

**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Health Resources and Services Administration**

Bureau of Health Workforce  
Division of Nursing and Public Health

***Behavioral Health Workforce Education and Training (BHWET) for  
Paraprofessionals and Professionals***

**Announcement Type:** New

**Funding Opportunity Number:** HRSA-16-193

**Catalog of Federal Domestic Assistance (CFDA) No. 93.243**

**FUNDING OPPORTUNITY ANNOUNCEMENT**

Fiscal Year 2016

**Application Due Date: July 1, 2016**

*Ensure your SAM.gov and Grants.gov registrations and passwords are current immediately!  
Deadline extensions are not granted for lack of registration.  
Registration in all systems, including SAM.gov and Grants.gov,  
may take up to one month to complete.*

**Release Date: May 9, 2016**

**Issuance Date: May 9, 2016**

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Authority: Sections 501(d)(5), 509, 516, and 520A of the Public Health Service Act; Consolidated Appropriations Act, 2016, Division H, Title II (Substance Abuse and Mental Health Services Administration, Health Surveillance and Program Support)

## EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA) Bureau of Health Workforce (BHW) is accepting applications for the fiscal year (FY) 2016 Substance Abuse and Mental Health Services Administration (SAMHSA) Behavioral Health Workforce Education and Training (BHWET) for Paraprofessionals and Professionals program. The purpose of this program is to develop and expand the substance abuse and mental health workforce. Following their training, students supported by these funds provide services to children, adolescents, and transitional-age youth at risk for developing or who have a recognized behavioral health disorder.

Special emphasis is on training to meet the needs of children, adolescents, and transitional-age youth (16 to 25 years old) who are at risk for mental illness, substance abuse, and suicide, because they are also among the least likely to seek continuous help. Applicants must emphasize prevention and clinical intervention for those (a) at risk of developing mental and substance use disorders; and (b) the involvement of families in the prevention and treatment of behavioral health conditions.

Funding Opportunity Title:	Behavioral Health Workforce Education and Training (BHWET) for Paraprofessionals and Professionals
Funding Opportunity Number:	HRSA-16-193
Due Date for Applications:	July 1, 2016
Anticipated Total Annual Available Funding:	\$7,100,000
Estimated Number and Type of Award(s):	Approximately 26 grants
Estimated Award Amount:	Up to \$300,000
Cost Sharing/Match Required:	Match is required for only doctoral-level Psychology Internships, where applicable, to cover any student stipend costs beyond \$20,000 per geographic reimbursement requirements set by the Association of Psychology Postdoctoral and Internship Centers (APPIC).
Project Period:	September 30, 2016 through September 29, 2017 (One (1) year)

<p>Eligible Applicants:</p>	<p>Eligible applicants are:</p> <ul style="list-style-type: none"> <li>• behavioral paraprofessional certificate training programs; and peer paraprofessional certificate training programs;</li> <li>• accredited master-level schools and programs of psychology, marriage and family therapy, psychiatric-mental health nurse practitioners, counselors, including licensed professional counselors and school counselors. Programs must require a pre-degree clinical field placement in behavioral health as part of the training and a prerequisite for graduation; and</li> <li>• American Psychological Association (APA) accredited doctoral-level internships in health service psychology.</li> </ul> <p>Current BHWET recipients are not eligible to apply. Given the current number of BHWET-supported Schools and programs of social work and to ensure a fair and equitable distribution of total FY 2016 funds across the behavioral health continuum from paraprofessionals to professionals, Schools and programs of social work are also not eligible to apply.</p> <p>[See <a href="#">Section III-1</a> of this FOA for complete eligibility information.]</p>
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In making final award decisions, HRSA will take into consideration the discipline-specific distribution of applicants, to ensure a fair and equitable distribution of total FY 2016 funds across the behavioral health continuum from paraprofessionals to professionals. HRSA anticipates awarding, through a competitive review, the following discipline categories:

- Approximately six awards to applicants that support doctoral-level Psychology interns in APA-accredited internship programs;
- Approximately four award to master’s level marriage and family counseling programs;
- Approximately nine awards to master’s-level professional counseling, addiction counseling, school counseling, or psychology programs;
- Approximately four awards to master’s level Psychiatric-Mental Health Nurse Practitioner programs; and
- Approximately three awards to Behavioral Health Paraprofessionals, and Peer Paraprofessionals.

### **Application Guide**

All applicants are responsible for reading and complying with the instructions included in HRSA's *SF-424 R&R Application Guide*, available online at <http://www.hrsa.gov/grants/apply/applicationguide/sf424rrguide.pdf>, except where instructed in this funding opportunity announcement to do otherwise. A short video for applicants explaining the new *Application Guides* is available at <http://www.hrsa.gov/grants/apply/applicationguide/>.

### **Technical Assistance**

A technical assistance call is scheduled for applicants:

**Tuesday, May 24 at 3:00 pm (ET)**

Call-in Number: 1-888-220-3085

Participant Code: 5404141

Adobe Connect Link: <https://hrsa.connectsolutions.com/fy16-bhwet-foa/>

For replay information (The recording will be available until 11:59 pm (ET) July 24, 2016): 800-337-6568; Passcode: 9744

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# **I. Program Funding Opportunity Description**

## **1. Purpose**

This announcement solicits applications for the FY 2016 Behavioral Health Workforce Education and Training (BHWET) for Paraprofessionals and Professionals program. In support of the White House's *Now is the Time* initiative, the program aims to expand the mental health and substance abuse (jointly referred to as behavioral health throughout the funding opportunity announcement) workforce serving children, adolescents, and transitional-age youth at risk for developing or who have a recognized behavioral health disorder.

Grant recipients will be expected to expand the behavioral health workforce by supporting education and clinical training for behavioral health-related professionals and paraprofessionals. All internships and field placements need to focus on working with at-risk children, adolescents, and transitional-age youth, and include experiential training.

BHWET grant recipients will help to close the gap in access to behavioral health care services by increasing the numbers of adequately prepared behavioral health providers entering and continuing practice with at-risk children, adolescents, and transitional-age youth. Grant recipient activities will place special emphasis on prevention and clinical intervention and treatment for those at risk of developing mental and substance use disorders, and the involvement of families in the prevention and treatment of behavioral health conditions.

Applicants should be committed to ensuring culturally competent care by increasing diversity in health professions programs and the health workforce. This commitment extends to ensuring that the workforce is reflective of the diversity of the nation, training programs develop the competencies and skills needed for intercultural understanding and expand cultural fluency, and recognizing that bringing people of diverse backgrounds and experiences together facilitates innovative and strategic practices that enhance the health of all people.

### **Program Requirements – for Paraprofessionals**

Paraprofessional grant recipients must use BHWET funds for the following activities:

1. Support students through provision of tuition, fees, and supplies to complete a certificate program in a behavioral health-related paraprofessional field. Students may be new to the field or may be individuals who are already practicing and want additional credentials to advance their employability.
2. Recruit a diverse group of students in terms of race/ethnicity, socio-economic status, and other demographic factors, who are interested in pursuing a behavioral health-related paraprofessional certificate.
3. Create more slots in a paraprofessional certificate program(s) to expand the number of students trained with a focus on behavioral health and working with at-risk children, adolescents, and transitional-age youth.

4. Establish partnerships with a wide range of organizations and community partners to assure recruitment of students from diverse backgrounds, provide opportunities for field placements, career development, and job placement services.
5. Evaluate the program, collect needed program information, and disseminate findings to appropriate audiences.

Allowable allocations and further guidance pertaining to these activities is outlined below.

Student Support (see grant recipient activity #1 above)

If awarded funds as a paraprofessional program, no less than 85 percent of a grant recipient's overall requested budget must be used to support the tuition, fees, and supplies for the enrolled students. Applicants may request a maximum of \$2,000 per student to cover all student support activities (tuition fees and supplies) for the 12-month period.

Administrative and Management Activities (see grant recipient activities #2, 3, 4, and 5 above)

Up to 15 percent of an applicant's overall requested budget may be dedicated to grant recipient activities other than student tuition, fees, and supplies.

All education and training by grant recipients must prepare students for work in non-profit and public health care, social service and/or behavioral health organizations focusing on at-risk children, youth and families. The didactic and experiential training should prepare students to perform a broad range of functions.

**Program Requirements – for Professionals**

Professional grant recipients must use BHWET funds for the following activities:

1. Provide stipend support to graduate-level students for no less than 6 months and no more than 12-months of experiential training (internship or field placement). Eligible students must be in their final field placement prior to graduation and practice.
2. Recruit a diverse group of students in terms of race/ethnicity, socio-economic status, and other demographic factors, who are interested in pursuing behavioral health practice.
3. Develop and implement interprofessional training and integration with primary care.
4. Develop and increase the number of field placements and internships focused on serving at-risk children, adolescents, and transitional-age youth.
5. Evaluate the program, collect needed program information, and disseminate findings to appropriate audiences.

### Stipend Support Activity (grant recipient activity #1 above)

No less than 70 percent of a grant recipient's overall requested budget must be used for stipends to students in field placement or internships, according to the following guidelines:

- \$10,000 per master-level student per year; and
- \$20,000 per doctoral-level psychology internship per year.

Stipends are subsistence allowance for trainees to help defray living expenses during the training experience, and are not provided as a condition of employment, or for tuition, fees, health insurance, or other costs associated with the training program. The stipend must be consistent for all trainees within the institution, and with institutional policy, with regards to payment schedule and procedures.

The amounts that can be charged to HRSA are fixed. Grant recipients may not provide stipends lower than the amounts specified above, however grant recipients may choose to provide higher stipend amounts by including funds from other non-federal sources.

Stipend support is only available for:

- Doctoral-level Psychology interns in APA-accredited internship programs;
- Students in master's-level professional counseling, marriage and family therapy, or psychology programs; and
- Psychiatric-Mental Health Nurse Practitioner programs.

No less than 6 months and no more than one year (12 consecutive months) of full stipend support is allowed per student/intern. In the event that a student terminates early from the program, the stipend must be prorated according to the amount of time spent in training and the grant recipient must contact HRSA to discuss options for the remaining stipend funds.

Doctoral-level psychology internship applicants must submit a proposal that illustrates intent to leverage other resources and related ongoing efforts to align with the Association of Psychology Postdoctoral and Internship Centers' (APPIC) stipend level requirements. The doctoral-level psychology internship students will receive \$20,000 of stipend support for one year from HRSA funds per intern. This is a fixed amount. The APPIC requires APA-accredited internships provide a stipend per intern that is consistent with regional standards, equal among all trainees, and stated clearly in advance (through promotional materials, the APPIC Directory, etc.).<sup>1</sup> The difference between the doctoral-level psychology intern stipend maximum of \$20,000 and any regional standard above the stipend must be covered by the grant recipient using non-federal funding and must include a written statement in the budget narrative justification.

All program applicants must provide a copy of a student commitment letter template, through which students will commit to complete a field placement or internship, and their plan to pursue employment working with children, adolescents, and transitional-age youth at risk for developing or who have a recognized behavioral health disorder. Applicants are to include a copy of the student commitment letter template as **Attachment 9**. Note, grant recipients must inform students of the potential impact of stipend support on the student's financial aid award.

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<sup>1</sup> <http://www.appic.org/About-APPIC/APPIC-Policies/FAQ-Stipend-Req-for-Interns-and-Postdoc-Fellows>



Students receiving support through the BHWET program should be informed in advance of the institution's financial aid policies.

Administrative and Management Activities (see grant recipient activities #2, 3, and 4 above)

Up to 30 percent of funding may be dedicated to grant recipient activities other than stipend support.

All internships and field placements must focus on clinical work with children, adolescents, and transitional-age youth and families, with a particular emphasis on those who are at risk, as well as experiential training. The use of existing evidence-based practices and programs is strongly encouraged.

If an applicant wishes to fund student/intern support costs, beyond the stipend described above, those costs must be included in the 30 percent of funding available for administrative and management of the program. Student/intern supports costs include health insurance, travel and training related expenses, such as attendance at professional conferences.

## **2. Background**

The BHWET grant program is authorized in Sections 501(d)(5), 509, 516, and 520A of the Public Health Service Act; Consolidated Appropriations Act, 2016, Division H, Title II (Substance Abuse and Mental Health Services Administration, Health Surveillance and Program Support). The focus of these authorities is on prevention and treatment of behavioral health with special consideration for integration of these services with primary care. Section 520A (e)(2) focuses on the distribution of evidence-based practices in the provision of children's mental health services to rural and medically underserved areas.

As proposed by the White House in the January 2013 *Now is the Time* initiative, one of the Nation's goals is to improve behavioral health services for at-risk children, adolescents, and transitional-age youth by training more behavioral health professionals to serve these populations.<sup>2</sup> Although three-quarters of mental illnesses appear by the age of 24, less than half of children with diagnosable mental health problems receive treatment.<sup>2</sup> Transitional-age individuals, referring to those persons ages 16 to 25 years old, are at high risk for mental illness, substance abuse, and suicide, but they are among the least likely to seek help. Experts often cite the need for additional behavioral health service providers as one reason it can be challenging for this population to access treatment.<sup>2</sup>

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<sup>2</sup> Now is the Time Initiative: [http://www.whitehouse.gov/sites/default/files/docs/wh\\_now\\_is\\_the\\_time\\_full.pdf](http://www.whitehouse.gov/sites/default/files/docs/wh_now_is_the_time_full.pdf)

## **II. Award Information**

### **1. Type of Application and Award**

Types of applications sought: New

Funding will be provided in the form of a grant.

### **2. Summary of Funding**

This program will provide funding during federal FY 2016. Approximately \$7,100,000 is available to fund approximately 26 awards for a one-year project period. Applicants may apply for a ceiling amount of up to \$300,000 per year. The project period is one (1) year.

In making final award decisions, HRSA will take into consideration the discipline-specific distribution of awards, to ensure a fair and equitable distribution of total Fiscal Year 2016 funds across the behavioral health continuum from paraprofessionals to professionals. HRSA anticipates awarding, through a competitive review, the following discipline categories:

- Approximately six awards to applicants that support doctoral-level Psychology interns in APA-accredited internship programs;
- Approximately four award to master's level marriage and family counseling programs;
- Approximately nine awards to master's-level professional counseling, addiction counseling, school counseling, or psychology programs;
- Approximately four awards to master's level Psychiatric-Mental Health Nurse Practitioner programs; and
- Approximately three awards to Behavioral Health Paraprofessionals, and Peer Paraprofessionals.

Effective December 26, 2014, all administrative and audit requirements and the cost principles that govern federal monies associated with this award are subject to the Uniform Guidance, [2 CFR part 200](#), as codified by HHS at [45 CFR part 75](#), which supersede the previous administrative and audit requirements and cost principles that govern federal monies.

### **Limitations on indirect cost rates**

Indirect costs under training grants to organizations other than State, local or Indian tribal governments will be budgeted and reimbursed at 8% of modified total direct costs rather than on the basis of a negotiated cost agreement, and are not subject to upward or downward adjustment. Direct cost amounts for equipment and capital expenditures, tuition and fees, and subgrants and contracts in excess of \$25,000 are excluded from the direct cost base for purposes of this calculation.

### III. Eligibility Information

#### 1. Eligible Applicants

Eligible applicants are:

- behavioral paraprofessional certificate training programs; and peer paraprofessional certificate training programs;
- accredited master-level schools and programs of psychology, marriage and family therapy, psychiatric-mental health nurse practitioners, counselors, including licensed professional counselors and school counselors. Programs must require a pre-degree clinical field placement in behavioral health as part of the training and a prerequisite for graduation; and
- American Psychological Association (APA) accredited doctoral-level internships in health service psychology.

Current BHWET recipients are not eligible to apply. Given the current number of BHWET-supported Schools and programs of social work and to ensure a fair and equitable distribution of total FY 2016 funds across the behavioral health continuum from paraprofessionals to professionals, Schools and programs of social work are also not eligible to apply.

#### 2. Cost Sharing/Matching

Cost Sharing/Matching is not required by programs eligible for BHWET funds, with the exception of programs applying as doctoral-level Psychology internships.

Cost Sharing/Matching is required for doctoral-level Psychology internship applicants in which the regional standard for stipends exceeds the stipend maximum under this program. Doctoral-level internship applicants must submit a proposal that illustrates intent to leverage other resources and related ongoing efforts to align with the Association of Psychology Postdoctoral and Internship Centers' (APPIC) stipend level requirements. The doctoral-level internship awardees will receive \$20,000 of stipend support per intern for one year from HRSA. This is a fixed amount. The APPIC requires APA-accredited internships provide a stipend per intern that is consistent with regional standards, equal among all trainees, and stated clearly in advance (through promotional materials, the APPIC Directory, etc.). The difference between the doctoral-levels intern stipend maximum amount of \$20,000 and any regional standard above the stipend maximum must be covered by the grant recipient using non-federal funding and must include a written statement in the budget narrative justification.

#### 3. Other

##### Accreditation/Approval Documentation

Entities must be accredited by a nationally recognized accrediting agency, as specified by the U.S. Department of Education. Master level programs, community colleges and technical schools, including tribal colleges and universities, must provide a copy of their accreditation letter as **Attachment 6**. Applicants applying for doctoral-level internships in health service psychology must provide documentation of their institution's APA accreditation letter as **Attachment**

**6**. Applicants must include a copy of their updated accreditation letter with accreditation start and

expiration dates. Applicants for peer paraprofessional certificate programs that are not accredited community or technical colleges must provide documentation of recognition by their state government to provide the peer paraprofessional certificate programs. Applications that fail to include the required accreditation documentation will be considered non-responsive and will not be considered for funding under this announcement.

Eligible applicants for peer paraprofessional certificate programs that are not an accredited community or technical colleges must provide documentation of recognition by their state government to provide the peer paraprofessional certificate program as **Attachment 6**.

Paraprofessional applicants must already offer at least one certificate program in a behavioral health-related paraprofessional field, including, but not limited to: community health worker; outreach worker; social services aide; mental health worker; substance abuse/addictions counselor promotora; youth worker; and peer counselor. The certificate program must provide both didactic and hands-on, experiential training in the form of a field placement in a primary care setting.

Eligible applicant institutions/organizations must be located in the United States, the Commonwealth of Puerto Rico, the District of Columbia, the Northern Mariana Islands, Guam, America Samoa, the U.S. Virgin Islands, the Republic of the Marshall Islands, the Federated States of Micronesia, or the Republic of Palau.

### **Student Eligibility**

Students receiving a stipend or students in paraprofessional programs receiving tuition support in the BHWET Program must be a citizen of the United States, a non-citizen national of the United States, or a foreign national who possesses a visa permitting permanent residence in the United States. Individuals on temporary or student visas are not eligible to participate.

### **Ceiling Amount**

Applications that request amounts that exceed the ceiling amount of \$300,000 will be considered non-responsive and deemed ineligible for review.

### **Deadline**

Any application that fails to satisfy the deadline requirements referenced in Section IV.4 will be considered non-responsive and will not be considered for funding under this announcement.

### **Consortium**

For purposes of this funding opportunity, doctoral-level internship programs may apply as an internship consortium, if APA-accredited as such. Applicants must identify consortium members (see Attachment 8), organizational training structure, and resources in the application. Applicants must submit documentation of accreditation as Attachment 8 in the application. There can be only one applicant organization and one project director, and the project director must be employed by the awarded applicant organization.

### **Multiple Applications**

NOTE: Multiple applications from an organization are allowable, as follows:

Under this FOA, an institution is allowed to submit up to two applications; however, the applications cannot be for the same type of school or program. For example, if an institution submits two applications for its school of nursing program, the last application will be accepted as the valid submission. An institution is allowed, for example, to submit one application for its master's-level marriage and family therapy and one application for its master's-level psychology program.

If for any reason (including submitting to the wrong funding opportunity number or making corrections/updates), an application is submitted more than once prior to the application due date, HRSA will only accept the applicant's *last* validated electronic submission, under the correct funding opportunity number, prior to the [Grants.gov](https://www.grants.gov) application due date as the final and only acceptable application.

### **Maintenance of Effort (MoE)**

The recipient must agree to maintain non-federal funding for award activities at a level which is not less than expenditures for such activities during the fiscal year prior to receiving the award. Complete the Maintenance of Effort document and submit as **Attachment 5**.

## **IV. Application and Submission Information**

### **1. Address to Request Application Package**

HRSA requires applicants for this FOA to apply electronically through [Grants.gov](https://www.grants.gov). Applicants must download the [SF-424 R&R Application Guide](#) associated with this FOA following the directions provided at <http://www.grants.gov/applicants/apply-for-grants.html>.

It is recommended that applicants supply an e-mail address to Grants.gov when downloading a funding opportunity announcement (FOA) or application package. As noted on the Grants.gov APPLICATION PACKAGE download page, as well as in the Grants.gov User Guide, this allows HRSA to e-mail organizations that supply an e-mail address in the event the FOA is changed and/or republished on Grants.gov before its closing date. Responding to an earlier version of a modified announcement may result in a less competitive or ineligible application.

### **2. Content and Form of Application Submission**

Section 4 of HRSA's [SF-424 R&R Application Guide](#) provides instructions for the budget, budget justification, staffing plan and personnel requirements, assurances, certifications, and abstract. You must submit the information outlined in the [SF-424 R&R Application Guide](#) in addition to the program-specific information below. All applicants are responsible for reading and complying with the instructions included in HRSA's [SF-424 R&R Application Guide](#) except where instructed in the FOA to do otherwise.

See Section 8.5 of the Application Guide for the Application Completeness Checklist.

### **Application Page Limit**

The total size of all uploaded files may not exceed the equivalent of **70 pages** when printed by HRSA. The page limit includes the abstract, project and budget narrative, attachments, and letters of commitment and support required in in HRSA's [SF-424 R&R Application Guide](#) and this FOA. Standard OMB-approved forms that are included in the application package are NOT included in the page limit (Exception: Biographical Sketches in Appendix A of the R&R Application Guide **do** count in the page limit). Indirect Cost Rate Agreement and proof of non-profit status (if applicable) will not be counted in the page limit. **We strongly urge applicants to take appropriate measures to ensure the application does not exceed the specified page limit.**

**Applications must be complete, within the specified page limit, and validated by [Grants.gov](#) under the correct funding opportunity number prior to the deadline to be considered under the announcement.**

#### **Debarment, Suspension, Ineligibility, and Voluntary Exclusion Certification**

- 1) The prospective recipient certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
- 2) Where the prospective recipient is unable to attest to any of the statements in this certification, such prospective recipient shall attach an explanation to this proposal.

See Section 4.1 viii of HRSA's [SF-424 R&R Application Guide](#) for additional information on this and other certifications.

#### **Program-Specific Instructions**

In addition to application requirements and instructions in Section 4 of HRSA's [SF-424 R&R Application Guide](#) (including the budget, budget justification, staffing plan and personnel requirements, assurances, certifications, and abstract), include the following:

##### *i. Project Abstract*

Please use FY16 BHWET Competition as the Project Title. See Section 4.1 ix of HRSA's [SF-424 R&R Application Guide](#). In addition to the requirements listed in the [SF-424 R&R Application Guide](#), applicants must include the following information in the abstract:

- Announcement number indicating the BHWET grant program;
- Name of applicant organization;
- A summary of the proposed projects that will expand the number of behavioral health paraprofessionals or professionals working with children, adolescents and transitional-aged youth, to include the number of students to be trained;
- The funding amount requested;
- Name of certificate program(s) or discipline seeking support or training; and
- Goals and specific measurable objectives of the proposed project.

The project abstract must be single-spaced and limited to one page in length.

## *ii. Project Narrative*

This section provides a comprehensive framework and description of all aspects of the proposed project. It should be succinct, self-explanatory, and well organized so that reviewers can understand the proposed project. Use the following section headers for the Narrative:

### *PURPOSE AND NEED -- Corresponds to Section V's Review Criterion #1*

This section must describe the purpose and need for the proposed project. Applicants must:

- Discuss why the applicant's local community and/or organization are in need of these funds, the existing system capacity to meet these needs, and how the proposed project activities will strengthen organizational interventions to improve health outcomes along the behavioral health continuum.
- Describe the unmet need for behavioral health paraprofessionals or professionals in the service area of focus.
- Discuss any relevant barriers in the service area that the application intends to address.
- Describe and document the targeted population(s) and the unmet health needs of those that will benefit from this funding.
- Describe in detail the children, adolescent and transitional-aged youth demographic in your area.
- Cite the pertinent demographic data whenever possible to support the information provided.
- Include the number of students graduating from program over the last five years, the demographics of graduates, and the applicant's job placement in rural and underserved communities for these graduates.

*RESPONSE TO PROGRAM PURPOSE – This section includes 3 subsections: a) Methodology/Approach; b) Workplan; and c) Resolution of Challenges – all of which correspond to Section V's Review Criteria #2 (a), (b), and (c).*

### *(a) METHODOLOGY/APPROACH -- Corresponds to Section V's Review Criteria #2*

In this section, applicants must propose the methods that will be used to address the community and system needs (identified in the Purpose and Need section above) and meet the program requirements (described in the Program Purpose section above).

Specifically, applicants must describe the following:

- Recruitment and support of students/interns dedicated to serving at-risk children, adolescents, and transitional-age youth in a behavioral health-related paraprofessional or professional fields;
- Recruitment of a diverse group of students in terms of race/ethnicity, socio-economic status, and other demographic factors, who are training; interested in pursuing behavioral health practice;
- A plan to develop and/or expand learning experiences focusing on prevention and clinical intervention and treatment with a focus on children, adolescents and transitional-age youth particularly those who are at risk of developing or who have a behavioral health disorder;

- Placement of students into field placements/internships serving children, adolescents and transitional-age youth at risk of developing or who have a behavioral health disorder;
- Placement into career positions in the behavioral health field that increase service capacity for children, adolescents and transitional-age youth, particularly those who are at risk of developing or who have a behavioral health disorder;
- For applicants that are applying for doctoral-level Psychology interns in APA-accredited internship programs, specify the stipend costs per intern. Applicants that exceed the BHWET maximum of \$20,000 stipend per student must describe their leveraged resources plan to cover the additional costs with non-federal funding sources;
- The number of new training slots that will be established to accommodate more students with a focus on the population(s) of interest and to increase the training capacity of the institution;
- A plan for how the school or program will work with the field placement or internship to integrate experiential and didactic training;
- A disbursement plan for the provision of stipend support for professional students/interns for the required field placement/internship. Paraprofessional programs focus on provision of tuition, supplies, and support activities for students;
- A description of how the project and training are connected to the public systems of health and behavioral health care in the communities or areas of the program, including how the grant recipient will collaborate with these public organizations during the project;
- A high quality curriculum that provides an educational experience consistent with the proposed project; and
- A plan to disseminate all products in venues such as conferences, presentations, publications, electronic recordings, web-based publishing, and teleconference. The applicant should plan to report on dissemination activities in the annual progress report.

Applicants must also submit a logic model for designing and managing their project as **Attachment 10**. A logic model is a one-page diagram that presents the conceptual framework for a proposed project and explains the links among program elements. While there are many versions of logic models, for the purposes of this announcement the logic model must contain the aforementioned activities and processes and must summarize the connections between the:

- Goals of the project (e.g., objectives, reasons for proposing the intervention, if applicable);
- Assumptions (e.g., evidence to support how the program will work and it is supporting resources. Assumptions should be based on research, best practices, and experience);
- Inputs (e.g., organizational profile, collaborative partners, key staff, budget, other resources);
- Target population (e.g., the individuals to be served);
- Activities (e.g., approach, listing key intervention, targets, if applicable);
- Outputs (i.e., process outcome such as the direct products or deliverables of program activities); and
- Outcomes (i.e., the results of a program, typically describing systems).



*(b) WORK PLAN -- Corresponds to Section V's Review Criteria #2 (b)*

Applicants must provide a detailed work plan that demonstrates their experience implementing a project of the proposed scope (a sample work plan can be found here: <http://bhw.hrsa.gov/grants/technicalassistance/workplantemplate.docx>.)

The work plan must include:

- Goals of the project (including objectives and sub-objectives);
- Responsible entity/entities (e.g., key staff and partners);
- Activities;
- Timeline;
- Deliverables and/or products; and
- Proposed Outcomes.

The applicant must clearly explain how the proposed objectives and sub-objectives will be implemented. Applicants must state objectives and sub-objectives that are specific, measurable, achievable, realistic, and time-framed.

The applicant must:

- Provide a detailed description of how the proposed work will be accomplished. The work plan must account for all functions or activities identified in the application;
- Describe the activities, timeframes, deliverables, and key partners required during the grant period of performance to address the needs described in the Purpose and Need section;
- Explain how the work plan is appropriate for the program design and how the targets fit into the overall timeline of grant implementation;
- Present a project timeline that includes each activity and identifies responsible staff; and
- Identify meaningful support and collaboration with key stakeholders (as applicable) in planning, designing, and implementing all activities, including development of the application and the extent to which these contributors reflect the cultural, racial, gender, sexual preference, linguistic and geographic diversity of the populations and communities served.

*(c) RESOLUTION OF CHALLENGES -- Corresponds to Section V's Review Criteria #2 (c)*

Discuss challenges that are likely to be encountered designing and implementing the activities described in the Work Plan, and approaches that will be used to resolve such challenges. Describe how the organization monitors progress towards program objectives and plans strategies to address challenges or obstacles.

Challenges discussed should be specific to the proposed project and relate to either the overall goal(s) or objective(s) proposed within the Work Plan.

*IMPACT – This section includes 2 sub-sections – (a) Evaluation and Technical Support Capacity; and (b) Project Sustainability – both of which correspond to Section V’s Review Criteria #3.*

*(a) EVALUATION AND TECHNICAL SUPPORT CAPACITY -- Corresponds to Section V’s Review Criteria #3(a) Evaluation and Technical Support Capacity*

Applicants must describe their evaluation plan for program performance. This plan must monitor ongoing processes and progress toward meeting grant goals and objectives. The evaluation plan must, at a minimum, assess the success of the grant-funded efforts and include a continuous quality improvement component for the grant activities. The evaluation plan must include descriptions of the inputs (e.g., key evaluation staff and organizational support, collaborative partners, budget, and other resources); key processes; variables to be measured; expected outcomes of the funded activities; and a description of how all key evaluative measures will be reported. The application must demonstrate evidence that the evaluative measures selected will be able to assess: 1) the extent to which the program objectives have been met, and 2) the extent to which these can be attributed to the project.

Applicants also must describe the systems and processes that will support the organization's collection of HRSA’s performance measurement requirements for this program. The following link includes examples of program performance measures: <http://bh.w.hrsa.gov/grants/reporting/index.html>. Include a description of how the organization will effectively track performance outcomes, including how the organization will collect and manage data (e.g., assigned skilled staff, data management software) in a way that allows for accurate and timely reporting of performance outcomes to HRSA. Applicants must describe any potential obstacles for implementing the program performance evaluation and meeting HRSA’s performance measurement requirements, as well as how those obstacles will be addressed.

Applicants must include a plan for [Rapid Cycle Quality Improvement](#) (RCQI) for the continuous monitoring of ongoing project processes, outcomes of implemented activities, and progress toward meeting grant goals and objectives and the implementation of necessary adjustment to planned activities to effect course corrections. Additional information on RCQI is available at the following website: <http://www.healthworkforceta.org/resources/rapid-cycle-quality-improvement-resource-guide/>

Applicants must describe the data collection system and the method(s) used to collect and monitor the outcomes of the proposed project in the Work Plan. Discuss the mechanisms to be used for tracking and monitoring the number of behavioral health paraprofessionals or professionals working with children, adolescents and transitional-age youth.

Applicants must describe their capacity to collect, validate, and report required data measures such as, but not limited to:

- Number and types of field placements, internships, or certificate programs offered in a behavioral health field serving children, adolescents, and transitional-age youth;
- Number and demographics of new students trained and the number who graduate during the implementation period of the project;

- Number of graduates who pursue behavioral health careers serving at risk children, adolescents, transitional-age youth and their families;
- Employment settings of graduates; and
- Number and types of organizations partnered with for field placements and job placements.

*(b) PROJECT SUSTAINABILITY – Corresponds to Section V’s Review Criterion #3(b)*

All applicants must include a plan for project sustainability after the period of federal funding ends. Recipients are expected to sustain key elements of their grant projects, e.g., training methods or strategies, which have been effective in improving practices. Applicants must, at a minimum:

- Identify other resources or future funding initiatives, and describe how the program will become self-sufficient within the one year grant period, including evaluation of the program, collection of needed program information, and disseminate findings to appropriate audiences; and
- Forecast challenges that are likely to be encountered in sustaining the program and outline approaches that will be used to resolve such challenges.

*ORGANIZATIONAL INFORMATION, RESOURCES AND CAPABILITIES – Corresponds to Section V’s Review Criterion #4*

Provide information on the applicant organization’s current mission and structure, scope of current activities, leadership and personnel, quality and availability of facilities, and an organizational chart. Describe how these all contribute to the ability of the organization to conduct the program requirements and meet program expectations. Provide information on the organizational resources and capabilities to address the identified need and support proposed projects.

The applicant must also provide the following information:

- Capacity to provide training and supervision in working with children, adolescents and transitional-age youth.
- Evidence of adequate staffing plan for proposed project including the project organizational chart (**Attachments 1 and 3**).
- A description of support and commitment by field placement and internship organizations that serve at risk children, adolescents, and transitional-age youth such as resources and letters of support (commitment to provide financial or in-kind resources, create new or additional slots for students).
- Innovative strategies to address family involvement, consortium partnership (if applicable) and resources, the prevention and clinical intervention and treatment for those at risk of developing mental and substance use disorders.

<b>NARRATIVE GUIDANCE</b>	
In order to ensure that the Review Criteria are fully addressed, this table provides a crosswalk between the narrative language and where each section falls within the review criteria.	
<b><u>Narrative Section</u></b>	<b><u>Review Criteria</u></b>
Purpose and Need	(1) Purpose and Need
Response to Program Purpose: (a) Methodology/Approach (b) Work Plan (c) Resolution of Challenges	(2) Response to Program Purpose (a) Methodology/Approach (b) Work Plan (c) Resolution of Challenges
Impact: (a) Evaluation and Technical Support Capacity (b) Project Sustainability	(3) Impact: (a) Evaluation and Technical Support Capacity (b) Project Sustainability
Organizational Information, Resources and Capabilities	(4) Organizational Information, Resources and Capabilities
Budget and Budget Narrative	(5) Support Requested – the budget section must include sufficient justification to allow reviewers to determine the rationale for the support requested.

### ***iii. Budget***

See Section 4.1.iv of HRSA’s [SF-424 R&R Application Guide](#). Please note: the directions offered in the [SF-424 R&R Application Guide](#) differ from those offered by [Grants.gov](#). Follow the instructions included in the [SF-424 R&R Application Guide](#) and, *if applicable*, the additional budget instructions provided below.

Professional applicants are required to provide a budget with no less than seventy (70) percent of a recipient’s overall requested budget dedicated and distributed as stipends to trainees in internships/field placements.

Paraprofessional applicants are required to provide a budget with no less than eighty-five (85) percent of a recipient’s overall requested budget dedicated and distributed as tuition, fees and supplies to students in certificate and/or peer Paraprofessional programs.

**Reminder:** The Total Project or Program Costs are the total allowable costs (inclusive of direct **and** indirect costs) incurred by the recipient to carry out a HRSA-supported project or activity. Total project or program costs include costs charged to the award **and costs borne by the recipient to satisfy a matching or cost-sharing requirement, as applicable**.

Indirect costs under training grants to organizations other than State, local or Indian tribal governments will be budgeted and reimbursed at 8% of modified total direct costs rather than on the basis of a negotiated cost agreement, and are not subject to upward or downward adjustment. Direct cost amounts for equipment and capital expenditures, tuition and fees, and subgrants and contracts in excess of \$25,000 are excluded from the direct cost base for purposes of this calculation.

The Consolidated Appropriations Act, 2016, Division H, § 202, (P.L. 114-113) states, “None of the funds appropriated in this title shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level II.” See Section. Salary Limitation of HRSA’s [SF-424 R&R Application Guide](#) for additional information. Note that these or other salary limitations may apply in FY 2016, as required by law.

**iv. Budget Justification Narrative**

See Section 4.1.v. of HRSA’s [SF-424 R&R Application Guide](#). In addition, the program requires the following:

*Participant/Trainee Support Costs:* For applicants with participant/trainee support costs, list tuition/fees/health insurance, stipends, travel, subsistence, other, and the number of participants/trainees. Ensure that your budget breakdown separates these trainee costs, and includes a separate sub-total entitled “total Participant/Trainee Support Costs” which includes the summation of all trainee costs.

*Consultant Services:* for applicants that are using consultant services, list the total costs for all consultant services. In the budget justification, identify each consultant, the services he/she will perform the total number of days, travel costs, and the total estimated costs.

**v. Attachments**

Please provide the following items in the order specified below to complete the content of the application. **Unless otherwise noted, attachments count toward the application page limit.** Indirect cost rate agreements and proof of non-profit status (if applicable) will not count toward the page limit. **Each attachment must be clearly labeled.**

*Attachment 1: Staffing Plan, Job Descriptions for Key Personnel, and Biographical Sketches. (See Section 4.1.vi. of HRSA’s [SF-424 R&R Application Guide](#) for required information) (counted in page limit)*

Keep each job description to one page in length as much as is possible. Include the role, responsibilities, and qualifications of proposed project staff.

Include biographical sketches for persons occupying the key positions, not to exceed **two** pages in length each. Note this differs from the Form, which states “DO NOT EXCEED FIVE PAGES.” In the event that a biographical sketch is included for an identified individual who is not yet hired, include a letter of commitment from that person with the biographical sketch. Biographical sketches should be uploaded in the [SF-424 R&R Application Guide](#) Senior/Key Person Profile form.

*Attachment 2: Letters of Agreement and/or Description(s) of Proposed/Existing Contracts (project specific) (counted in page limit)*

Provide any documents that describe working relationships between the applicant organization and other entities and programs cited in the proposal. Documents that confirm actual or pending contractual agreements should clearly describe the roles of the contractors and any deliverable. Letters of agreement must be signed and dated.

*Attachment 3: Project Organizational Chart (counted in page limit)*

Provide a one-page figure that depicts the organizational structure of *the project (not the applicant organization)*.

*Attachment 4: Tables, Charts, etc. (counted in page limit)*

To give further details about the proposal (e.g., Gantt or PERT charts, flow charts, etc.).

*Attachment 5: Maintenance of Effort Documentation (counted in page limit)*

Applicants must provide a baseline aggregate expenditure for the prior fiscal year (unless otherwise noted in statute) and an estimate for the next fiscal year using a chart similar to the one below (text may vary based on statute). HRSA will enforce statutory MOE requirements through all available mechanisms.

NON-FEDERAL EXPENDITURES	
FY 2015 (Actual) Actual FY 2015 non-federal funds, including in-kind, expended for activities proposed in this application.  Amount: \$ _____	FY 2016 (Estimated) Estimated FY 2016 non-federal funds, including in-kind, designated for activities proposed in this application.  Amount: \$ _____

*Attachment 6: Documentation of Accreditation (counted in page limit)*

Entities must be accredited by a nationally recognized accrediting agency, as specified by the U.S. Department of Education. Master level programs, community colleges and technical schools, including tribal colleges and universities, must provide a copy of their accreditation letter as **Attachment 6**. Applicants applying for doctoral-level internships in health service psychology must provide documentation of their institution's APA accreditation letter as **Attachment 6**. Applicants must include a copy of their updated accreditation letter with accreditation start and expiration dates. Applicants for peer paraprofessional certificate programs that are not accredited community or technical colleges must provide documentation

of recognition by their state government to provide the peer paraprofessional certificate programs.

*Attachment 7: (Professional Applicants Only): Documentation of Field Placement/Internship is a training curriculum pre-requisite for graduation from school or program. (counted in page limit)*

Eligible schools and programs of psychology, marriage and family therapy, psychiatric mental health nurse practitioner, and professional counseling must require a pre-degree clinical field placement or internship as part of the training and as a requirement for graduation. Applicants must provide documentation of the pre-degree clinical field placement or internship requirement.

*Attachment 8: (Professional Applicants Only): Consortium Documentation (counted in page limit)*

Consortia must indicate that their project competencies are within the scope of their accreditation.

*Attachment 9: Template for Student Commitment Letter (counted in page limit)*

Applicants must provide a copy of a student commitment letter template, through which students will commit to complete a field placement or internship working with children, adolescents, and transitional-age youth at risk for developing or who have a recognized behavioral health disorder. Note, grant recipients must inform students of the impact of stipend support on the student's financial aid award. Students receiving support through the BHWET program should be informed in advance of the institution's financial aid policies.

*Attachment 10: Logic Model (counted in page limit)*

Attach the Logic Model diagram that presents the conceptual framework for the project as Attachment 10.

*Attachment 11: Other Relevant Documents (counted in page limit)*

Include here any other document that is relevant to the application.

### **3. Dun and Bradstreet Data Universal Numbering System (DUNS) Number and System for Award Management**

Applicant organizations must obtain a valid DUNS number and provide that number in their application. Each applicant must also register with the System for Award Management (SAM) and continue to maintain active SAM registration with current information at all times during which it has an active federal award or an application or plan under consideration by an agency (unless the applicant is an individual or federal agency that is exempted from those requirements under 2 CFR 25.110(b) or (c), or has an exception approved by the agency under 2 CFR 25.110(d)).

HRSA may not make an award to an applicant until the applicant has complied with all applicable DUNS and SAM requirements and, if an applicant has not fully complied with the requirements by the time HRSA is ready to make an award, HRSA may determine that the applicant is not qualified to receive an award and use that determination as the basis for making an award to another applicant.

If an applicant/recipient organization has already completed [Grants.gov](http://www.grants.gov) registration for HRSA or another federal agency, confirm that the registration is still active and that the Authorized Organization Representative (AOR) has been approved.

The [Grants.gov](http://www.grants.gov) registration process requires information in three separate systems:

- Dun and Bradstreet (<http://fedgov.dnb.com/webform/pages/CCRSearch.jsp>)
- System for Award Management (SAM) (<https://www.sam.gov>)
- Grants.gov (<http://www.grants.gov/>)

For further details, see Section 3.1 of HRSA's [SF-424 R&R Application Guide](#).

**Applicants that fail to allow ample time to complete registration with SAM or [Grants.gov](http://www.grants.gov) will not be eligible for a deadline extension or waiver of the electronic submission requirement.**

#### **4. Submission Dates and Times**

##### **Application Due Date**

The due date for applications under this FOA is *July 1, 2016 at 11:59 P.M. Eastern Time*.

See Section 8.2.5 – Summary of emails from [Grants.gov](http://www.grants.gov) of HRSA's [SF-424 R&R Application Guide](#) for additional information.

#### **5. Intergovernmental Review**

BHWET is a program subject to the provisions of Executive Order 12372, as implemented by 45 CFR 100. See Executive Order 12372 in the [HHS Grants Policy Statement](#). See Section 4.1 ii of HRSA's [SF-424 R&R Application Guide](#) for additional information.

#### **6. Funding Restrictions**

Applicants responding to this announcement may request funding for a project period of one year at no more than \$300,000 per year, in total costs (direct and indirect).

Funds under this announcement may not be used for purposes specified in HRSA's [SF-424 R&R Application Guide](#). In addition, grant funds may not be used for construction.

Professional applicants are required to provide a budget, with narrative, that includes no less than seventy (70) percent of a recipient's overall requested budget dedicated for stipends to students



in field placement or internships. Up to thirty (30) percent of funding may be dedicated to grantee activities other than stipend support.

Paraprofessional applicants are required to provide a budget, with narrative, that includes no less than eighty-five (85) percent of a recipient's overall requested budget dedicated to tuition, fees and supplies to students in certificate and/or peer Paraprofessional programs. Applicants may request a maximum of \$2,000 per student to cover all student support activities (tuition, fees and supplies) for the 12-month period. Up to 15 percent of an applicant's overall requested budget may be dedicated to grantee activities other than student tuition, fees, and supplies.

Indirect costs under training grants to organizations other than State, local or Indian tribal governments will be budgeted and reimbursed at 8% of modified total direct costs rather than on the basis of a negotiated cost agreement, and are not subject to upward or downward adjustment. Direct cost amounts for equipment and capital expenditures, tuition and fees, and subgrants and contracts in excess of \$25,000 are excluded from the direct cost base for purposes of this calculation.

The General Provisions in Division H of the Consolidated Appropriations Act, 2016 (P.L. 114-113) apply to this program. See Section 4.1 of HRSA's [SF-424 R&R Application Guide](#) for additional information. Note that these or other restrictions will apply in FY 2016, as required by law.

All program income generated as a result of awarded funds must be used for approved project-related activities.

## **V. Application Review Information**

### **1. Review Criteria**

Procedures for assessing the technical merit of applications have been instituted to provide for an objective review of applications and to assist the applicant in understanding the standards against which each application will be judged. Critical indicators have been developed for each review criterion to assist the applicant in presenting pertinent information related to that criterion and to provide the reviewer with a standard for evaluation. Review criteria are outlined below with specific detail and scoring points.

These criteria are the basis upon which the reviewers will evaluate the application. The entire proposal will be considered during objective review.

Review Criteria are used to review and rank applications. The BHWET program has 5 review criteria.

*Criterion 1: PURPOSE AND NEED (10 points) – Corresponds to Section IV's Purpose and Need*

Reviewers will consider whether the applicant has presented a clear purpose and evidence of a compelling need for behavioral health services within their service area specific to children,

adolescents, and transitional-age youth. Reviewers will consider the extent to which the applicant demonstrates:

- Global understanding of the behavioral health needs and risk factors for children, adolescents, and transitional-age youth;
- Significant incidence and prevalence of behavioral health conditions within a clearly defined target population;
- Measurable gaps in the delivery of behavioral health services for the defined population and specific to the purview of the professional or paraprofessional discipline described in the proposal;
- Health status indicators related to the behavioral health problems of at-risk children, adolescents and transitional-age youth, and their families; and
- A high number of students graduating from the program over the last five years; whether the demographics of these students reflect the community in which they will be placed; and the success of the applicant placing graduates into rural and underserved areas. A high number of students graduating from the program over the last five years.

*Criterion 2: RESPONSE TO PROGRAM PURPOSE (45 points) – Corresponds to Section IV’s Response to Program Purpose Sub-section (a) Methodology/Approach, Sub-section (b) Work Plan (c) Resolution of Challenges*

*(a) METHODOLOGY/APPROACH (20 points)*

Reviewers will consider the extent to which the applicant demonstrates:

- Clear strategy – including demonstrated past success (as applicable) – to recruit program participants who are committed to serving the behavioral health needs of at-risk children, adolescents, and transitional-age youth and their families;
- Feasible approach to increase the number and enhance the quality of experiential training opportunities with the target population for program participants;
- Expanded/enhanced clinical training will measurably impact the number of students trained with a focus on behavioral health and at-risk children and youth;
- Ability to administer the program and provide meaningful financial support to students including:
  - Stipends for master and doctoral-level students in professional programs; or
  - Tuition, fees, and supplies for participants in paraprofessional programs;
- Strong, pre-existing relationships with external partners, such as non-profit and public organizations focused on health care, social services, and behavioral health needs of these at-risk populations, and how these organizations will host student field placements and assist with career placements for graduates of the program;
- Meaningful partnerships with organizations/institutions in the community that will result in support and leveraged resources to recruit and train students;
- For paraprofessional applicants:
  - Direct connection between the degree or certificate offered and the support needed within the population served, including future career ladder opportunities

- stemming from the proposed program (i.e., how the certificate can lead to an associate's or bachelor's degree);
- Successful, evidence-based strategies to provide career development and job placements services to assist students in obtaining employment following the certificate program including specific development activities designed to help participants gain employability skills and work experience and assist participants in finding employment; and
- Recruitment strategies that will increase the diversity within the behavioral health professions to improve health equity in the communities.

*(b) WORKPLAN (15 points)*

Reviewers will consider the extent to which the applicant:

- Outlines a clear, comprehensive and specific set of activities, timeframes, deliverables and key partners to ensure successful implementation of the project;
- Describes the activities, timeframes, deliverables, and key partners required during the grant period of performance to address the needs described in the Purpose and Need section;
- Explains how the work plan is appropriate for the program design and how the targets fit into the overall timeline of grant implementation; and
- Identifies meaningful support and collaboration with key stakeholders in planning, designing and implementing all activities, including development of the application and, further, the extent to which these contributors reflect the cultural, racial, linguistic and geographic diversity of the populations and communities served.

*(c) RESOLUTION OF CHALLENGES (10 points)*

Reviewers will consider the quality of and extent to which the applicant:

- Describes the full breadth of potential obstacles and challenges likely to be encountered during the design and implementation of the activities described in the Work Plan; and
- Outlines a reasonable and actionable plan and evidence-based approaches to address the challenges identified above.

Reviewers will also consider whether the applicant has a process in place to ensure early problem identification and a strong method to ensure quick and effective resolutions.

*Criterion 3: IMPACT (25 points) –This section includes 2 sub-sections – (a) Evaluation and Technical Support Capacity; and (b) Project Sustainability – both of which correspond to Section IV*

*(a) EVALUATION AND TECHNICAL SUPPORT CAPACITY (15 points)*

The extent to which the applicant is able to effectively report on the measurable outcomes being requested. This includes both their internal program performance evaluation plan and HRSA's required performance measures, as outlined in the corresponding Project Narrative Section IV's Impact Sub-section (a).

Specific criteria include:

- The overall quality of the evaluation plan;
- Demonstrated expertise, experience, and the technical capacity are able to incorporate data collected into program operations to ensure continuous quality improvement. The extent to which the evaluation plan includes necessary components (descriptions of the inputs, key processes, variables to be measured, expected outcomes of the funded activities, and how key measures will be reported), as well as a description of how the organization will collect data in such a way that allows for accurate and timely reporting and program and need/gap to be filled;
- The quality of the methods and proposed approach for using results and of performance outcomes to inform program development and service delivery; and
- The strength of the applicant's plan to utilize both quantitative and qualitative data to inform Rapid Cycle Quality Improvement (RCQI) efforts to periodically review program progress and make small adjustments in order to optimize program output.

*(b) PROJECT SUSTAINABILITY (10 points)*

The extent to which the applicant describes a reasonable and feasible plan for project sustainability after the period of federal funding ends. The extent to which the applicant clearly articulates likely challenges to be encountered in sustaining the program, and describes logical approaches to resolving such challenges.

*Criterion 4: ORGANIZATIONAL INFORMATION, RESOURCES AND CAPABILITIES – Corresponds to Section IV's (10 points)*

The extent to which project personnel are qualified by training and/or experience to implement and carry out the project. Reviewers will consider both the project narrative, as well as the Attachments, in evaluating:

- Evidence of adequate staffing plan for proposed project including the project organizational chart;
- The percentage of time, including in-kind, dedicated to the project by the Project Director;
- The activities, timeline, and responsible staff to achieve each of the objectives proposed during the project period;
- For paraprofessional programs only, evidence of successful track record of recruiting diverse students into the certificate program(s) and in helping to place the graduates into careers;
- Meaningful support and collaboration with key stakeholders in planning, designing, and implementing all activities; and
- Evidence of support and commitment by nonprofit and public organizations serving at risk children, adolescents, and transitional-age youth to provide field placements and job placement for these students. This may be demonstrated by resources and/or letters of agreement (i.e. commitment to provide financial or in-kind resources).

*Criterion 5: SUPPORT REQUESTED (10 points) – Corresponds to Section IV’s Budget Justification Narrative*

The reasonableness of the proposed budget for the project period, in relation to the objectives, the complexity of the research activities, and the anticipated results.

- The extent to which costs, as outlined in the budget and required resources sections, are reasonable given the scope of work;
- The extent to which key personnel have adequate time devoted to the project to achieve project objectives;
- The extent to which trainee stipends, fellowships, or traineeships are reasonable and supportive of the project objectives;
- The extent to which doctoral-level psychology internships leverage other resources to align with the Association of Psychology Postdoctoral and Internship Centers’ (APPIC) stipend level requirements; and
- The extent to which the proposal follows the budget guidelines specified in the FOA and the SF-424 R&R Application Guide.

## **2. Review and Selection Process**

Please see section 5.3 of the HRSA’s [SF-424 R&R Application Guide](#).

HRSA will use other factors other than merit criteria in selecting applications for federal award. For this program, HRSA will use the special considerations specified below.

### **Funding Special Considerations**

In making final award decisions, HRSA will take into consideration the discipline-specific distribution of awards, to ensure a fair and equitable distribution of total Fiscal Year 2016 funds across the behavioral health continuum from paraprofessionals to professionals. HRSA anticipates awarding, through a competitive review, the following discipline categories:

- Approximately six awards to applicants that support doctoral-level Psychology interns in APA-accredited internship programs;
- Approximately four award to master’s level marriage and family counseling programs;
- Approximately nine awards to master’s-level professional counseling, addiction counseling, school counseling, or psychology programs;
- Approximately four awards to master’s level Psychiatric-Mental Health Nurse Practitioner programs; and
- Approximately three awards to Behavioral Health Paraprofessionals, and Peer Paraprofessionals.

## **3. Assessment of Risk**

The Health Resources and Services Administration may elect not to fund applicants with management or financial instability that directly relates to the organization’s ability to implement statutory, regulatory or other requirements ([45 CFR § 75.205](#)).

Effective January 1, 2016, HRSA is required to review and consider any information about the applicant that is in the [Federal Awardee Performance and Integrity Information System \(FAPIIS\)](#). An applicant may review and comment on any information about itself that a federal awarding agency previously entered. HRSA will consider any comments by the applicant, in addition to other information in [FAPIIS](#) in making a judgment about the applicant's integrity, business ethics, and record of performance under federal awards when completing the review of risk posed by applicants as described in 45 CFR [§ 200.205 Federal Awarding Agency Review of Risk Posed by Applicants](#).

A determination that an applicant is not qualified will be reported by HRSA to FAPIIS ([45 CFR § 75.212](#)).

The decision not to make an award or to make an award at a particular funding level, is discretionary and is not subject to appeal to any HHS Operating Division or HHS official or board.

#### **4. Anticipated Announcement and Award Dates**

It is anticipated that awards will be announced prior to the start date of September 30, 2016.

## **VI. Administration Information**

### **1. Award Notices**

The Notice of Award will be sent prior to the start date of September 30, 2016. See Section 5.4 of HRSA's [SF-424 R&R Application Guide](#) for additional information.

### **2. Administrative and National Policy Requirements**

See Section 2 of HRSA's [SF-424 R&R Application Guide](#).

### **3. Reporting**

The successful applicant under this FOA must comply with Section 6 of HRSA's [SF-424 R&R Application Guide](#) and the following reporting and review activities:

#### **1) Performance Reports.**

The recipient must submit a Performance Report to HRSA via the Electronic Handbooks (EHBs) on an annual basis. All BHW recipients are required to collect and report performance data so that HRSA can meet its obligations under the Government Performance and Results Modernization Act of 2010 (GPRA). The required performance measures for this program are outlined in the Project Narrative Section IV's Impact Sub-section (a). Further information will be provided in the NoA. Annual performance reports (APR) cover activities between July 1 and June 30. APRs must be submitted by July 31 of the same year. Final performance reports

(FPR) cover all remaining partial year activity between June 30 and the project period end date. FPRs are due within 90 days after the project period ends.

2) **Final Report.** A final report is due within 90 days after the project period ends. The Final Report must be submitted online by recipients in the Electronic Handbook system at <https://grants.hrsa.gov/webexternal/home.asp>.

The Final Report is designed to provide BHW with information required to close out a grant after completion of project activities. Every recipient is required to submit a final report at the end of their project. The Final Report includes the following sections:

- Project Objectives and Accomplishments - Description of major accomplishments on project objectives.
- Project Barriers and Resolutions - Description of barriers/problems that impeded project's ability to implement the approved plan.
- Summary Information:
  - Project overview.
  - Project impact.
  - Prospects for continuing the project and/or replicating this project elsewhere.
  - Publications produced through this grant activity.
  - Changes to the objectives from the initially approved grant.

Further information will be provided in the NoA.

3) **Federal Financial Report.** A Federal Financial Report (SF-425 is required according to the schedule in the [SF-424 R&R Application Guide](#). The report is an accounting of expenditures under the project that year. Financial reports must be submitted electronically through the EHB system. More specific information will be included in the NoA.

4) **Attribution.** HRSA requires recipients to use the following acknowledgement and disclaimer on all products produced by HRSA grant funds:

*“This project is/was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number and title for grant amount (specify grant number, title, total award amount and percentage financed with nongovernmental sources). This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.”*

Recipients are required to use this language when issuing statements, press releases, requests for proposals, bid solicitations, and other HRSA supported publications and forums describing projects or programs funded in whole or in part with HRSA funding, including websites. Examples of HRSA-supported publications include, but are not limited to, manuals, toolkits, resource guides, case studies and issues briefs.

5) **Integrity and Performance Reporting.** The Notice of Award will contain a provision for integrity and performance reporting in [FAPIIS](#), as required in 45 CFR 75 Appendix XII.

## VII. Agency Contacts

Applicants may obtain additional information regarding business, administrative, or fiscal issues related to this FOA by contacting:

Nandini Assar, Ph.D.  
Grants Management Specialist  
HRSA Division of Grants Management Operations, OFAM  
5600 Fishers Lane, 10NWH04  
Rockville, MD 20857  
Telephone: (301) 443-4920  
Email: [nassar@hrsa.gov](mailto:nassar@hrsa.gov)

Additional information related to the overall program issues and/or technical assistance regarding this funding announcement may be obtained by contacting:

Gloria Ortiz, MS  
Project Officer, Behavioral and Public Health Branch  
Division of Nursing and Public Health  
5600 Fishers Lane, Suite 11N104D  
Rockville, MD 20857  
Telephone: (301) 443-1915  
Fax: (301) 443-0791  
E-mail: [gortiz@hrsa.gov](mailto:gortiz@hrsa.gov)

Applicants may need assistance when working online to submit their application forms electronically. Applicants should always obtain a case number when calling for support. For assistance with submitting the application in [Grants.gov](http://Grants.gov), contact [Grants.gov](http://Grants.gov) 24 hours a day, 7 days a week, excluding federal holidays at:

[Grants.gov](http://Grants.gov) Contact Center  
Telephone: 1-800-518-4726 (International Callers, dial 606-545-5035)  
Email: [support@grants.gov](mailto:support@grants.gov)  
Self-Service Knowledge Base: <https://grants-portal.psc.gov/Welcome.aspx?pt=Grants>

Successful applicants/recipients may need assistance when working online to submit information and reports electronically through HRSA's Electronic Handbooks (EHBs). For assistance with submitting information in HRSA's EHBs, contact the HRSA Contact Center, Monday-Friday, 8:00 a.m. to 8:00 p.m. ET:

HRSA Contact Center  
Telephone: (877) 464-4772  
TTY: (877) 897-9910  
Web: <http://www.hrsa.gov/about/contact/ehbhelp.aspx>



## VIII. Other Information

### Logic Models

Additional information on developing logic models can be found at the following website: [http://www.cdc.gov/nccdphp/dnpao/hwi/programdesign/logic\\_model.htm](http://www.cdc.gov/nccdphp/dnpao/hwi/programdesign/logic_model.htm).

Although there are similarities, a logic model is not a work plan. A work plan is an “action” guide with a timeline used during program implementation; the work plan provides the “how to” steps. A logic model is a visual diagram that demonstrates an overview of the relationships between the 1) resources and inputs, 2) implementation strategies and activities, and 3) desired outputs and outcomes in a project. Information on how to distinguish between a logic model and work plan can be found at the following website: <http://www.cdc.gov/healthyouth/evaluation/pdf/brief5.pdf>.

### Technical Assistance:

A technical assistance call is scheduled for applicants:

**Tuesday, May 24 at 3:00 pm (ET)**

Call-in Number: 1-888-220-3085

Participant Code: 5404141

Adobe Connect Link: <https://hrsa.connectsolutions.com/fy16-bhwet-foa/>

For replay information (The recording will be available until 11:59 pm (ET) July 24, 2016): 800-337-6568; Passcode: 9744

### Program Definitions

The following definitions apply to the BHWET Program for FY 2016:

At-risk children, adolescents, and transitional-age youth refer to those individuals who have a higher risk of developing mental health or substance use problems than others due to a complex interaction of biological, behavioral, and environmental factors.

Behavioral health refers to both mental health and substance abuse and may be used interchangeably with “mental and substance use disorders.”

Experiential training refers to clinical practice based experiences. For doctoral psychology internships, experiential training refers to an accredited 12-month supervised experience in health care settings (source: APA). For master’s-level marriage and family therapy, psychiatric mental health nurse practitioner, psychology, and professional counseling, experiential training refers to 6 to 12-month supervised experience in health care settings.

Health Service Psychology includes clinical psychology, counseling, and school psychology, or a combination thereof (Source: APA).

Professional counseling includes accredited master’s-level programs in counseling or a related clinical behavioral health field that includes a supervised clinical experience and leads to (state) licensure for independent practice.

## **IX. Tips for Writing a Strong Application**

See Section 4.7 of HRSA's [\*SF-424 R&R Application Guide\*](#).

Frequently Asked Questions (FAQs) can be found on the program website, and are often updated during the application process.

In addition, BHW has developed a number of recorded webcasts with information that may assist applicants in preparing a competitive application. These webcasts can be accessed at: <http://bhw.hrsa.gov/grants/technicalassistance/index.html>