. TOTAL (sum of lines 13 and 14)</td>
<td>$247,500.00</td>
<td>$0.00</td>
<td>$247,500.00</td>
<td></td>
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</tbody>
</table>

**All totals in the circles should match (sections A, B, D)**

### SECTION D - FORECASTED CASH NEEDS

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
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<tbody>
<tr>
<td>$247,500.00</td>
<td>$0.00</td>
<td>$247,500.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1st Quarter</th>
<th>2nd Quarter</th>
<th>3rd Quarter</th>
<th>4th Quarter</th>
</tr>
</thead>
<tbody>
<tr>
<td>$61,675.00</td>
<td>$61,675.00</td>
<td>$61,675.00</td>
<td>$61,675.00</td>
</tr>
</tbody>
</table>

### SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

**Section E is for the future budget period (year 2)**

<table>
<thead>
<tr>
<th>(Example only)</th>
<th>16. TI-18-016 - Federal</th>
<th>(Example only)</th>
<th>(a) Grant Program</th>
<th>(b) First</th>
<th>(c) Second</th>
<th>(d) Third</th>
<th>(e) Fourth</th>
</tr>
</thead>
<tbody>
<tr>
<td>20. TOTAL (sum of lines 16-19)</td>
<td>$247,500.00</td>
<td>$247,500.00</td>
<td>$247,500.00</td>
<td>$247,500.00</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Section F is optional**

Federal funds needed for 2nd budget period

Federal funds needed for 3rd budget period

Federal funds needed for 4th budget period

Federal funds needed for 5th budget period

* Section D – Forecasted Cash Needs, Federal (line 13) amount must equal Section A Budget Summary and Section B Budget Categories federal funding. Ensure that Section D “TOTAL” amount = Section A and Section B TOTALS.
AVOIDING COMMON ISSUES WITH THE SF-424A

- “SECTION D - FORECASTED CASH NEEDS” column “Total for 1st year” line “15. TOTAL” MUST EQUAL “SECTION A - BUDGET SUMMARY” subsection “New or Revised Budget” column “Total (g)” line “5. Totals” amount.

- “SECTION B – BUDGET CATEGORIES” column “Total (5)” line “K. TOTALS” MUST EQUAL “SECTION A - BUDGET SUMMARY” subsection “New or Revised Budget” column “Total (g)” line “5. Totals” amount.

- The number of years indicated in “SECTION E – BUDGET ESTIMATES OF FEDERAL FUNDS....” subsection “FUTURE FUNDING PERIODS (YEARS)” MUST correlate with the number of years based on the “Start Date” and “End Date” in section “17. Proposed Project” on the SF 424. Enter data for the first budget period in Section D and enter future budget periods in Section E. Please refer to the Notice of Funding Opportunity (NOFO) for additional guidance.
1. The Key Personnel for this program is the Project Director (PD) with at least a 10% level of effort (LOE).
   a) List both positions in your detailed budget (even if funded in-kind or with matching contributions).
   b) Provide the PD resume and job/position description.

2. List the Principal Investigator (PI) or PD to be designated as “Contact” in section 8f and reflect their commons ID in Field #4 of the SF-424. Either the PI or the PD can be designated as “Contact” in eRA to take actions and receive notifications but not both.

3. If the PD position is being filled by a contractor/consultant, you must provide a copy of the formal written agreement for that specifies the official relationship and addresses performance of all the required duties and responsibilities.
• Ensure that you submit your organization’s current negotiated Indirect Cost (IDC) rate agreement or cost allocation plan with HHS or any other federal agency which required to support the charge of indirect costs.

• If your organization is opting to use 10% of Modified Total Direct Costs (MTDC), then a clear statement must be made in your IDC narrative as follows: “XYZ Organization elects to use the de minimis rate of 10 percent of modified total direct costs (MTDC)”.

• Ensure that you accurately calculate the MTDC base to which your IDC rate is applicable.

• Include calculations to show how you arrived at your IDC base and IDC total.
Refer to the program specific Funding Restrictions/Limitations in section IV and the Standard Funding Restrictions in Appendix I of NOFO, as well as to 45 CFR Part 75, for applicable administrative requirements and cost principles.

**The funding restrictions for this project are as follows:**

- No more than 15 percent of the total grant award for the budget period may be used for data collection, performance measurement, and performance assessment, including incentives for participating in any required data collection follow-up.

Your proposed budget must adhere to the funding limitations/restrictions specified in Section IV-3 of your NOFO. Include a narrative and separate budget for each year of the grant that shows the dollar amount and the percent of the total grant award that will be used in the area where there is a limitation. Refer to the sample in Appendix L (SAMHSA Budget Template -> Sample Budget – NON-MATCH) of your NOFO for an example of how this should be presented.

Recipients should maintain adequate documentation of which expenses correspond to the funding limitations/restrictions and the percent of the total grant award that will be used in each area where there is a limitation.
**Program/eligibility questions?**
Center for Mental Health Services, Child, Adolescent, and Family Branch (CMHS), SAMHSA
(240) 276-1875
Leila.DiSola@samhsa.hhs.gov

**Fiscal/budget related questions?**
Office of Financial Resources, Division of Grants Management, SAMHSA
(240) 276-1400
Email: FOACMHS@samhsa.hhs.gov

**Review process/application status questions?**
Office of Financial Resources, Division of Grant Review, SAMHSA
(240) 276-1693
Email: sara.fleming@samhsa.hhs.gov

**Problems submitting your application on Grants.gov?**
Contact the Grants.gov Helpdesk:
Email: support@grants.gov
Phone: 1-800-518-4726 (1-800-518-GRANTS)

**eRA Commons Technical Questions?**
Contact the eRA Service Desk
Web Support
Submit a Web Ticket (preferred method of contact)
Toll-Free: 1-866-504-9552
Phone: 301-402-7469 (Press 6 for SAMHSA Grantees)
Hours: Mon-Fri, 7 a.m. to 8 p.m. EST (closed on federal holidays)