



Checklist for Agencies Choosing a Trauma-Informed Intervention or Practice as Part of a Grant Application

This checklist is intended for use by a child and family service agency when applying for a grant that will help support the selection, implementation, and sustainability-planning of a **trauma-specific intervention** or **practice**. During the development of a new grant application, this resource will support exploration and decision-making processes as the child and family service agency:

- Assesses its needs;
- Evaluates the fit of a new intervention/practice; and
- Identifies critical implementation considerations (budget, timeline, sustainability, etc.).

Examples of trauma-specific interventions:

- Child Parent Psychotherapy (CPP);
- Trauma-Focused Cognitive Behavioral Therapy (TF-CBT); and
- Child and Family Traumatic Stress Initiative.

Examples of trauma-informed practices:

- Child Welfare Trauma Training Toolkit (CWTTT);
- Think Trauma: A Training for Working with Justice Involved Youth; and
- The Road to Recovery: Supporting Children with Intellectual and Developmental Disabilities Who Have Experienced Trauma Toolkit (IDD Toolkit).

Online catalogs of additional trauma-specific interventions and trauma-informed practices can be found in the Resources for Finding Additional Information on Practices section in this checklist.

Citation

Walsh, C., Ake, G., Tise, N., Houston, F., & Olayinka, P. (2025). Checklist for choosing a trauma-informed intervention or practice as part of a grant application. National Center for Child Traumatic Stress: Los Angeles, CA & Durham, NC.

Acknowledgment: The authors of this brief would like to thank the members of the Implementation Advisory Committee (Brian Isakson, Byron Powell, Cambria Walsh, Cameo Stanick, Carmen Rosa Norona, Carrie Epstein, Ginny Sprang, Jason Lang, Lisa Conradi, Matt Kliethermes, Mellicent Blythe, and Monica Fitzgerald) for their guidance and valuable feedback.



Initial Exploration of Readiness for a New Practice and Clarification of Organization's Needs

CONSIDERATIONS	RELEVANT TOOLS AND ADDITIONAL GUIDANCE
Eligibility Determine whether the organization is eligible to apply for the grant.	Developing a Competitive SAMHSA Grant Application (pages 13-14) ¹ This document contains information to consider about eligibility for applying for the grant. It is important to identify that the grant will clearly fund what your agency is looking to do.
Organizational Readiness Determine whether the organization is in a position to implement a new practice at this time.	NC-CTP-Readiness-Assessment ² This tool is a Readiness Assessment designed to help an organization assess and improve its readiness to participate in a North Carolina Child Treatment Program (NC-CTP) Learning Collaborative. However, it can also be used to consider readiness to implement a new practice as part of a grant application. Organizational Readiness for Implementing Change (ORIC) ³ The ORIC is designed to measure how committed organizational members are to implement a change (change commitment) and their beliefs about their capabilities to implement the change (change efficacy). Evidence-Based Practice Attitude Scale (EBPAS) © 36 ⁴ The EBPAS (36-item version) assesses mental health provider attitudes toward adoption of innovation and evidence-based practices (EBPs) in mental health and social service settings.
Needs Assessment Talk with leadership, supervisors, staff, families, and youth to gain an understanding of current needs, access to clients, current funding gaps for existing services, and willingness to learn something new.	Developing a Competitive SAMHSA Grant Application (pages 10-12) ¹ This document contains information on how to do a needs assessment and ensures that you are reflecting on the needs of the community.
Identifying the Need Based on the discussion above and to narrow down possible practices, clarify the need that the intervention/practice will address. Consider what the organization might add to or expand on its menu of services to meet the need (expand ages served, add group intervention, serve a specific population/audience, etc.).	Identifying and Clarifying the Problem ⁵ This worksheet, from the California Evidence-Based Clearinghouse (CEBC) Implementation Guide , ⁶ provides a framework for defining the problem that an organization is seeking to address so that proposed solutions will be a good fit.* <i>*Note: The first question on page 2 (under the "Time Frame" category) can be ignored as it is specific to child welfare systems.</i>
Fit of Grant to Need Determine whether the grant application fits with the needs of the organization.	Review the grant application information and, before moving forward to the next step, ensure that the funding will fit with the identified need and that the agency is ready to proceed with completing the grant application.



Narrowing Down the Practices that Fit with the Identified Organizational Need

CONSIDERATIONS	RELEVANT TOOLS AND ADDITIONAL GUIDANCE
<p>Do a Deep Dive on Potential Practices Review practices while keeping in mind the population you plan on using the practice with, your organization's capacity, the theoretical orientation of your staff, and your agency's willingness to adhere to the fidelity requirements of models and the evidence-base for the practice.</p> <p>Outline questions for further investigation Develop questions that you need to better answer based on your deep dive before making a final selection.</p>	<p>Tools and Guides to Help with Narrowing Selection</p> <p>NIRN Hexagon Tool ⁷ The National Implementation Research Network (NIRN) Hexagon Tool assesses implementing site indicators* – along the domains of population need, fit, and capacity – to assess a new or existing program's or practice's alignment with the implementing site.</p> <p><i>*Note: Pay particular attention to the Implementing Site Indicators on page 5.</i></p> <p>Identifying Potential Solutions ⁸ This worksheet, from the California Evidence-Based Clearinghouse (CEBC) Implementation Guide,⁶ provides discussion prompts to help narrow down practices to consider.</p> <p>Selection Guide for EBPs ⁹ This Guide, from the California Evidence-Based Clearinghouse (CEBC), is meant to assist in discussions about the selection process by posing questions across several dimensions: ease of use, external compatibility, internal compatibility, match of skill set, observability of benefits, adaptability, risk, training/support, and trialability. It can be used in conjunction with a fillable CEBC Selection Guide Worksheet ¹⁰ to help organize discussions on different practices across domains.</p> <p style="text-align: center;"><i>While this was designed specifically for child welfare, the information is generalizable to other systems.</i></p> <p>Clinical Service Delivery Time Models ¹¹ Scroll to the section "Clinical Service Delivery Time Models" on this webpage. The North Carolina Child Treatment Program (NC CTP) developed several case-level time estimates that can be used to assist an agency in evaluating the cost to implement and sustain a new practice. The specific case-level time estimates available here are: 1) Child Parent Psychotherapy (CPP) ¹²; 2) Parent-Child Interaction Therapy (PCIT) ¹³; and 3) Trauma-Focused Cognitive Behavioral Therapy (TF-CBT).¹⁴</p>

**Resources for Finding Additional
Information on Practices****[The National Child Traumatic Stress Network \(NCTSN\) Intervention Fact Sheets](#)** ¹⁵

The NCTSN Intervention Fact Sheets offer key information related to some of the interventions developed and used by members of the NCTSN. Pay particular attention to the sections on Providing, Supervising, Training, and Sustaining the Intervention on page 5, as well as the Training Costs and Time Commitment at each of these levels of engagement with the Intervention on page 6.

[The California Evidence-Based Clearinghouse \(CEBC\) Program Registry](#) ¹⁶

The California Evidence-Based Clearinghouse for Child Welfare (CEBC) Program Registry provides information on both evidence-based and non-evidence-based child welfare related practices. Pay particular attention to the scientific rating, evidence-base, and information on implementation and training.

[Title IV-E Prevention Services Clearinghouse](#) ¹⁷

The Title IV-E Prevention Services Clearinghouse was established by the Administration for Children and Families (ACF) within the U.S. Department of Health and Human Services (HHS) to conduct an objective and transparent review of research on programs and services intended to provide enhanced support to children and families and prevent foster care placements. While investigating each practice, pay particular attention to: 1) Program or service rating (with ratings ranging from “Does Not Currently Meet Criteria” to “Well-Supported”); and 2) the section on “Program or Service Delivery and Implementation.”



Ensuring the Fit of Potential Practices

CONSIDERATIONS	RELEVANT TOOLS AND ADDITIONAL GUIDANCE
<p>Reach out to the potential practices Reach out to the contacts for the practices your agency is considering in order to understand each practice's fit and implementation process.</p> <p>Reach out to other agencies that have implemented those practices Consider reaching out to a similar agency that is already successfully implementing the practice to learn about their experiences. If you don't know of an agency then ask the practice contact if they can suggest one.</p>	<p>Working with Program Developers Key Questions ¹⁸ This tool, from the California Evidence-Based Clearinghouse (CEBC) Implementation Guide,⁶ contains guidance and useful questions to ask developers when trying to learn more about implementing a specific practice. In addition to the questions in this tool, it will be important to clarify the timeline and feasibility of receiving training during the grant period.</p> <p>Contacts for practices and interventions can be found on the:</p> <ul style="list-style-type: none">● NCTSN Intervention Fact Sheets;¹⁵● CEBC website;¹⁶ and● Title IV-E website.¹⁷



Developing a Realistic Timeline, Budget, and Resources for Implementation and Sustainability Considerations

CONSIDERATIONS	RELEVANT TOOLS AND ADDITIONAL GUIDANCE
<p>As you develop your budget and infrastructure, consider:</p> <p>What resources are needed for impacted staff who will do the work Examples could include: reduce caseload/billable hours for clinical staff; consider who will cover increased reporting requirements/data collection; consider if there will be increased trauma exposure, how staff will be supported.</p> <p>The logistical needs related to implementing the practice Will there need to be changes in referral practices, electronic medical record adaptations, etc.?</p> <p>Plans for sustainability How will the practice be continued once grant funding is no longer available, if staff who were trained turnover, etc.?</p> <p>What may need to be removed/de-implemented In order to create the resources and time to bring in a new practice?</p>	<p>Selecting a New Program or Service Planning Template ¹⁹ This template, developed by the Child and Family Evidence-Based Practice Consortium, can be used to determine how well a possible program or service fits within your current organization's capacities. This template also asks reflection questions on funding and logistics that should be considered during grant writing and planning for a new practice.</p> <p>Program De-implementation Checklist ²⁰ This comprehensive 34-item checklist, by the National Collaborating Centre for Methods and Tools (NCCMT), assists community-based organizations and behavioral healthcare providers in evaluating programs based on community need, financial sustainability, and performance outcomes. It serves as a practical guide for informed decision-making regarding program continuation or cessation.</p>



For Further Reading

Below are a few other resources (out of hundreds available in the implementation science literature) that could further assist your organization's efforts to choose a trauma-informed intervention or practice as part of a grant application.

Organizational Readiness

[Unpacking organizational readiness for change: an updated systematic review and content analysis of assessments](#) ²¹

Page 12 (Figure 3) of this article – Heat Map of Assessment Uses to CFIR – highlights 30 Assessments with each assessment's relevance to the Consolidated Framework for Implementation Research (CFIR) stages. The assessments labeled as “highly effective” for “Inner Setting” Readiness could also be useful in determining your agency's Organizational Readiness.

[Friction Report and Remedies Tool](#) ²²

This Tool is from the book *The Human Element: Overcoming the Resistance that Awaits New Ideas* (Schonthal, D., Nordgren, L. 2022). Based on the authors' findings that “removing friction is often more powerful than increasing fuel,” this Tool can help identify and uncover solutions to frictions impacting resistance to change within your agency.

De-Implementation

[Strategies for de-implementation of low-value care—a scoping review](#) ²³

A scoping review published in *Implementation Science* identifies and characterizes various frameworks and models applicable to de-implementation across disciplines such as healthcare, public health, and public policy. This resource is valuable for understanding the theoretical underpinnings and practical applications of de-implementation strategies.

[American Medical Association \(AMA\) – De-implementation Checklist](#) ²⁴

The AMA offers a checklist aimed at helping organizations identify and reduce low-value or burdensome clinical practices. This tool is particularly useful for healthcare systems seeking to streamline workflows and enhance physician well-being.

Sustainability

[Sustainment of Trauma Focused and Evidence Based Practices Following Learning Collaborative Implementation](#) ²⁵

Through analyzing cohorts of agencies trained in a trauma-specific intervention (pre-, post- and two years post-training), this article identifies organizational practices that correlated with the sustainment of the new intervention.

[Evaluate the Implementation Process](#) ²⁶

This website provides an overview of why and how to evaluate implementation initiatives. This resource additionally offers fillable worksheets that guide the user's decision-making on evaluation steps.



References

1. *Developing a Competitive SAMHSA Grant Application*. (2022).
<https://www.samhsa.gov/sites/default/files/developing-competitive-samhsa-grant-application-manual.pdf>
2. *NC CTP Readiness Assessment*. (n.d.). Retrieved June 22, 2025, from https://ncchildtreatmentprogram.org/wp-content/uploads/2024/11/NC-CTP-Readiness-Assessment_1-30-23-v3.pdf
3. Shea, C. M., Jacobs, S. R., Esserman, D. A., Bruce, K., & Weiner, B. J. (2014). Organizational readiness for implementing change: a psychometric assessment of a new measure. *Implementation science: IS*, 9, 7. <https://doi.org/10.1186/1748-5908-9-7>
4. Rye, M., Torres, E. M., Friberg, O., Skre, I., & Aarons, G. A. (2017). The Evidence-based Practice Attitude Scale-36 (EBPAS-36): a brief and pragmatic measure of attitudes to evidence-based practice validated in US and Norwegian samples. *Implementation science: IS*, 12(1), 44. <https://doi.org/10.1186/s13012-017-0573-0>
5. *Appendix E4: Identifying and Clarifying the Problem*. (n.d.). Retrieved June 22, 2025, from <https://www.cebc4cw.org/files/E4.pdf>
6. *CEBC» Implementing Programs » Guide*. (n.d.). www.cebc4cw.org. <https://www.cebc4cw.org/implementing-programs/guide/>
7. Metz, A. & Louison, L. (2018) *The Hexagon Tool: Exploring Context*. Chapel Hill, NC: National Implementation Research Network, Frank Porter Graham Child Development Institute, University of North Carolina at Chapel Hill. Based on Kiser, Zabel, Zachik, & Smith (2007) and Blase, Kiser & Van Dyke (2013) Retrieved June 22, 2025, from https://implementation.fpg.unc.edu/wp-content/uploads/NIRN-Hexagon-Discussion-Analysis-Tool_September2020_1.pdf
8. *Appendix E6: Identifying Potential Solutions*. (n.d.). Retrieved June 22, 2025, from <https://www.cebc4cw.org/files/E6.pdf>
9. *Appendix E7: CEBC Selection Guide for EBPs in Child Welfare*. (n.d.). Retrieved June 22, 2025, from <https://www.cebc4cw.org/files/E7.pdf>
10. *Appendix E8: Selection Guide Worksheet*. (n.d.). Retrieved June 22, 2025, from <https://www.cebc4cw.org/files/E8.pdf>
11. *Implementation Support*. (2025). [ncchildtreatmentprogram.org](https://ncchildtreatmentprogram.org/services/implementation-support/). <https://ncchildtreatmentprogram.org/services/implementation-support/>
12. *North Carolina Child Treatment Program (NC CTP) Evidence-Based Treatment (EBT) Service Delivery Time Model Series Clinical Service Delivery Time Model for Child-Parent Psychotherapy (CPP) Case-level Time Estimate CPP Time Model Tool*. (n.d.). Retrieved June 22, 2025, from https://ncchildtreatmentprogram.org/wp-content/uploads/2024/11/NC-CTP-CPP-Service-Delivery-Time-Model_version-05.09.22.pdf
13. *North Carolina Child Treatment Program (NC CTP) Evidence-Based Treatment (EBT) Service Delivery Time Model Series Clinical Service Delivery Time Model for Parent-Child Interaction Therapy (PCIT) Case-level Time Estimate*. (n.d.). Retrieved June 22, 2025, from https://ncchildtreatmentprogram.org/wp-content/uploads/2024/11/NC-CTP-PCIT-Service-Delivery-Time-Model_version-05.09.22.pdf
14. *North Carolina Child Treatment Program (NC CTP) Evidence-Based Treatment (EBT) Service Delivery Time Model Series Clinical Service Delivery Time Model for Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) Case-level Time Estimate TF-CBT Time Model Tool*. (n.d.). Retrieved June 22, 2025, from https://ncchildtreatmentprogram.org/wp-content/uploads/2024/11/NC-CTP-TFCBT-Service-Delivery-Time-Model_version-05.09.22.pdf



15. NCTSN. (2018, January 30). *Interventions*. The National Child Traumatic Stress Network. <https://www.nctsn.org/treatments-and-practices/trauma-treatments/interventions>
16. CEBC» Registry. (2019). Cebc4cw.org. <https://www.cebc4cw.org/registry/>
17. Home | Title IV-E Prevention Services Clearinghouse. (n.d.). [Preventionservices.acf.hhs.gov](https://preventionservices.acf.hhs.gov/). <https://preventionservices.acf.hhs.gov/>
18. Appendix E9: Working with Program Developers. (n.d.). Retrieved June 22, 2025, from <https://www.cebc4cw.org/files/E9.pdf>
19. *Selecting a new program or service: Assessing fit with current requirements and capacities*. (2025). Ebpconsortium.com. <https://ebpconsortium.com/wp-content/uploads/2020/10/final-blank-selecting-a-new-program-or-service-planning-template.docx>
20. *DO WE NEED TO DE-IMPLEMENT AN EXISTING PROGRAM?* (n.d.). Retrieved June 22, 2025, from <https://www.nccmt.ca/uploads/media/media/0001/01/2c1f56e09095ebcff18cb3648b3b9ade5a00abea.pdf>
21. Miake-Lye, I. M., Delevan, D. M., Ganz, D. A., Mittman, B. S., & Finley, E. P. (2020). *Unpacking organizational readiness for change: an updated systematic review and content analysis of assessments*. BMC Health Services Research, 20(1). <https://doi.org/10.1186/s12913-020-4926-z>
22. Tools | *The Human Element*. (2022). The Human Element. <https://www.humanelementbook.com/tools>
23. Ingvarsson, S., Hasson, H., von Thiele Schwarz, U., Nilsen, P., Powell, B. J., Lindberg, C., & Augustsson, H. (2022). *Strategies for de-implementation of low-value care - a scoping review*. Implementation Science, 17(1). <https://doi.org/10.1186/s13012-022-01247-y>
24. *De-implementation checklist Reduce note-bloat*. (n.d.). Retrieved June 22, 2025, from <https://www.ama-assn.org/system/files/ama-steps-forward-de-implementation-checklist.pdf>
25. Helseth, S. A., Peer, S. O., Are, F., Korell, A. M., Saunders, B. E., Schoenwald, S. K., Chapman, J. E., & Hanson, R. F. (2020). Sustainment of Trauma-Focused and Evidence-Based Practices Following Learning Collaborative Implementation. *Administration and Policy in Mental Health and Mental Health Services Research*, 47(4), 569–580. <https://doi.org/10.1007/s10488-020-01024-3>
26. *Evaluate the implementation Process*. (n.d.) Retrieved June 22, 2025, from <https://www.rand.org/pubs/tools/TL114/manual/step7.html>