

Warrior Resilience & Fitness Innovation Incubator New Pilot Proposal Template, Criteria, and Metrics (FY21): New Pilots not Funded in FY19/FY20

The Warrior Resilience & Fitness (WRF) Division is calling for proposals for FY21 WRF Innovation Incubator (WRFII). Please refer to the Warrior Resilience & Fitness Innovation Incubator FY21 Call for Proposals Memorandum for detail about the timeline, requirements, and submission process.

To submit proposal, email completed proposal template and all supporting documents to: ng.ncr.ngb-arng.mbx.ngb-j1-wrf@mail.mil

Please include Name of your pilot program and State in the subject line.

If you are unable to send to the email address above, e-mail your Proposal Template to WRFII@ida.org

The attached New Pilot Proposal Template, Criteria, and Metrics provides materials for new submissions of pilot programs (programs not funded by WRFII in FYs 19/20):

- [Section 1: Proposal Template](#)
- [Section 2: Evaluation Criteria](#) (for reference only, do not fill out)
- [Section 3: Sample Metrics](#) (for reference only, do not fill out)

Section 1: Proposal Template

Part 1: Background information

1) Contact information (list additional POCs, on [Continuation Page](#))

Name

E-mail address

Phone number

State(s)/Territory(ies)

2) With which branch of service are you affiliated? (other than ARNG/ANG, type in)

3) In which branch of service will you implement your proposed program?

4) What is the name of your program?

5) What are the core areas your program addresses?

(Select at maximum TWO - one primary area and one secondary area, if applicable)

Resiliency/life skills promotion

Suicide prevention and/or postvention

Sexual assault prevention and response

Behavioral health

Substance use disorder treatment/prevention

Financial/employment services

Enhancing relationships/connectedness

Physical health (physical fitness, medical/dental, nutritional)

Other: _____

Part 2: Program team

List the key personnel needed to administer and evaluate the proposed program and specify each of their roles. Please refer to Attachment 1 for a description of tasks required of all funding recipients.

Part 3: Program information [Evaluation criteria 1, 2, 3, and 4 – see Section 2]

Provide a detailed description of a current program/practice for which you seek additional assistance/funding or a new program or practice you wish to implement.

If additional space is required, use the [continuation page \(page 8\)](#).

Make every effort to provide concise answers that fit within the space provided.

- *Overview: Provide a brief "elevator pitch" for your program. Concisely describe (less than 50 words) your program and what makes it unique and important.*

- *Program Specifics: Describe i) the target population, ii) the specific resources, assistance, training, or other intervention provided, and iii) where the program is applied (e.g., once a year during drill, at armories during business hours).*

- *Objective: Describe the purpose and specific objectives of the program or practice – what is the problem that you are trying to address and/or the gaps you are trying to fill?*

- *Priority area(s): If applicable, describe any WRF priority area(s) your program addresses. Please refer to Attachment 1 for a description of WRF priority topics and methods.*

- *Suitable to target population: Explain how this program was developed or adapted for the intended population and NG culture.*

- *Novel: Explain why this program is innovative – what the unique/novel features of the program are and how it is distinct from existing DoD programs.*

- *Based on a requirement: Describe how the program fulfills the intent of a requirement specified in DoD or subordinate service-level regulation, policy or guidance documents.*

- *COVID-19: Describe how your program may be impacted by the ongoing pandemic; if applicable, describe any contingency plans developed.*

Part 4: Program funding and assistance [address evaluation criteria 5 – see Section 2]

- a. Have you coordinated this spend plan with your State Contracting Office/USPFO/Budget Analyst?
- b. Please list the name, position (i.e. Contracting, Budget Analyst) and email for the your Budget Point of Contact:
Name: _____ **Position:** _____ **Email:** _____
- c. *Spend plan: Provide the amount of funding requested from the WRFII by completing the Spend Plan Template.*

AR VSVP 2060 AF MILPER 3850	FUNDING REQUESTED (IDEAL)	FUNDING REQUESTED (MINIMUM)	PURPOSE:
Military P&A			
Military Travel			
Other:			
FY20 2060/3850 TOTAL	\$ IDEAL	\$ MINIMUM	NOTES:

AR VSVP 2065 AF O&M 3840	FUNDING REQUESTED (IDEAL)	FUNDING REQUESTED (MINIMUM)	PURPOSE:
Contracting Personnel and Services			
Contracting Items			
Marketing Items			
Civilian Travel Expenses			
Civilian P&A			
Other:			
FY20 2065/3840 TOTAL	\$ IDEAL	\$ MINIMUM	NOTES:

- *Other funding sources: List other funding sources you have requested and/or received to assist with meeting program needs (e.g., Yellow Ribbon, Family Programs).*
- *Non-financial support: Describe any non-financial areas for which you seek support (e.g., assistance securing research partnerships or contracting, program evaluation and analysis support, etc.).*
- *Feasible: Explain whether the program requirements (e.g., for additional staff, contractors, funding, or participation time) can reasonably be met on a long-term basis.*

Part 6: Evaluation plan [address evaluation criteria 7 – see Section 2]

Please describe how you plan to evaluate your program. Refer to [Section 3: Sample Metrics](#) for potential metrics of relevance. For guidance on program evaluation, refer to the RAND Suicide Prevention Program Evaluation Toolkit¹, and the Army's Ready and Resilient Initiative Evaluation Process Guide.²

- *Describe your notional outcome metrics: How do you plan to measure effectiveness in achieving your program objectives? (e.g., reduced suicidal behavior, improved attitudes about help-seeking, increased retention)*

- *Describe your notional process metrics: How do you plan to measure your program implementation and activities? (e.g., number of program participants, satisfaction)*

- *Robust evaluation plan: Describe your evaluation design:*

- i. *From whom will you collect data (e.g., program participants, program administrators, unit leadership, etc.)*

- ii. *What sources of data will you use (e.g., administrative data, create new surveys, existing survey)*

- iii. *At what time points will data be collected (e.g., before/after program, after program only)*

- iv. *Do you plan to collect data from a control group (i.e., participants randomly assigned not to receive your program) or a comparison group (i.e., individuals who did not participate but are similar to the participating group)?*

Note that a pre/post design that utilizes control groups is the most robust evaluation method.

¹ Acosta, J. D., Ramchand, R., Becker, A., Felton, A., & Kofner, A. (2013). RAND Suicide Prevention Program Evaluation Toolkit. Rand Corporation. <https://www.rand.org/pubs/tools/TL111.html>

² U.S. Army Health Promotion and Wellness Directorate. (2019). U.S. Army's Ready and Resilient Initiative Evaluation Process Guide. https://readyandresilient.army.mil/policydocs/IEP_Guide_Final_Jun_2019.pdf

Continuation Page: Clearly annotate the question for which additional information is being provided.

Section 2: Evaluation Criteria

Instructions: For Selection Board use only. Assess each program using the criteria below. Programs should have “Yes” or “Partial” responses for all the criteria to be considered for selection. Priority should be offered to programs with a higher number of “Yes”, relative to “Partial”, responses, while giving consideration to their fit with current WRF priorities.

Selection Board Initials:

1. ***Addresses WRF priority area:*** Does the program fit into one or more the WRF priority topics for 2021 AND one or more of the priority methods (i.e., multi-state pilots, joint pilots, and pre/post-test control or comparison groups designs)?

Yes

The program directly addresses one or more of the WRF priority topics AND one or more of the priority methods

Partial

The program directly addresses one or more of the WRF priority topics but does not address a priority method, OR

The program directly addresses one or more of the WRF priority methods but does not address a priority *topic*, OR

The program indirectly or partially addresses one or more of the WRF priority areas and/or methodological approaches

No

The program does not address any of the WRF priority topics or methods

Need more information

2. ***Suitable to target population:*** Is the proposed program both suitable for the intended population and culturally appropriate?

Yes

It was developed or adapted for military members, Veterans, or civilians in similar demographic groups, and is in line with National Guard (NG) culture and/or sub-cultures that are at higher risk (e.g., young Guard members, Guard members in rural locations).

Partial

It was developed for a general U.S. population and there is no perceived obstacle to its adaptation for the intended population and NG culture.

No

There are obstacles to its adaptation for the intended population and NG culture.

Need more information

3. **Novel:** Is the program unique/novel (not redundant with existing Department of Defense (DoD) programs)?

Yes

There are no other known DoD programs with the same goals, functions, and intended outcomes.

Partial

There are similar DoD programs, but the current program offers meaningful improvements (e.g., better tailored to the Guard, more efficient, fewer resources needed).

No

There are similar DoD programs that function well and the current program offers no meaningful improvement.

Need more information

4. **Based on a requirement:** Does the program fulfill the intent of a requirement specified in DoD or subordinate service-level regulation, policy, or guidance documents (e.g., National Defense Authorization Act (NDAA), Chief National Guard Bureau Instruction (CNGBI), Department of Veterans Affairs (VA)/DOD Clinical Practice Guidelines)?

Yes

The program directly fulfills the intent of a DoD requirement (e.g., requirement specifies programs of this exact type).

Partial

The program indirectly meets the intent of a DoD requirement (i.e., fulfills requirement when interpreted broadly).

No

The program does not relate to any specific requirement stated in law or policy.

Need more information

5. **Feasible:** Can the program requirements (e.g., for additional staff, contractors, funding, and participation time) reasonably be met on a long-term basis?

Yes

The requirements (e.g., for additional staff, contractors, funding, and participation time) can reasonably be met on a long-term basis (*preference given here to programs with existing funding mechanisms or research partnerships*).

Partial

The requirements (e.g., for additional staff, contractors, funding, and participation time) can reasonably be met in the short term, but not over time.

No

The requirements (e.g., for additional staff, contractors, funding, and participation time) cannot reasonably be met.

Need more information

6. **Effective:** Is there evidence of the proposed program's effectiveness (e.g., demonstrated positive change in relevant attitudes and/or behavior as measured before and after implementation)?

Yes

There is at least one study indicating effectiveness, and no study indicates that it is ineffective.

Partial

There is at least one study indicating effectiveness, but other studies indicate that it is ineffective, OR

It has not been evaluated for effectiveness, but it is research-informed and promising.

No

It has not been evaluated for effectiveness *and* is not research-informed, OR

It has been evaluated but studies have indicated that it is ineffective.

Need more information

7. **Robust Evaluation Plan:** Does the proposal clearly articulate plans for a reliable evaluation of the pilot (e.g., includes both process and outcome metrics; uses a pre-post tests and/or control/comparison groups; objectives are clearly defined and measurable; evaluation is feasible, timely, and well-described)?

Yes

The evaluation plan includes all necessary elements and a robust design.

Partial

The evaluation plan is lacking in some areas, but a robust evaluation will be possible with technical assistance.

No

The evaluation plan is lacking significant elements, and a robust evaluation is unlikely even with technical assistance.

Need more information

8. **Global assessment:** What is your overall assessment of this proposal?

Excellent: Outstanding proposal that should have the highest priority for support.

Good: High quality proposal that should be supported but may not be considered a priority.

Fair: Proposal has significant weaknesses that should be addressed before further consideration.

Poor: Proposal has critical flaws and should not be supported.

Need more information

9. **Recommended action:** What is your recommendation for this proposal?

Fund: Fund this proposal

Technical assistance: Provide technical assistance but no funding

No action

Section 3: Sample Metrics

This document compiles examples of process and outcome metrics from which submission teams can select to develop their evaluation plans. This is not an exhaustive list of measures and pilot teams can select measures not provided here.

PROCESS METRICS	
Metric	Description
Acceptability	Satisfaction with training/program/resources
Utilization	Participants trained, individuals referred for services, use of resources provided
Quality	Training implemented as intended (fidelity to protocol; meeting required items on implementation checklist)

INTERMEDIATE OUTCOME METRICS	
Metric	Description
Knowledge of training content	Information learned during training or awareness-raising efforts
Preparedness to help individuals at risk	Perceived preparedness to assist someone who is at risk
Likelihood to help individuals at risk	Intention to assist someone who is at risk, given an encounter with such an individual
Self-efficacy to help individuals at risk	Perceived capacity to assist someone who is at risk
Attitudes toward individuals with suicidal behavior	Unfavorable attitudes towards individuals who attempt, complete, or think about suicide
Attitudes toward suicide prevention (for clinicians)	Clinician's attitudes about the likelihood of preventing suicide
Awareness of NGB resources and services	Familiarity with various NGB resources and services
Perceived norms - help seeking	Belief about the social acceptability and perceived prevalence of help-seeking
Perceived stigma related to seeking mental health services	Belief that seeking mental health services is a mark of shame or discredit
Perceived barriers to mental health treatment	Perceptions that various factors impede access to mental health treatment
Help-seeking intentions	Plans or expected plans to seek support services
Help-seeking behavior	Support services sought
Bystander intervention	Actions taken to intervene in situations where sexual harassment and/or sexual assault may be occurring
Gender-related workplace culture and training	Perception of workplace environment that is protective against sexual harassment and assault

LONG-TERM OUTCOME METRICS	
Metric	Description
Connectedness	Sense of belonging or positive association with other people
Unit belonging	Sense of belonging to or affinity with the unit
Unit conflict	Sense of incompatibility with the unit
Perceived social support	Belief that an individual is cared for and has support from other people
Trust in leadership	Comfort sharing personal problems with leadership and confidence in leadership's response
Health-related quality of life	Quality of physical, mental, emotional, and social functioning
Perceived stress	Feeling of being under stress in a defined time period
Life satisfaction	Feeling that things overall are going well in life
Military satisfaction	Positive or negative evaluations of various aspects of the military experience
Financial well-being	Feeling a sense of financial security
Social determinants of health	Economic and social conditions that influence an individual's health outcomes
Resilience	Individual ability to overcome or recover from difficulties
Hopelessness	A lack of hope, optimism, or expectation of future improvement or success
Intention to stay in the National Guard	Plans to remain in the National Guard
Hazardous alcohol use	Frequency and quantity of an individual's alcohol consumption
Sexual harassment risk within organization	An individual's experience of behaviors that constitute sexual harassment
Self-harm and suicidal behavior	Engagement in self-injurious behavior or attempted suicide in a defined time frame
Retention	Retention of National Guard members
Employment	Full and part-time employment of National Guard members
Disciplinary actions	Disciplinary actions taken against National Guard members
Deployability	National Guard members medically ready to deploy