



Southeast (HHS Region 4)

PTTC

Prevention Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

How to Write Successful Grants in Prevention

Session 2: Writing a Winning Proposal Narrative

June 3, 2024

Presented by

Drew Reynolds, PhD, MSW, MEd





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Disclaimer

- This training is 100% supported SAMHSA of the U.S. Department of Health and Human Services (HHS).
- The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by SAMHSA/HHS, or the U.S. Government.

The use of affirming language inspires hope.

LANGUAGE MATTERS.

Words have power.

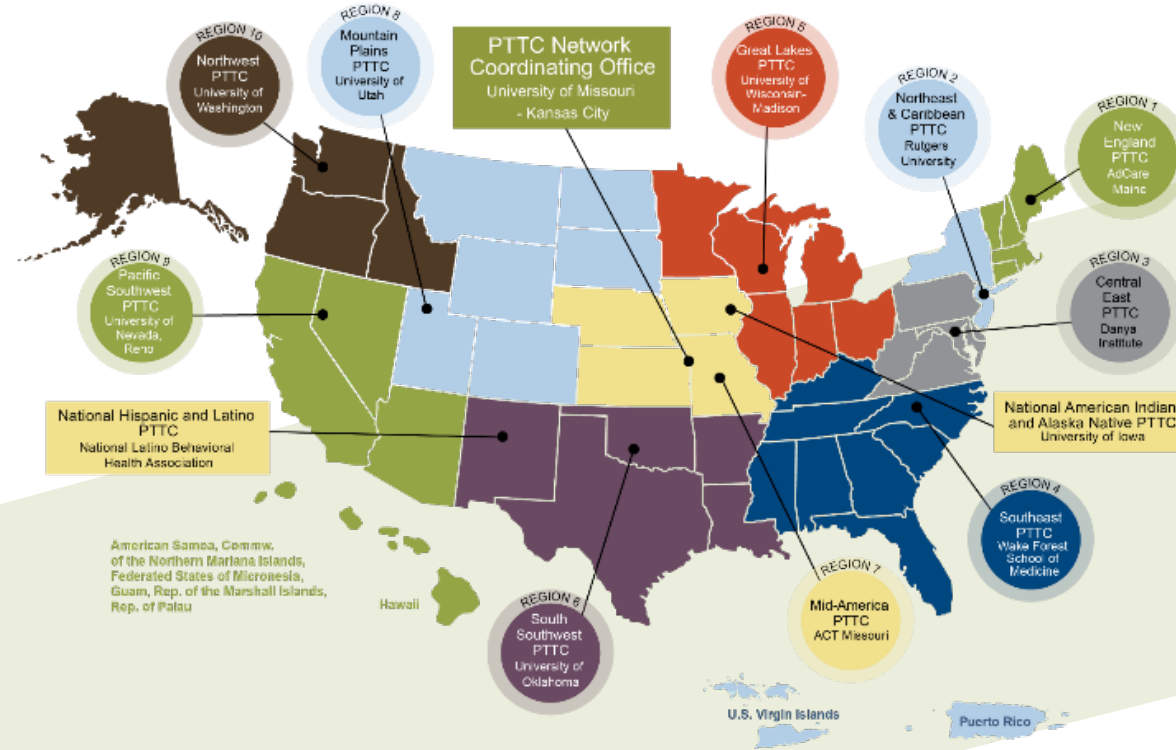
PEOPLE FIRST.

The PTTC Network uses affirming language to promote the application of evidence-based and culturally informed practices.



PTTC Prevention Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

PTTC Network



Co-Directors
Kimberly Wagoner, DrPH, MPH
and Mark Wolfson, PhD



Wake Forest University
School of Medicine

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Attendance**



**Webinar
Recording**
available in 2-3
days on our
You Tube

**Bottom of our main
webpage**

pttcnetwork.org/southeast

The screenshot shows a green banner with two dark green boxes. The left box is titled "JOIN OUR EMAIL LIST" and contains the text "Stay up to date on what's happening in our region." Below this is a "SUBSCRIBE" button and a person icon. The right box is titled "WATCH OUR YOUTUBE CHANNEL" and contains the text "Watch our entire webinar series and subscribe for future episodes." Below this is a "WATCH" button and a hand cursor icon.

Sign up for our newsletter here!



TONS of great trainings to share/watch with your coalition members

Upcoming Events:

Lunch & Learn **Workshop Series #3**: Analyzing & Learning From Real-World Examples

June 10th

July 11

HIV A to Z, a 6-hour course

Human immunodeficiency virus (HIV) through an intersectional lens. Registration open.



Writing a Winning Proposal Narrative

Workshop #2: Lunch & Learn Series on Grant Writing

Drew Reynolds, PhD, MSW, MEd
Principal Consultant, Common Good Data



DOWNLOAD TOOLKIT:
www.commongooddata.com/grantwriting

Meet Drew: Experienced leader in data and program evaluation

- Social Worker
- 12+ years of experience, since 2018 as a consultant
- Substance use prevention, mental health promotion, case management, community practice, education and youth services
- Part-time instructor, Georgia State School of Social Work



The Common Good Data Podcast

The podcast for nonprofit and public sector leaders looking to use data and evaluation strategies to build effective and sustainable programs in the areas of prevention, mental health, human services, and education

www.commongooddata.com/podcast



Three Workshops



Planning for Successful Grant Writing

Monday, May 20, 12-2



Writing a Winning Proposal Narrative

Monday, June 3, 12-2



Grant Writing Workshop with Real-World Examples

Monday, June 10, 12-2

Agenda

1. Write a compelling problem statement
2. How to write a strong project description
 1. Goals and objectives
 2. Evidence-based/informed strategies
3. Design an evaluation plan
4. Describe staff and organizational experience
5. Draft a project budget

Introductions



To the chat, please add your:

1. Name
2. Title
3. Organization



Pro Tip:

Always start by reading the Notice of Funding Award (NOFA)

Then read it again.

Then re-read it again.

[Grants](#)

[Grants Dashboard](#)

[How to Apply for a SAMHSA Grant](#)

[Grant Review Process](#)

[Grants Oversight](#)

[Grants Management](#)

[Continuation Grants](#)

[Block Grants](#)

[GPRA Measurement Tools](#)

[Contact Information](#)

[Grants Glossary](#)

[Grant Awards Archive](#)

[Grant Awards By State](#)

[Grants Training Materials](#)

Strategic Prevention Framework – Partnerships for Success for Communities, Local Governments, Universities, Colleges, and Tribes/Tribal Organizations

Short Title: SPF-PFS-Communities/Tribes

Modified Announcement

[Back to the Grants Dashboard](#)

Changes for FY 2024: Application Due Date, Total Available Funding, Number of Awards, and Key Personnel

Notice of Funding Opportunity (NOFO)

The information on this page was updated 11/16/2023 for FY 2024: This Standing NOFO was first announced in FY 2023 and will be open for application submissions for Fiscal Years 2024 and 2025. Below is more information on the due dates by Fiscal Year.

NOFO Number: SP-23-004

Posted on Grants.gov: Thursday, November 16, 2023

Application Due Date: Wednesday, February 21, 2024

Catalog of Federal Domestic Assistance (CFDA) Number: 93.243

Intergovernmental Review (E.O. 12372): Applicants must comply with E.O. 12372 if their state(s) participates. Review process recommendations from the State Single Point of Contact (SPOC) are due no later than 60 days after application deadline.

Public Health System Impact Statement (PHSIS) / Single State Agency Coordination: Applicants must send the PHSIS to appropriate State and local health agencies by application deadline. Comments from Single State Agency are due no later than 60 days after application deadline.

Description

The purpose of this program is to help reduce the onset and progression of substance misuse and its related problems by supporting the development and delivery of community-based substance misuse prevention and mental health promotion services. The program is intended to expand and strengthen the capacity of local community prevention providers to implement evidence-based prevention programs.

Application Materials

- [NOFO Document \(PDF | 727.1 KB\)](#)
- [NOFO Document \(DOC | 193.18 KB\)](#)
- [Pre-Application Webinar Announcement for this RFA \(PDF | 110.69 KB\)](#)
- [Pre-Application Webinar \(55 minutes, 12 seconds\)](#) 
- [Pre-Application Webinar Slides \(PDF | 796 KB\)](#)

Useful Information for Applicants

- [Application Forms and Resources](#)
- [Applying for a New SAMHSA Grant](#)
- [Search Grants.gov and Apply Now](#)

Write a compelling problem statement



From Workshop #1...Assessment

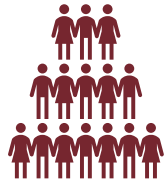
- Assess the **problem**:
 - What, how often, where, and who
- **Prioritizing** problems:
 - Magnitude, severity, trend, changeability
- **Risk and Protective Factors**

Risk Factors	Protective Factors
Low impulse control	Academic achievement
Peer use	Parental bonding
Lack of parental monitoring	Family cohesion
Easy access	Social capital
Mental health challenges, stress	Community engagement

Outline of a problem statement

- Population of focus
 - Geographic bounds
 - Cultural groups (e.g. Latino, Native American, LGBTQ)
 - Demographic details
- Problem areas
 - Substance(s) type: Alcohol, tobacco/vaping, marijuana, Rx drugs
 - But why? But why here?
- Summary/thesis statement
 - ^^^Summarize the above in a single, completed thesis statement.

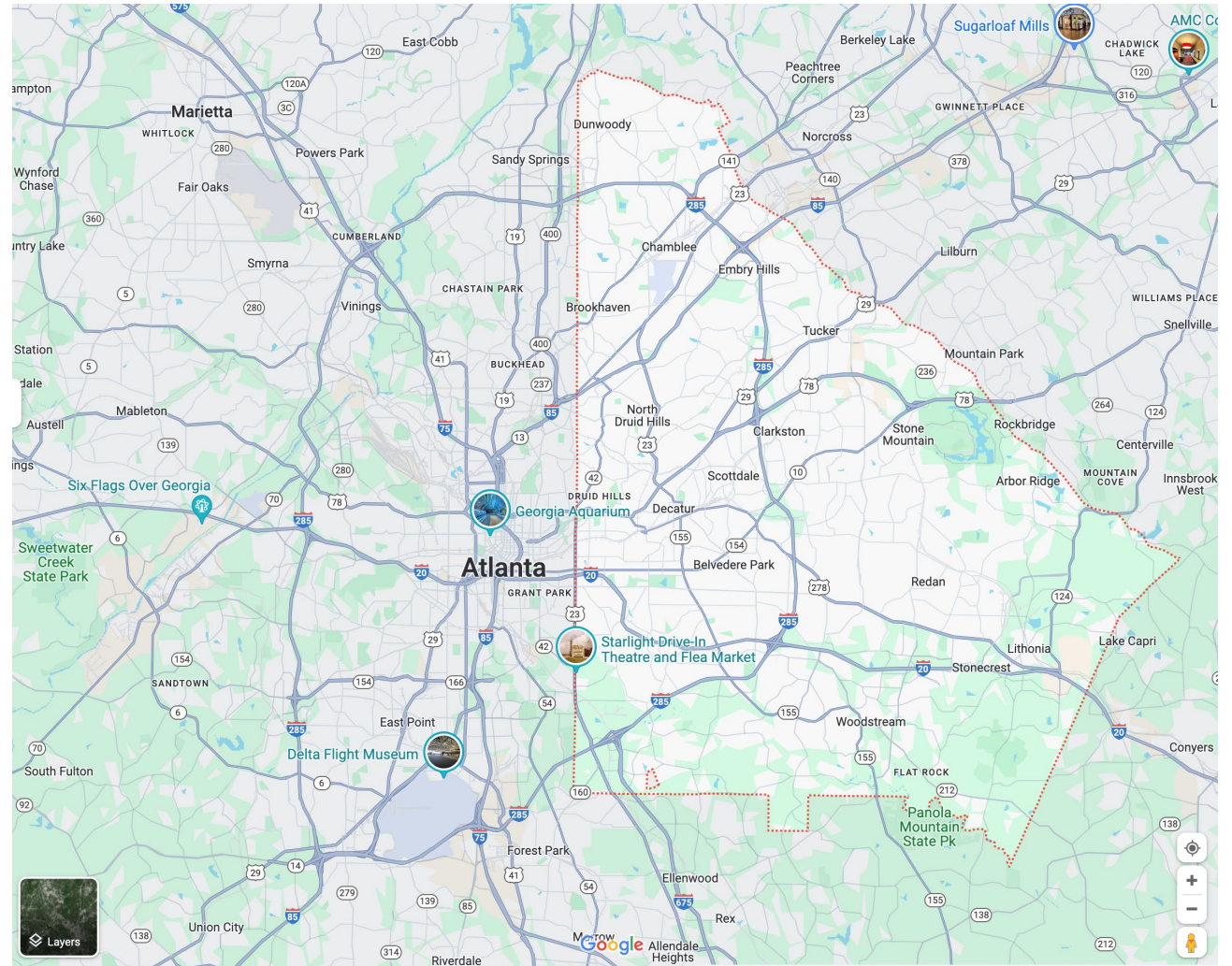
Example: DeKalb County, GA



Very populous - 764,382 residents in 2022.

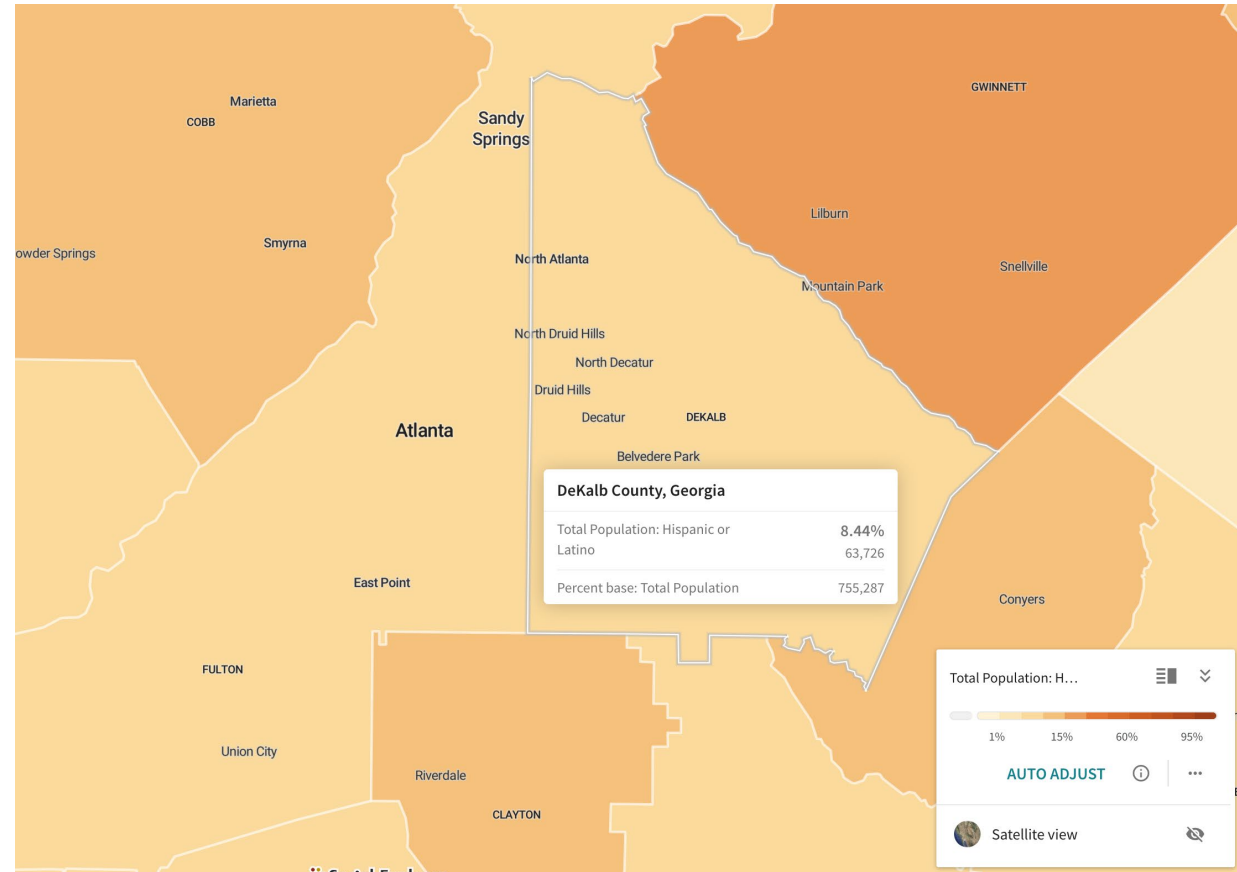


Key: narrow the focus to be more specific



DeKalb: Mapping Race/Ethnicity

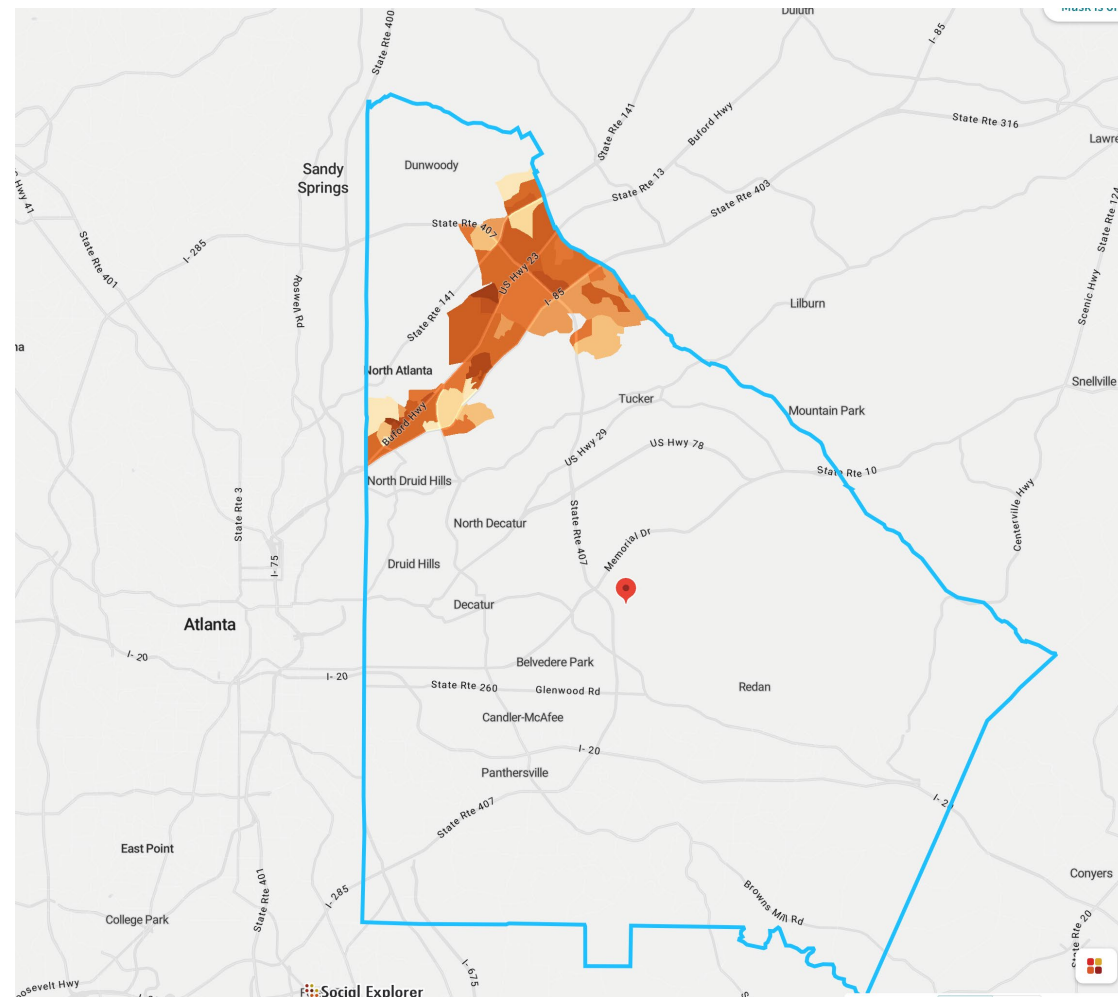
- 8.4% of county residents are Latino, representing roughly 63,000 people.



From: 2020 US Census data represented using *Social Explorer*

DeKalb: Mapping Race/Ethnicity

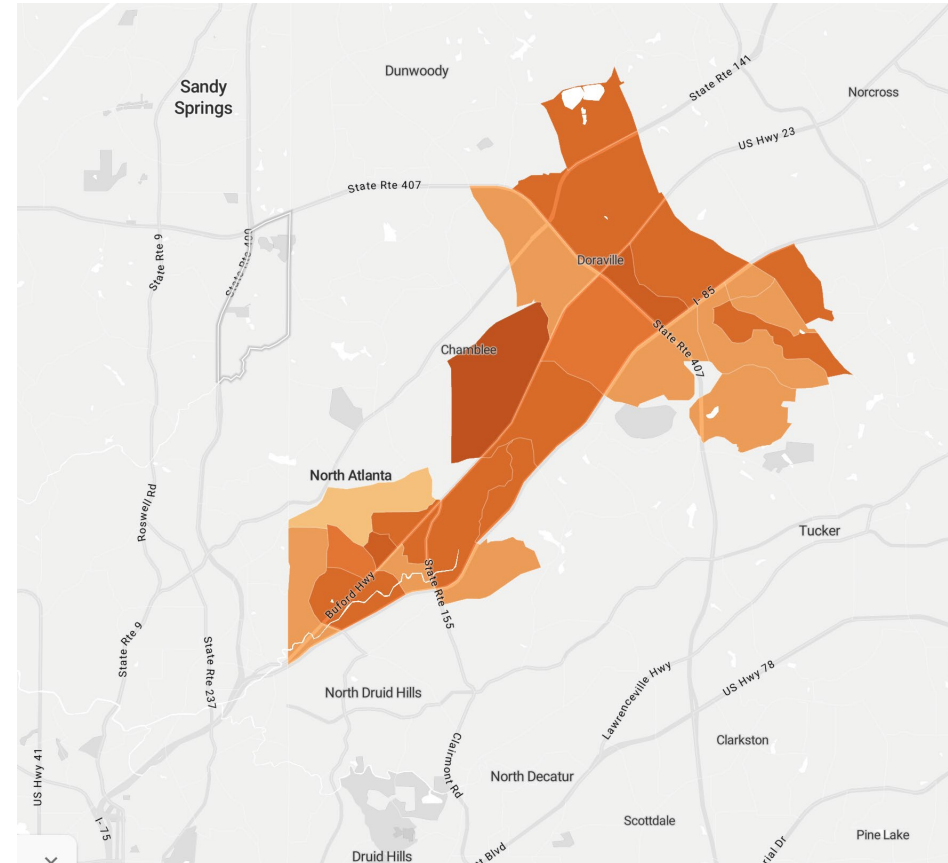
- Most Latino residents live in the “Buford Highway” Corridor
- Helpful to specify by smaller geographies:
 - Census Tracts
 - Zip Codes
 - School boundaries



DeKalb: Mapping Race/Ethnicity

	Focus Area	County
Total Population	82,140	755,287
Pop age 10-17	8,917	74,266
% Latino	43.0%	8.4%
< than HS degree	22.6%	9.7%
Median income	60,959	65,166
% below poverty level	15.8%	10.4%
Foreign born	34.0%	16.0%

From: ACS 2020 Data, 5-year estimates



From: 2020 US Census data represented using *Social Explorer*

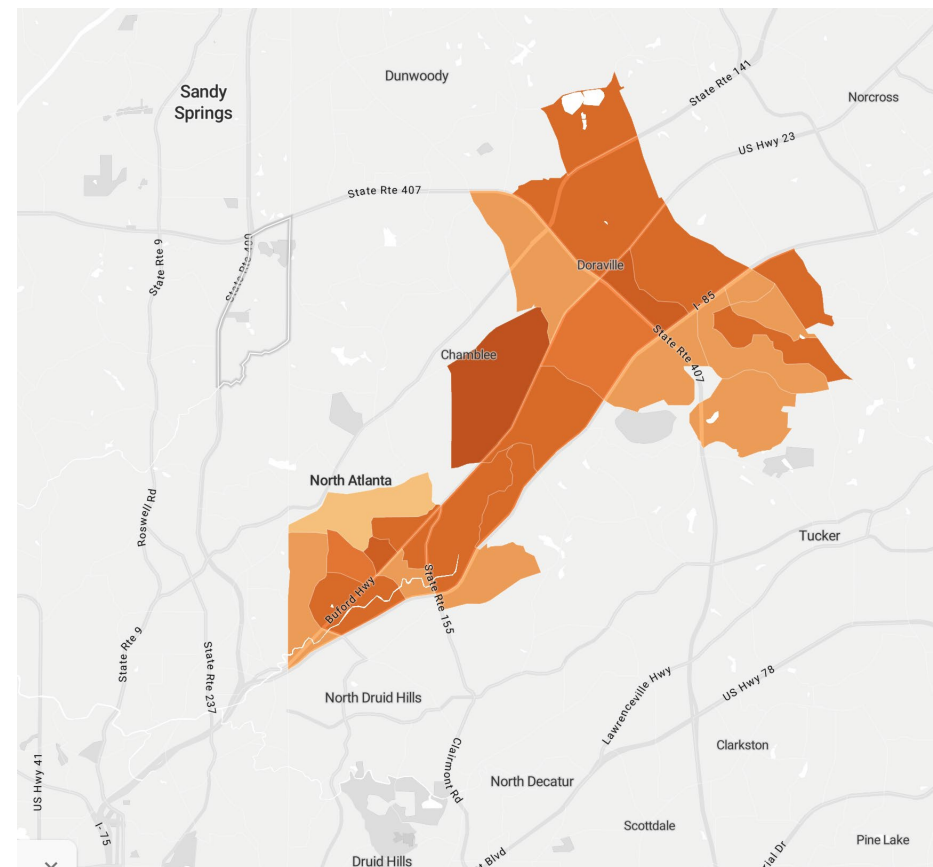
DeKalb: Mapping Race/Ethnicity

- Key point: Focus on Health Disparities
- Region of DeKalb County that is characterized by:

^ % less than HS degree

^ % poverty level

v median income



From: 2020 US Census data represented using *Social Explorer*

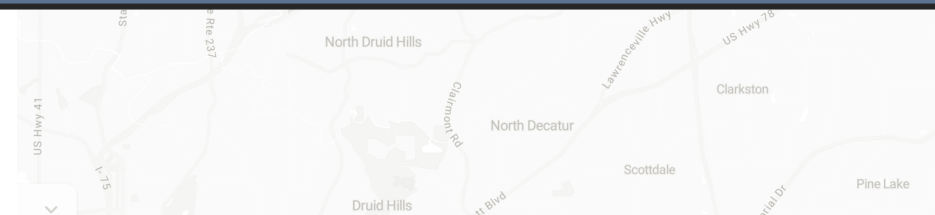
Discussion Mapping Race/Ethnicity

- Key points
- Disparities
- Region of
- is charact
- % less th
- % pover
- median



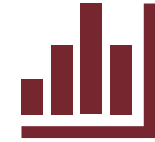
Have you used mapping techniques or US Census data before? What are other maps you have created?

(Raise hand or add to the chat)



From: 2020 US Census data represented using *Social Explorer*

Substance Use Data: The YRBS



- Once you have geography and demographic data, add data about substance use.
- Sources:
 - Youth Risk Behavior Surveillance System (CDC)
 - Sometimes, have local geographies (including DeKalb County, GA, in 2017)
 - National Survey on Drug Use and Health (NSDUH)
 - State Reports
 - School climate and health surveys
 - Example: Georgia Student Health Survey
 - County Health Departments

Discussion Use Data: The YRBS

- Once you have collected data, you can use it to learn about subjects in your practice.
- Sources:
 - Youth Risk Behavior Survey
 - Some examples:
 - National Health and Medical Research Council
 - State Health Departments
 - School-based surveys
 - Example: Georgia Student Health Survey
 - County Health Departments

Where are some examples of data sources that you use from your own practice?

(Raise hand or add to the chat)

DeKalb County: YRBS

	Latino HS Youth	All HS Youth
Had first drink before age 13	20.2%	15.5%
Currently drink alcohol	23.0%	18.3%
Currently binge drinking	12.3%	7.4%
Obtained alcohol by someone giving it to them	39.1%	33.0%

Latino youth are at greater risk for alcohol use compared to the county as a whole.

School district data: Discipline

7

Incident-to-Action Flow Chart

The chart below shows how each discipline incident type leads to school actions in response, split out by gender and race/ethnicity. The width of the data links depicts the number of incident occurrence. Colored vertical bars (nodes) and flows (links) allow user to drill deeper. By clicking a node or a link user can drill down; and by clicking again data view is restored. User "Selections" made are neatly displayed at the bottom of this chart.

Discipline Incidents and Consequences by Demographics

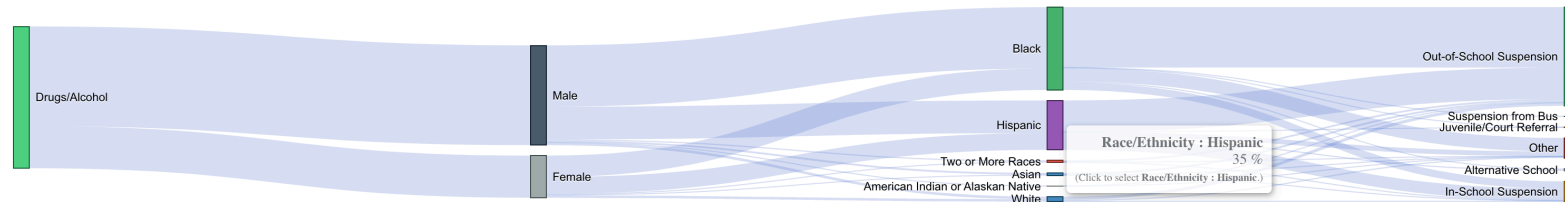


Chart Selections:

Incident Type: Drugs/Alcohol

[Clear Chart Selections](#)

8

Incident-to-Action Flow Chart

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Discipline Incidents and Consequences by Demographics



Chart Selections:

Race: Hispanic
Incident Type: Drugs/Alcohol

[Clear Chart Selections](#)

35% of drug and alcohol suspensions are for Latino students, despite comprising of only about ~20% of students.

64% lead to out of school suspensions.



School district data: Health Survey

30. During the past 30 days, on how many days did you have at least one drink of alcohol?

	6TH		7TH		8TH		9TH		10TH		11TH		12TH		TOTAL	FEMALE		MALE		UNDISCLOSED		TOTAL
0 Days	5,898	95.22%	5,638	94.65%	5,337	95.42%	6,403	93.75%	5,533	92.23%	4,737	91.13%	3,742	88.57%	37,288	18,719	94.56%	17,720	92.28%	849	85.07%	37,288
1-5 Days	133	2.15%	155	2.60%	120	2.15%	186	2.72%	198	3.30%	215	4.14%	228	5.40%	1,235	587	2.97%	605	3.15%	43	4.31%	1,235
6-10 Days	64	1.03%	73	1.23%	58	1.04%	95	1.39%	107	1.78%	94	1.81%	116	2.75%	607	221	1.12%	355	1.85%	31	3.11%	607
11-20 Days	31	0.50%	34	0.57%	30	0.54%	57	0.84%	75	1.25%	50	0.96%	44	1.04%	321	113	0.57%	180	0.94%	28	2.81%	321
More than 20 Days	68	1.10%	57	0.96%	48	0.86%	89	1.30%	86	1.43%	102	1.96%	95	2.25%	545	155	0.78%	343	1.79%	47	4.71%	545
TOTAL	6,194		5,957		5,593		6,830		5,999		5,198		4,225		39,996	19,795		19,203		998		39,996

GA Health Survey does not release substance use data by race/ethnicity, BUT: you can select schools in the focus area that are majority Latino to approximate use.

Note: % use on GA Health Survey is lower than on YRBS.

But why, and why here? Add Context to the numbers

Some (possible) reasons why Latino youth might use alcohol at higher rates compared to the county average:

- 1) Acculturation Stress
- 2) Cultural norms favorable to use (e.g. gender norms, rites of passage [quinceañeras]). Cultural events and activities (sports games)
- 3) Exposure to violence/trauma
- 4) Access at Latino-serving retailers

Research

- Citing research can increase credibility and knowledge of the issue.
- Example: acculturation stress as contributor to Latino youth substance use
- Check with university libraries, Google Scholar

Substance Use & Misuse, 44:740–762
Copyright © 2009 Informa Healthcare USA, Inc.
ISSN: 1082-6084 (print); 1532-2491 (online)
DOI: 10.1080/10826080802544216

informa
healthcare

Acculturation Stress

Pathways from Acculturation Stress to Substance Use Among Latino Adolescents

RACHEL LEE BUCHANAN¹ AND PAUL RICHARD SMOKOWSKI²

¹Salisbury University, Salisbury, Maryland, USA

²University of North Carolina at Chapel Hill, North Carolina, USA

The purpose of this study was to examine the link between acculturation stress and substance use among Latino adolescents. In-home interviews were completed with the participants at four time-points between 2005 and 2007. Path analysis was completed using longitudinal data from 286 Latino adolescents living in North Carolina and Arizona (65% foreign-born). Results indicate that acculturation stress influences family and friend relationships, which in turn affect adolescent mental health problems, and finally, substance use. Key mediators in the pathway from acculturation stress to substance use were parent–adolescent conflict, internalizing, and externalizing problems. Implications for practice and research have been discussed here.

Keywords Latino; adolescent; family relationships; friends; mental health; acculturation stress

Introduction

While the use of some substances has been in decline since the 1990s (Johnston, O'Malley,



Data for risk and protective factors

- The other 3 of the 4 Core Measures
 - Peer disapproval of use
 - Parent disapproval of use
 - Perception of risk.
- Other risk/protective factors
 - School climate
 - Neighborhood exposure to violence/trauma
 - Parental monitoring, other adults
 - Access to youth programs and activities, faith community

Context: Latino youth may not have access to resources in their schools and neighborhoods, including youth programs, which could contribute to health disparities.

Discussion: Risk and protective factors

- The other 3 of the 4 Core Measures
 - Peer disa
 - Parent dis
- Other risk/pro
- School cli
- Neighbor
- Parental r
- Access to

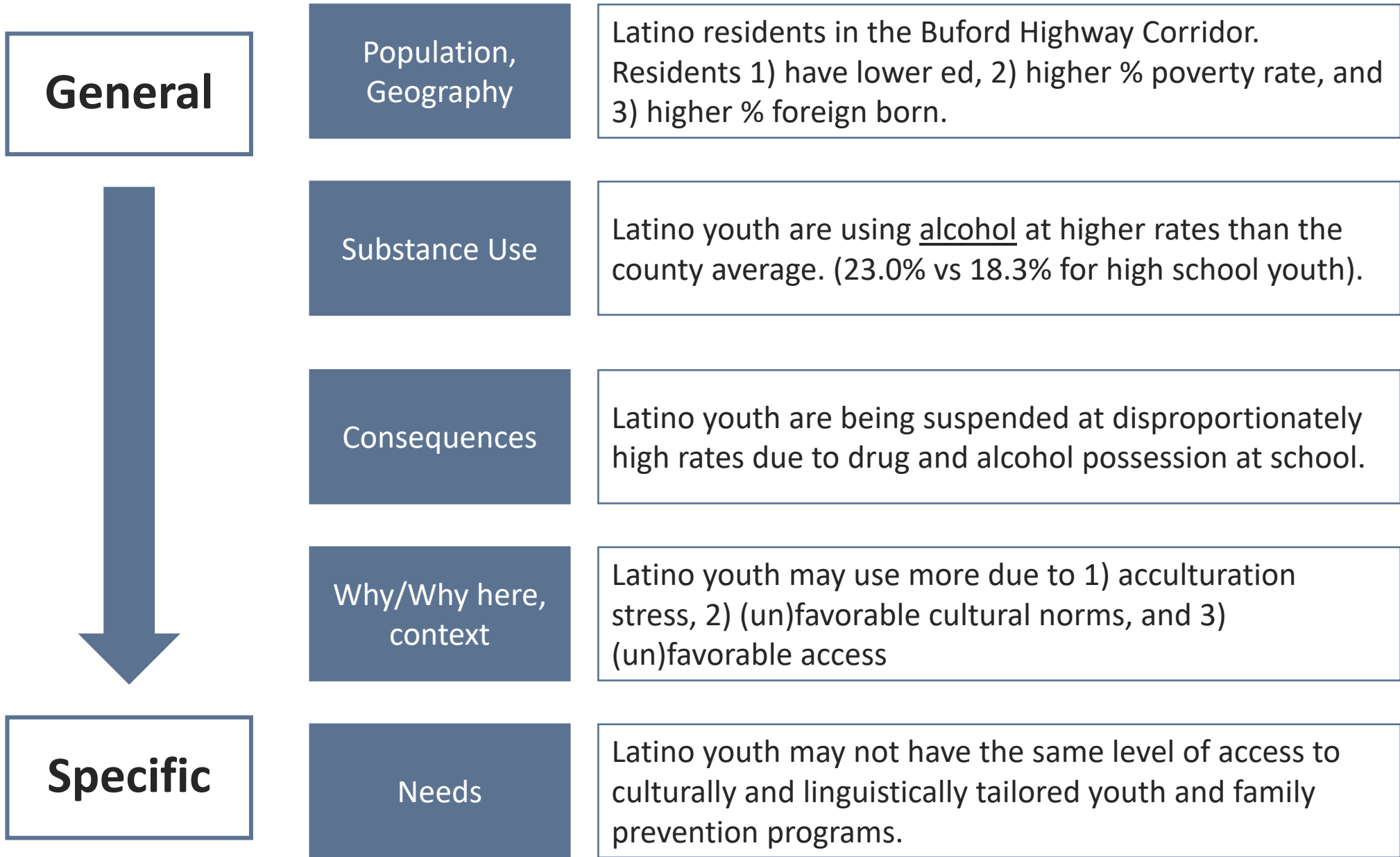


What are some risk and protective factors that you have focused on in your grants and projects?

(Raise hand or add to the chat)

Context: Latino youth may not have access to resources in their schools and neighborhoods, including youth programs, which could contribute to health disparities.

Problem Summary



Summary Statement

In summary, Latino youth in DeKalb County are using alcohol at higher rates than their peers and are more likely to be suspended from school for alcohol and drugs.

A multitude of factors, including acculturation stress and exposure to trauma, make Latino youth uniquely susceptible to alcohol use at an early age, with potentially life-long consequences.

Moreover, Latino youth lack access to culturally and linguistically tailored prevention programs to support them with these challenges.

Refer to the Template

Data Sources

It's helpful to use many different data sources when planning for grant writing. Whenever possible, use existing data sources to measure and track your progress, and collect data only to fill in gaps where you cannot access the data through secondary sources. Use the checklist below to see what data sources you may already have access to in your community, and which new opportunities you'd like to explore. Mark whether the data includes substance use, risk/protective factors, or consequence data.

	Substance Use	Risk/Protective Factors	Consequences
Secondary Data			
Substance Use Data			
- Youth Risk Behavior Surveillance System (YRBSS)	X	X	X
- National Survey on Drug Use and Health (NSDUH)	X	X	
- State survey (schools), e.g. School Climate Survey	X		
- State survey (health)	X		
- County health survey	X		X
- County health department – Opioid Dashboards, ER			X
- School discipline data (state or local)			X
- School climate surveys (e.g. PRIDE survey)	X	X	
Primary Data Collection			
- Program pre-post surveys	X	X	
- School Youth Drug Survey, four core measures	X	X	

Problem Summary

Now, it's time to put it all together. Draft your problem summary / thesis statement using the spaces below as a guide.

Topic	Description
Population, Geography	
Substance Use	
Consequences	
Why/Why here, context	
Needs	
All Together	

How to write a strong project description



Writing goals

GOALS

Definition – a goal is a broad statement about the long-term expectation of what should happen because of your program (the desired result). It serves as the foundation for developing your program objectives. Goals should align with the statement of need that is described. Goals should only be one sentence.

The characteristics of effective goals include:

- Goals address outcomes, not how outcomes will be achieved.
- Goals describe the behavior or condition in the community expected to change.
- Goals describe who will be affected by the project.
- Goals lead clearly to one or more measurable results.
- Goals are concise.

Source: FY24 PFS Grant NOFA, SAMHSA



Writing goals

Examples

Unclear Goal	Critique	Improved Goal
Increase the substance abuse and HIV/AIDS prevention capacity of the local school district	This goal could be improved by <i>specifying an expected program effect in reducing a health problem</i>	Increase the capacity of the local school district to reduce high-risk behaviors of students that may contribute to substance abuse and/or HIV/AIDS
Decrease the prevalence of marijuana, alcohol, and prescription drug use among youth in the community by increasing the number of schools that implement effective policies, environmental change, intensive training of teachers, and educational approaches to address high-risk behaviors, peer pressure, and tobacco use.	This goal is not concise	Decrease youth substance use in the community by implementing evidence-based programs within the school district that address behaviors that may lead to the initiation of use.

Source: FY24 PFS Grant NOFA, SAMHSA

Goals Example: DeKalb County

Goal 1 – Expand access to culturally and linguistically tailored prevention programs for Latino youth across the county to reduce Latino youth alcohol use.

Goal 2 – Raise awareness about the risks and consequences of alcohol at school to reduce out-of-school suspensions for Latino youth.



Do goals 1) address outcomes, 2) describe the behavior/condition change, 3) describe who will be affected? Are they 4) measurable and 5) concise?

Goals Example: DeKalb County

Goal 1 – Expand access to culturally and linguistically tailored prevention programs for Latino youth across the county to reduce Latino youth alcohol use.

Goal addresses outcome (substance use), describes change (Access to prevention programs), describes who benefits (Latino youth), is concise and measurable

Goal 2 – Raise awareness about the risks and consequences of alcohol at school to reduce out-of-school suspensions for Latino youth

Obj 2.1 -

Goal addresses outcome (suspensions), describes change (awareness of risks/consequences of alcohol at school), describes who benefits (Latino youth), is concise and measurable

Writing Objectives

- Specific
- Measurable
- Achievable
- Realistic
- Time-bound

Examples:

Non-SMART Objective	Critique	SMART Objective
Teachers will be trained on the selected evidence-based substance abuse prevention curriculum.	The objective is not SMART because it is not <i>specific, measurable, or time-bound</i> . It can be made SMART by <i>specifically</i> indicating who is responsible for training the teachers, how many will be trained, who they are, and by when the trainings will be conducted.	<i>By June 1, 2022, LEA supervisory staff will have trained 75% of health education teachers in the local school district on the selected, evidence-based substance abuse prevention curriculum.</i>
90% of youth will participate in classes on assertive communication skills.	This objective is not SMART because it is not <i>specific or time-bound</i> . It can be made SMART by indicating <i>who</i> will conduct the activity, <i>by when</i> , and <i>who</i> will participate in the lessons on assertive communication skills.	<i>By the end of the 2022 school year, district health educators will have conducted classes on assertive communication skills for 90% of youth in the middle school receiving the substance abuse and HIV prevention curriculum.</i>

Source: FY24 PFS Grant NOFA, SAMHSA

Objectives Example: DeKalb County

Goal 1 – Expand access to culturally and linguistically tailored prevention programs for Latino youth across the county to reduce Latino youth alcohol use.

Obj 1.1 - Reduce Latino HS alcohol 30-day use from 23.0% to 21.0% by September 30, 2028.

Obj 1.2 – Enroll 40 youth and their parents in the evidence-based, culturally tailored *Familias Preparando la Nueva Generación (FPNG) / Keepin' it Real* program by September 30, 2025.

Goal 2 – Raise awareness about the risks and consequences of alcohol at school to reduce out-of-school suspensions for Latino youth

Obj 2.1 - Reduce the number of out-of-school-suspensions due to alcohol and drug possession from focus area schools by September 30, 2028.

Obj 2.2 - Host three (3) town halls with approximately 60 total Latino community members and parents to discuss the risks of alcohol use, especially at school, by September 30, 2025.

Goal addresses outcome (substance use), describes change (Access to prevention programs), describes who benefits (Latino youth), is concise and measurable

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Obj 2.2 - Host three (3) town halls with approximately 60 total Latino community members and parents to discuss the risks of alcohol use, especially at school, by September 30, 2025.



Are these SMART objectives? Why or why not?

Program/Activity Descriptions

- What is the activity, in detail?
- Who will implement the activity?
- When will they do it? → *Consider your timeline.*
- Where will they do it?
- How will they do it?

The more specific you are, the better your proposal will be.

Describe Staff and Organizational Experience

Showing expertise: Resumes, Biosketches, Experience

- Go beyond just academic degrees and professional titles.
- Other things to include:
 - Experience working/living with population served by grant
 - Language skills and cultural fluency
 - Big achievements (e.g. other large grants managed)
 - Publications or research reports
 - Years of experience working 1) in prevention, or 2) with youth
 - Leadership experience
 - History of collaboration/partnerships

Example Table

Personnel	FTE	Role	Qualifications
Project Director	1.0 FTE	<ul style="list-style-type: none"> • Project management and oversight. • Supervise Project Coordinator and two interns. • Lead contact for establishing, maintaining, and expanding partnerships • Serve on DeKalb County substance use coalition • Work with evaluator for all reporting requirements. 	<ul style="list-style-type: none"> - Master of Public Health - 15 years experience in prevention - Co-author on 3 peer-reviewed publications on substance use prevention topics - Trained in four evidence-based programs, including Keepin' it Real. - Experience working with Latino community, bilingual and bicultural English-Spanish speaker.
Project Coordinator	...	•
Intern	...	•
Evaluator	...	•

Design an evaluation plan

What are you measuring?

- Every **outcome** measure in your Objectives must have a clear way to be measured.
 - E.g. – 30 day use in school survey
 - E.g. - # of suspensions due to alcohol and drugs
 - E.g. - # of driving accidents involving youth and alcohol
- If you can, also include how measuring/tracking **outputs**, though not always enough space
 - E.g. - how you will count how many people attended a town hall.
 - E.g. – how many people you reached in communications campaign

How will you measure it?



Secondary data: Use what's out there: substance use surveys, school district data, county health department data, opioid dashboards, etc.



Focus Groups, Key Informant Interviews: Gather contextual data that informs not just the *what* but the *how and why*.



Surveys: Helpful for quantitative data not collected in secondary sources. Hint: Focus on just 1-2 surveys. Consider incentives.

How will you measure it?

Obj	Data Collection Source and Performance Measures	Frequency	Resp. Staff	Analysis
1.1	GA Health Survey: Reduce alcohol use among HS youth from focus area schools from 12.5% to 10.0% by end of grant period	1x, in 2025	Analyst, Evaluator	Change in %
1.3	Keepin' in Real Youth Survey: % increase in youth social skills, % increase in risk/protective factors (e.g. peer/parent disapproval, perception of risk).	Program survey	Coordinator, Evaluator	% change, t-test.
2.2	20% Reduction in out-of-school-suspensions due to alcohol and drug possession from focus area schools by end of grant period	Annual	Analyst, Evaluator	% change, t-test



Data Security & Management

- How will you keep primary data collected secure? How will you keep it confidential?
Some tips:
 - Save on password protected/encrypted drive
 - Limit access to users. Who is in charge?
 - Limit how data are shared/transferred
 - Sharing in aggregate, set rule for $< N$ for sharing.
 - Data security agreements (DSAs).

Protecting Participants

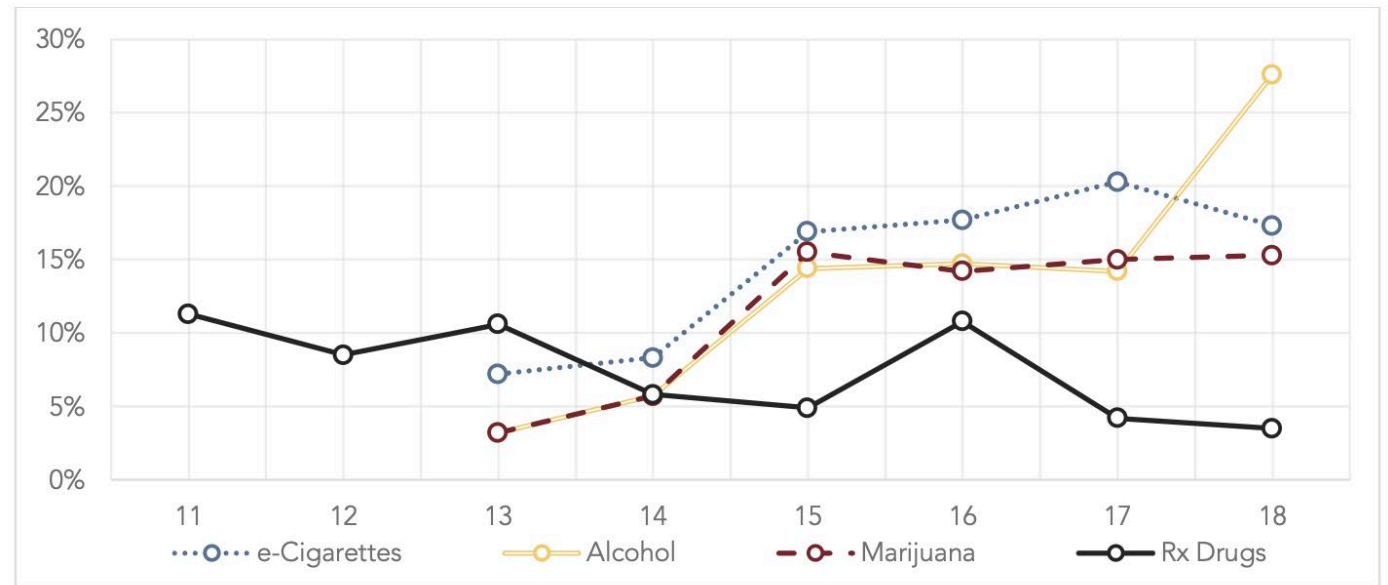
- Research Ethics: Belmont Report
 - Informed Consent
 - Risks and Benefits
 - Selection of participants
- Design and share consent forms
- Ensure you share what real risks and benefits are (typically not 0).
- Does everyone have equal chance to benefit? Risk shared equally?



Reporting and Dashboarding

- Who will create dashboards?
- What will they show?
- How often are they updated?
- How do they drive decision-making?

Figure 5: 30-day substance use by age



Refer to the Template

Design an Evaluation Plan

Every **outcome** measure in your Objectives must have a clear way to be measured. E.g. – 30 day use in school survey

- E.g. - # of suspensions due to alcohol and drugs
- E.g. - # of driving accidents involving youth and alcohol

If you can, also include how measuring/tracking **outputs**, though not always enough space

- E.g. - how you will count how many people attended a town hall.
- E.g. – how many people you reached in communications campaign

Use the table below to draft your data collection sources, and map them back to the objectives you previously described. Make sure that each objective with an outcome is reflected in the table below.

Obj #	Data Collection Source and Performance Measure	Frequency	Resp. Staff	Analysis


Protecting Participants: Describe procedures you'll take to protect participants. Include how you will develop an informed consent procedure, share risks and benefits with participants, and ensure the fair and equitable selection of participants.

Reporting and Dashboarding: Describe procedures you'll take to report on your progress. Who will create reports and dashboards, and what will they show? How often will they be updated? What procedures will you use to ensure the data inform decision-making?

Draft a project budget

Template

- Always use the template
- Template should auto-calculate for you
- Consult with CFO, ED, or person in charge of budgets.


SAMHSA Detailed Budget and Narrative Justification
Jun 3, 2024 [Index \(Bookmarks\)](#)

INTRODUCTION
INSTRUCTIONS
ADOBE TIPS
Save
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Applicant/Recipient		Application/Award Number	
Project Title:			
Budget Period:	Start Date	End Date	Budget Year

For Multi-Year Funded (MYF) awards only
(not applicable to new applications for funding)

Check the box to select the Incremental Period

GUIDANCE

List of NOFOs by Fiscal Year
(for Program-specific & Standard Funding Restrictions)
Electronic 45 CFR §75
(for Administrative Requirements & Cost Principles)
Summary of Unallowable Costs

COST SHARING AND MATCHING

To determine whether the project requires non-federal matching funds or contributions, review the [NOFO](#) Section III-2 - Cost Sharing and Matching Requirements. [Information on Matching](#)

Select the applicable match option below. The default option is "NO."

Matching Required: YES NO

A. Personnel

Guidance on the Salaries of Indirect or F&A Administrative and Clerical Staff
Guidance on the Executive Level II Salary Limitation
Guidance on Calculating Salaries and Paid Time Off (PTO)

Line Item #	Position	Name	Key Position per the NOFO	Check if Hourly Rate	Calculation					Personnel Cost	FEDERAL REQUEST
					Hourly Rate	Hours	# of Staff	Annual Salary	% Level of Effort (LOE)		
X 1			<input type="checkbox"/>	<input type="checkbox"/>			1			\$0	\$0+
TOTAL										\$0	\$0

Personnel Narrative:

Line Item #	Salary	# of Staff	LOE	Personnel Cost
1		1		\$0

Show In-Kind Personnel Table



Funding Areas

- Staff (personnel, fringe benefits)
- Program materials
 - Travel
 - Equipment
 - Supplies
 - Contracts
- Construction (if allowed)
- Indirect Costs





Budget Narrative

- Should explain how budget items are directly related to the Program Narrative
- Demonstrate **alignment**. Are you funding what you actually said you were going to do?

Questions?



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Podcast:

“The Common Good Data Podcast”





Thank You

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