Mental Health First Aid | SAMHSA Mental Health Training FOA Summary

February 20, 2020

OVERVIEW

TITLE	Project AWARE (Advancing Wellness and Resiliency in Education) State Education Agency Grants (SM-20-016) (Short Title: AWARE-SEA)				
	Click here for full Funding Opportunity Announcement (FOA)				
DUE DATE	Monday, April 20, 2020				
TOTAL FUNDING	\$31,492,000	AWARD AMOUNT	Up to \$1,800,000 per year		
TRAINING- SPECIFIC FUNDING	Not Specified	NUMBER OF AWARDS	17 (At least three awards will be made to Tribal Education Agencies/Authorities)		
DURATION	Up to 5 years				
PURPOSE	 Increase awareness of mental health issues among school-aged youth. Provide training for school personnel and other adults who interact with school-aged youth to detect and respond to mental health issues. Connect school-aged youth who may have behavioral health issues (including serious emotional disturbance [SED] or serious mental illness [SMI]), and their families to needed services. 				
ELIGIBILITY	State Education Agencies (SEA) and education agencies/authorities in federally recognized American Indian/Alaska Native (AI/AN) tribes/organizations. Note: Recipients who received funding under SM-14-018 (Project AWARE for State Educational Agencies) are eligible to apply but must select three different local education agencies (LEAs) to partner with. Recipients that received funding under SM-18-006 or SM-19-003 (Project AWARE for State Education Agencies) are not eligible to apply for funding under this FOA.				

REQUIRED ACTIVITIES

work with the state partners on improving or expanding mental health-related interventions and services across school-aged youth and family serving systems. (Note: Letters of Commitment must be submitted with application)

Identify LEAs within three communities to partner with in the project. Each LEA should demonstrate readiness and willingness to collaboratively

- Implement direct service provision in schools via the use of licensed mental health professionals. Schools may also utilize behavioral health aides and peers for assistance with students in classroom and other school settings.
- Partner with at least one licensed provider organization for direct client mental health treatment services appropriate to the grant (with at least two years of experience) for the proposed project.
- Develop and implement a comprehensive plan of evidence-based culturally competent and developmentally appropriate school- and community-based mental health services.
- Implement the ability to respond immediately on-site through the employment of at least one mental health professional in each grant-funded school, if a school-aged youth exhibits behavioral signs warranting the need for clinical attention.
- Provide coordinated referral, services, and follow-up to school-aged youth and their families for evidence-based school and community-based mental health practices and services.
- Develop and implement a workforce development training plan to increase the mental health awareness and literacy of school staff, administrators, parents, and others who interact with school-aged youth to recognize the signs and symptoms and mental illness and link them to appropriate services.
- Engage in local and state program and process development to support improvements in school-aged youth and family-serving systems through the coordination and integration of funding streams to support programs with similar goals. This would include, but not be limited to, improving the quality of school-based services, use of trauma-informed approaches, and social-emotional learning.
- Develop and implement meaningful ways to engage students and their families by involving them in the design and implementation of education and community initiatives.
- Establish relationships with local businesses, families, and community groups to broaden and link all community resources available to schoolaged youth and their families.
- Develop a behavioral health disparities impact statement within 60 days following award.

ADDITIONAL REQUIREMENTS

Recipients must utilize third party reimbursements and other revenue realized from provision of services to the extent possible and use SAMHSA grant funds only for services to individuals who are not covered by public or commercial health insurance programs, individuals for whom coverage has been formally determined to be unaffordable, or for services that are not sufficiently covered by an individual's health insurance plan.

SAMHSA's grants are intended to fund services or practices that have a demonstrated evidence base and are appropriate to the population(s) of focus. An evidence-based practice refers to approaches to prevention or treatment that are validated by some form of documented research evidence.

NOTE: Recipients are expected to provide services to school-aged youth and their families by the fourth month after the grant has been

awarded.

	SAMHSA strongly encourages all recipients to adopt a tobacco/nicotine inhalation (vaping) product-free facility/grounds policy and to promote abstinence from all tobacco products (except in regard to accepted tribal traditions and practices). SAMHSA also encourages all recipients to address the behavioral health needs of active duty military service members, returning veterans, and military families in designing and developing their programs and to consider prioritizing this population for services, where appropriate.
PERSONNEL * = Key Personnel	 SEA Project Coordinator with a 1.0 full-time equivalent (FTE) minimum level of effort.* Project Co-coordinator from the State Mental Health Agency (SMHA) with a .5 FTE minimum level of effort.* Three LEA Community Project Managers.
DATA & PERFORMANCE MEASURES	 QUARTERLY: The number of organizations that entered into a formal written inter-/intra-organizational agreements (e.g., memorandum of understanding [MOU], memorandum of agreement [MOA]) to improve mental health-related practices/activities that are consistent with the goals of the grant. The number of individuals who have received training in prevention or mental health promotion. The number of individuals in mental health and related workforce trained in mental health-related practices/activities that are consistent with the goals of the grant. The number of state and local policy changes completed as a result of the grant. The number of individuals referred to mental health or related services. The number and percentage of individuals receiving mental health or related services after referral.
PROJECT PERFORMANCE ASSESSMENT	Recipients must submit a performance assessment plan that has been agreed to in writing by the two state partners and three participating LEAs. The plan must be submitted by the third month after award to the Government Project Officer for review. Recipient is required to submit a report on project progress at the midpoint of Year 1 (i.e., at six months post-award) and an annual report at the end of each grant year. (Two reports will be required in Year 1 and one report will be required at the completion of each year thereafter.)
FUNDING RESTRICTIONS	 No more than 15% of the annual grant award may be used for data collection, performance measurement, and performance assessment, including incentives for participating in the required data collection follow-up. This amount must include evaluation costs for all activities at both the state and community levels. No more than 10% of the annual grant award may be used for state-level activities and services. No more than 15% of the annual grant award may be used for infrastructure development at the state and LEA/community level. No less than 60% of the annual grant award may be used for local education agency activities and services.

• Up to \$25,000 of the annual grant award may be used to purchase technical assistance (TA). If TA is not needed, the recipient may use these
funds for required or allowable activities.