



HBCU Center for Excellence *in Substance Abuse and Mental Health*

HBCU-CFE Behavioral Health 2010-2011 Mini-Grant Program Request for Applications (RFA)

Introduction and Purpose

The HBCU Center for Excellence (HBCU-CFE) will continue its mini-grant program with a focus on service capacity expansion and workforce development in FY 2011 through its cooperative agreement with the Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Substance Abuse Treatment (CSAT) and Center for Mental Health Services (CMHS). The HBCU-CFE behavioral health mini-grant program will embrace a public health approach to ensure student behavioral health needs are integrated throughout an institution's multiple systems and will be strategically aligned with the overall network established through the HBCU-CFE. Opportunities for exposure to behavioral health career options will be embedded into the framework of the mini-grant program along with emerging data on best practice trends and institutional service needs.

Behavioral health is a component of service systems that improve health status and contain health care and other costs to society. Yet, people with mental and substance use disorders, because of their illness, have largely been excluded from the current health care system and rely on public "safety net" programs. Last year alone approximately 20 million people who needed substance abuse treatment did not receive it and an estimated 10.6 million adults reported an unmet need for mental health care. As a result, the health and wellness of the individual is jeopardized and the unnecessary costs to society ripple across America's communities, schools, businesses, prisons & jails, and healthcare delivery systems.

Behavioral health incorporates fields related to the study, assessment, diagnosis, treatment, intervention and prevention of mental illness and substance abuse. Behavioral health involves a variety of disciplines such as psychology, psychiatry, social work, counseling, nursing, and other behavioral health professionals.

The purpose of the HBCU-CFE behavioral health mini-grant is to support and promote opportunities for HBCU institutions to foster behavioral health careers through internships at behavioral health sites, to expand knowledge of evidence-based and emerging best practices in the behavioral health field, to expand screening and referral services for students at risk of behavioral health disorders, and to support the use of behavioral health promotion and prevention activities.

Background

SAMHSA is committed to its mission to reduce the impact of substance abuse and mental illness on America's communities. SAMHSA, in collaboration with other Federal agencies, States, Tribes, local organizations, and individuals, including consumers and the recovery community, has demonstrated again and again in research and practice - prevention works, treatment is effective, and people recover from mental and substance use disorders. Behavioral health is an essential part of health service systems and community-wide strategies that work to improve health status and lower costs for families, businesses, and governments. Through continued improvement in the delivery and financing of prevention, treatment, and recovery support services, SAMHSA with its partners can advance and protect the

Nation's health. In order to achieve this goal SAMHSA has identified 10 Strategic Initiatives to focus the Agency's work on improving lives and capitalizing on emerging opportunities.

The behavioral health mini-grant program is designed to specifically address the following Strategic Initiatives:

- Prevention of Substance Abuse and Mental Illness- Create prevention prepared communities where individuals, families, schools, workplaces, and communities take action to promote emotional health and prevent and reduce mental illness, substance abuse including tobacco, and suicide across the lifespan.
- Health Reform- Broaden health coverage and the use of evidence based practices to increase access to appropriate and high quality care, and to reduce disparities that currently exist between the availability of services for substance use and mental disorders and other medical conditions
- Trauma and Justice- Reduce the pervasive, harmful, and costly health impact of violence and trauma by integrating trauma-informed approaches throughout health and behavioral healthcare systems and to divert people with substance use and mental disorders from criminal and juvenile justice systems into trauma-informed treatment and recovery.
- Military Families- Support of our service men and women and their families and communities by leading efforts to ensure needed behavioral health services are accessible and outcomes are successful.
- Public Awareness Support- Increase understanding of mental and substance use disorder prevention and treatment services to achieve the full potential of prevention and help people recognize and seek assistance for these health conditions with the same urgency as any other health condition

Addressing health disparities, including the growing need for a diverse workforce is an important priority that is reflected in SAMHSA's work with the HBCU Center for Excellence.

In 2008, among adults aged 18 or older with serious mental illness (SMI), the rate of binge alcohol use (drinking five or more drinks on the same occasion or within a couple of hours of each other) was 29.4 % which was higher than the 24.6 % among adults who did not meet the criteria for SMI. Young adults aged 18 to 22 enrolled full time in college were more likely than their peers not enrolled full time (i.e., part-time college students and persons not currently enrolled in college) to use alcohol in the past month, binge drink and drink heavily. In 2008, 61 percent of college students aged 18 to 22 were current drinkers, 40.5 percent binge drank and 16.3 percent were heavy drinkers.

A U.S. Department of Health and Human Services (DHHS) survey in 2002 found that 56% of all admissions to publicly funded treatment facilities were for multiple substances; among these admissions, 76% abused alcohol, 55% abused marijuana, 48% abused cocaine, 27% abused opiates, and 26% abused other drugs. Fifty-four percent of admissions younger than 20 years old reported polydrug abuse involving alcohol.

Faculty, fellow students, and staff are frequently the first to encounter students with behavioral health concerns, but may not be aware of signs and symptoms of psychological distress, substance abuse or available resources for help. Currently, many in the HBCU network have participated in the HBCU-NRC or the HBCU-CFE mini grant program as a support for students and faculty. A sampling of the outcomes from the mini grant program underscores the success, including:

- 80% of the HBCUs sustained the activities seeded through the mini grant beyond the Federal funding;
- 64% reported an increase in involvement in mental health initiatives on campus;
- 85% reported increased collaboration on mental health issues within or across schools;

- 79% reported an enhancement or increase in the delivery of mental health services to students
- 74% of HBCU-CFE internships were completed in local and community based organizations providing substance abuse treatment services; and
- Significant partnerships have been established and have provided new field practicum placement sites, long term relationships beyond the mini grant and employment opportunities for students participating in internships

Eligibility

All HBCU are eligible for a behavioral health mini grant. However, priority will be given to schools that have not received a mini-grant through the HBCU-CFE. Two-Year Colleges are strongly encouraged to apply.

Two application options to improve the alignment of the mini grant program with existing resources and services across the HBCU network are described below. Schools may apply for Option 1 or Option II.

Option I: Behavioral Health Service Capacity Expansion and Workforce Development

Projects in this category will promote behavioral health awareness, conduct behavioral health trainings, screenings/referrals and support student internships at behavioral health sites. Up to \$10,000 per school will be made available for twenty four schools to implement these projects.

Option II: Campus Specific Requests

Projects in this category will customize and implement the College Response Program to address campus specific behavioral health issues. Up to \$5,000 per school will be made available for sixteen schools to implement these projects. In addition to the College Response Program, schools may select from the following to augment their mini-grant project:

- **The DORA College Program (Depression OutReach Alliance).** This is a peer based mental health wellness and suicide prevention program. The program is meant to be administered to small groups of students by peer leader groups working in conjunction with clinical professionals on campus. Reference www.mentalhealthscreening.org for detailed information.
- **Screening and Brief Intervention (SBI) Tool Kit for College and University Campuses.** Screening and Brief Intervention is a comprehensive, integrated, public health approach to the delivery of early intervention to individuals at-risk for developing substance abuse disorders. The purpose of the SBI toolkit is to provide background information, materials, and resources to assist and encourage those who are interested in developing and implementing SBI services in their particular setting. Reference www.friendsdrivesober.org for detailed information.
- **Active Minds.** Develop and support a chapter of a student run mental health awareness education, and advocacy group on campus. The chapter would increase students' awareness of mental health issues, provide information and resources regarding mental health and mental illness, encourage students to seek help as soon as it is needed, and serve as a liaison between students and the campus' mental health community. Active minds aims to remove the stigma that surrounds mental health issues, and create a comfortable environment for an open conversation about mental health issues on campuses throughout North America. Reference www.activeminds.org for detailed information
- **Question, Persuade, Refer (QPR) Training on Suicide Prevention.** Three simple steps that anyone can learn to help save a life from suicide. People trained in QPR learn how to recognize the warning signs of a suicide crisis and how to question, persuade, and refer someone to help. Reference www.qprinstitute.com for detailed information.

Program Description

The HBCU-CFE Behavioral Health RFA provides an opportunity for HBCUs to participate in a unique “learning community” designed to develop leadership, promote best practices and stimulate interest in behavioral health careers. Through this effort, individual schools will receive assistance in promoting behavioral health as a keystone for a healthy campus, student retention and graduation.

The “mini grant” program will have a broader impact as the HBCU-CFE works to:

- Reinforce the infrastructure of the overall HBCU network to implement a public health approach to behavioral health promotion and the prevention of, referral to treatment, and recovery from behavioral health disorders;
- Facilitate workforce development through targeted technical assistance, establishing linkages between HBCUs and professional associations and other resources to support campus capacity expansion; and,
- Conduct evaluations to determine overall effectiveness and opportunities for promoting “best practices”.

Program Goals

The goals of the HBCU-CFE Mini-Grant program are to:

- Increase the use of behavioral health promotion and prevention activities on campuses;
- Expand screening and referral capacity for students at risk or displaying symptoms of a mental health and/or substance use disorder; and
- Promote behavioral health workforce development through exposure to evidence-based practices mentoring and field based experiences
- Work with HBCUs to provide students with course credit for participation in internships

Expected Outcomes

The HBCU mini grant program will result in:

- Increased awareness of the early signs of emotional distress and resources for early intervention
- Increased collaboration on behavioral health issues within and across universities and their supporting communities
- Enhanced or increased delivery of behavioral health screening and treatment services to HBCU students
- Increased behavioral health education and training programs on HBCU campuses
- An increased number of HBCU students interning in the behavioral health field
- Increased HBCU student exposure to career options in the behavioral health workforce
- Established and/or increased HBCU partnerships with local, regional and State entities committed to increasing diversity in the behavioral health workforce

Primary Activities for Option I

The behavioral health mini grants will be implemented in three phases of activity to facilitate project completion and achievement of expected outcomes:

- Phase I: Leadership Development/Strategic Planning/Team Building;
- Phase II: Implementation, Infrastructure and Capacity Building; and
- Phase III: Sustainability and Expansion.

Phase I: Leadership Development/Strategic Planning/Team Building

October – December, 2010

The purpose of this phase is to introduce student leadership development for project participants and ensure that projects include a team concept with student involvement. Efforts should ensure team members are clear about what they are to accomplish and how they intend to achieve it. During this phase, teams will work with the HBCU-CFE to develop a strategic plan and related outcomes for the project. This initial phase will also be an opportunity for teams to establish and/or increase HBCU partnerships with local, regional and State behavioral health partners committed to increasing workforce diversity.

Expected Outcomes: (Options I and II)

- Identification of student/s who will have major responsibilities for the mini grant implementation
- Identification of leadership development strategies that will be used to facilitate leadership skills for students and faculty/staff associated with the mini grant project
- Development of a strategic plan or logic model that includes primary goals/activities, anticipated outcomes, identifies potential collaborative partners and a timeline for the project's implementation
- Identification of national internship/fellowship options and application requirements (**Option 1 only**)

Phase II: Implementation, Infrastructure and Capacity Building and Scaling

January – June, 2011

The purpose of this phase is to initiate actions related to the strategic plan or logic model developed in Phase I. The HBCU-CFE will identify available resources, technical assistance opportunities and outcomes of similar projects to facilitate project implementation.

Mini-Grant funds may be used for stipends for students participating in local internships. No more than 10% of the Mini-Grant funding can go towards faculty administrative costs, which include responsibilities such as student and internship partner selection, monitoring and data collection. Although partner contributions and matching are not required, Mini-Grant applicants are encouraged to request contributions or match funding from partnering behavioral health agencies/providers.

Examples of behavioral health promotion activities include:

- Service activities focusing on anxiety, depression, drug and alcohol screening, prevention or disaster/trauma response interventions
- Developing and/or disseminating culturally relevant behavioral health promotion materials
- Partnering or coordinating with other behavioral health programs or providers to facilitate culturally competent evidence-based interventions and referrals when indicated
- Training front line staff, faculty, peer educators about early signs of emotional distress and substance use disorders
- Student Orientation activities that incorporate behavioral health promotion efforts
- Stigma reduction campaigns
- Identification of faculty lead who will serve as coordinator of the mini-grant
- Initiation of a process for selecting and preparing students for participating in an internship program

Examples of student internship/fellowship opportunities:

- Local, regional or State substance abuse treatment and/or mental health providers, including primary health care, criminal justice, state and local government settings.
- National internship/fellowship options may also be incorporated into the implementation plan for the mini grant. These internships/fellowships would most likely occur during the summer. National organizations that support internships/fellowships include, but are not limited to :
 - Minority Fellowship Program
 - Hispanic Association of Colleges & Universities (HACU)
 - National Association for Equal Opportunity in Higher Education (NAFEO)
 - Washington Internship for Native American Students (WINS) - The Washington Internships for Native Students (WINS) offers students of sovereign American Indian, Alaska Native, and Native Hawaiian (AI/AN/NH) nations the opportunity to build leadership skills while living, studying, and interning in Washington, DC.
 - Congressional Fellows
 - American Psychological Association

Special Populations

There is growing awareness of the increased number of veterans attending college and the related needs they present. The behavioral health pilot program can be structured to include support for them and other special populations on campus. Additional information on campus behavioral health programs for veterans can be found at the **JED Foundation PAS for Vets on Campus**, http://www.jedfoundation.org/press-room/press-releases/The_Jed_Foundation_and_mtvU_Premiere_New_Student_Veteran_PSAs

Types of Expected Outcomes: (Options I and II)

- Behavioral health promotion campaign plan, including date, key partners and expected impact
- Identification of potential behavioral health resources for student referrals
- Implementation of campus behavioral health screening program (**Option 1 only**)
- Implementation of internship opportunities with local businesses, government agencies, and community-based organizations (**Option 1 only**)

Phase III: Scaling and Sustainability

July – September, 2011

The purpose is tended to broaden the impact of the outcomes achieved in Phase II. The HBCU-CFE will work with each institution to transfer the knowledge gained to the broader network of HBCUs.

Types of Expected Outcomes: (Options I and II)

- Products for posting on the HBCU-CFE Web site
- Presentations at local and national conferences
- Commitment for continued implementation on campus

Funding:

The HBCU-CFE will offer up to a total of 40 behavioral health mini-grants in 2010-2011 depending on the scope of activities. For Option I, awardees will receive the funding in increments consistent with the phases of project activities. Initial funding will be provided to support start up activities after the sub-contract requirements are completed and signed. Subsequent funds will be provided on a reimbursement basis. For Option II, the HBCU-CFE will arrange for the purchase of tool kits or fees for training requests.

Application Guidelines:

Each HBCU partner will adhere to the following guidelines for Option I:

1. Submit a proposal outlining the behavioral health activity, service or project.
2. Provide a budget and budget justification for the activity, service or project as part of the proposal.
3. Establish a sub-contract for the project with Morehouse School of Medicine's HBCU-CFE if approved for funding.
4. Include a statement reflecting the partnership with HBCU-CFE on any materials, brochures or handouts developed as part of the funded project. The statement and grant number will be included in the Notice of Award to funded applicants. Major products require prior approval by the HBCU-CFE.
5. At the completion of the activity, provide a detailed progress and final report to the Project Director of the HBCU-CFE describing the process and outcomes of the activity, service or project and expenditures, along with copies of any materials developed for the project. If your application is funded, the HBCU-CFE will provide you with the guidelines and requirements for the reports in the Notice of Award.

Proposal Format:

- Provide a cover letter and evidence of Office of Sponsored Programs or Institutional approval
- Submit a proposal that is no more than five pages (the face page, budget and budget justification, letter(s) of partner commitment and work plan are not included in the count)
- **Include a detailed work plan** directly connected to each activity proposed in the project with a timeline for each benchmark. **The plan should also address the three project phases** for Option I
- Include a budget and budget justification (please see budget format **page 13** and budget justification and restrictions **page 14**).
- **Proposals will be scored based on the narrative sections.**

For Option II, applicants must provide a cover letter requesting funding for a specific item as outlined on page 3 along with a proposal not to exceed three pages which will include rationale, budget justification, expected outcomes, evaluation plan. Proposals will be scored based on the narrative sections.

Proposed Project Period:

All projects must be completed by September 15, 2011.

Proposal Deadline:

- The submission deadline is 5:00 pm Eastern Daylight Time (EDT) October 8, 2010.
- Applicants will receive notification on October 18, 2010.

Submit applications by mail to:

- 1) Gail A. Mattox, M.D., F.A.A.C.A.P.
Project Director, HBCU-CFE
Department of Psychiatry & Behavioral Sciences and the Cork Institute

Morehouse School of Medicine
720 Westview Drive, SW
Atlanta, Georgia 30310

- 2) **Email**
apply@hbcucfe.net
- 3) **Fax**
404-756-5245

For questions please contact Christine Livingston (HBCU-CFE Program Manager) toll-free at 1-866-988-4228 or clivingston@msm.edu, or visit the HBCU-CFE website at www.hbcucfe.net.

Technical Assistance

The HBCU-CFE will host webinars for interested applicants:

September 14, 2010	-	10:00 AM	-	Eastern Daylight Time
September 14, 2010	-	1:00 PM	-	Eastern Daylight Time
September 20, 2010	-	11:00 AM	-	Eastern Daylight Time
September 28, 2010	-	10:00 AM	-	Eastern Daylight Time
September 28, 2010	-	1:00 PM	-	Eastern Daylight Time

To access the webinars, go to: www.gotowebinar.com. The call number to listen to the webinars is 1-866-248-0559 Room *6151022* This information will be posted on the HBCU-CFE website at www.hbcucfe.net.



HBCU Center for Excellence
in Substance Abuse and Mental Health

HBCU-CFE
Behavioral Health Application

FACE PAGE

Institution:

Project Title:

**Project Director
Contact Information:**

Name:
Title:
Telephone: Fax:
Email:
Mailing Address:

**Sponsored Programs or
Other Business Office
Contact Information:**

Name:
Title:
Telephone: Fax:
Email:
Mailing Address:

**Student Leader
Contact Information:**

Name:
Telephone:
Email:
Mailing Address:

Submission Date:

**Name of Institutional
Signatory for Grants:**

Name:
Title:

HBCU-CFE
Mini-Grant Application and Scoring for Options 1 and II

Section A: Statement of Need

(20 points)

- Describe student behavioral health needs and the potential significance of the proposed project as a collaborative effort across departments and campus environment to address them.
- Discuss the capability and experience of the applicant organization and other participating organizations.
- Describe the participants for the Behavioral Health Pilot program and identify the role of students participating in the program.
- If applicable, discuss any existing activities or resources at your institution that might be expanded through the proposed project.
- Describe the resources currently available to address student behavioral health needs.
- Describe which SAMHSA priority(ies) your project will address (see page 2).

Section B: Proposed Approach

(35 Points)

- Clearly state the purpose, goals and objectives of your proposed project. Include the strategies/activities and outputs related to the program goals on page 4. **(Option 1 only)**
- Describe your proposed approach for leadership development and engaging students in all aspects of the project's implementation. **(Option 1 only)**
- Describe how achievement of the goals will produce meaningful and relevant results (e.g., increase access, availability, prevention, outreach, pre-services, treatment, and/or intervention) and support the HBCU CFE's goals for the program. **(Option 1 only)**
- Describe how the proposed project will be implemented, including the plan for supervising student interns. State the total number of students you propose to involve in the project and how they will be selected. Include a description of the process for selecting students to participate in the internship program. **(Option1 only)**
- Indicate the number of students and others you expect to benefit from the project.
- Explain how the project will coordinate with other programs, including Student Health Services, within the institution and, if applicable, how linkages with external partners will be established. Identify potential external partners, if known.

Section C: Proposed Staffing and Management Plan

(20 Points)

- Discuss the members of your project team, including students and the roles they are expected to have.
- Provide a timeline for your project and describe the potential barriers to successful implementation of the proposed project and how they will be overcome.

- Describe a sustainability plan to continue the project after the funding period ends. Also describe how program continuity will be maintained when there is a change in the institutional environment (e.g., staff turnover, change in project leadership) to ensure stability over time.

Section D: Evaluation Plan

(25 Points)

Complete the following section regarding your overall proposed behavioral health project (Option I and II):

- List and number each proposed goal that you expect to achieve as a result of the strategies/activities, outputs, and objectives listed (see section B).

Example of a Goal: #1 To provide Suicide Prevention Education and training for risk reduction behavior on HBCU campuses.

- Describe your plan for data collection and your ability to report on the required performance measures.
- For each goal numbered above, use the table below to list and number each corresponding objective, strategy/activity, and output for the proposed project, including a timeline for completion in the table below. Tracking methods that will be used to gauge progress towards reaching each objective must also be specified. Use the examples and definitions in the first row of the table to guide completion. Add additional rows, if necessary.

Corresponding Goal#	<u>Objectives</u> Specific statements about what is to be achieved, indicative of measurable, realistic and timely achievable outcomes	<u>Strategies/Activities</u> Actions or approaches designed to meet program goals and objectives	<u>Outputs</u> Direct products of program activities	<u>Tracking Methods</u> (List evaluation methods that will be used to measure <u>each</u> objective.
#1	50% increase in knowledge among all trained peer educators by August 2011	Provide training for peer educators to provide Suicide Prevention Education	Train 50 students to provide Suicide Prevention Education	50% increase in knowledge among trained peer educators will be measured using pre and post training surveys
1				
2				
3				

Complete the following section if your proposal includes campus/community behavioral health programs or activities (Option I and II):

- In addition to the project specific outputs you propose, all funded grantees will be required to **systematically track and report** the number of referrals to mental health treatment as a result of suicide screenings. **Please specifically describe the process you will use to track and document mental health referrals, if applicable.**
- The HBCU-CFE is required to monitor mental health efforts conducted through all of its initiatives, including it's Mini-grant Program. If you will be conducting any activities related to the areas included in Table below, please specify each AND associated tracking methods.

<i>If you plan to:</i>	<i>Include Tracking Methods for:</i>	<i>Tracking Method Examples:</i>
Conduct Mental Health Awareness Campaigns	Number of Individuals Exposed to Campaign	Survey
Programs (e.g. Mental Health Promotion Student Orientation activities)	Number of Individuals who Participate / Attend	Attendance sheets
Conduct Mental Health Promotion / Prevention Training (e.g. Peer Education Training, QPR, etc)	Number of Individuals trained and their classification (faculty/staff/student)	Attendance sheets
Improve Mental Health Promotion &/or Prevention Knowledge/ Attitudes/ Beliefs	Number of Individuals Demonstrating Improvement in Each Specified Area (clearly define improvement and how it will be measured)	15% increase in mental health promotion knowledge – measured with pre & post intervention surveys

Internship Evaluation/Performance Expectations

Complete the following section if your proposal includes student internships (Option I only):

- Describe your expectations for students who participate in internships and how you will assess their performance (do you have established policies and procedures on your campus for internships?).
- In addition to evaluation/performance expectations of students in internships, describe how you will track and report on: 1) the number of students who intern in the behavioral health field; 2) the number of students who receive course credit for participation in related internships; and 3) the impact of the experience.
- Describe the proposed measures to assess student and site satisfaction with the placement experience and the process for follow-up.

Section E: Budget

- Include a budget and budget justification (please see budget format page 13 and budget justification format page 1 for Option 1 format is not required for Option II)



HBCU Center for Excellence
in Substance Abuse and Mental Health

HBCU-CFE
Mini-Grant Application

SAMPLE
BUDGET PROPOSAL PAGE

Illustration of detailed worksheet for completing Mini-Grant Budget
Be sure to show in-kind support in your budget proposal and justification.

Object Class Categories

Personnel

Title	Name	Funds being requested	Percentage % of time
Project Director	_____	_____	_____
Admin. Assistant	_____	_____	_____
Fringe (if applicable)		_____	

Travel

Local travel (500 miles x .54 per mile) _____

Supplies

Office Supplies _____

Printing _____

Mental Health Materials (Brochures, Posters, etc.) _____

Contractual Costs

Evaluation

- Evaluator (if applicable) _____

Other Consultants (Not to exceed \$400 per day) _____

SUBTOTAL: _____

Indirect Costs (Not to exceed 8% of Total Direct Costs) _____

TOTAL: _____



HBCU Center for Excellence
in Substance Abuse and Mental Health

Behavioral Health Mini-Grants 2010-2011

SAMPLE

Narrative Budget Justification

Personnel – Describe the role and responsibilities of each position.

Fringe Benefits - List all components of the fringe benefit rate (if applicable).

Supplies – Generally self explanatory; however, if not, describe need. Include explanation of how the cost has been estimated.

Travel – Explain need for all travel.

Contractual Costs – Explain the need for each contractual arrangement and how these components relate to the overall project.

Consultant Fees – Cannot exceed \$400.00 per day. If consultants are included in this category, explain the need.

F & A (Indirect Costs) – If required by applicant institution. Cannot exceed 8% of Total Direct Costs.

***FUNDING RESTRICTIONS**

HBCU-CFE grant funds must be used for purposes supported by the program and may not be used for:

- Large equipment
- Food (i.e. meals, snacks) or food-related items (i.e. food equipment, utensils)
- Construction
- Other expenses not directly related to the program, with the exception of institutional indirect costs.