



**State Opioid Response (SOR) Grant**

**Application Package for  
Recovery Community Organization Services**

**Overview**

**Project Summary**

The South Carolina Department of Alcohol and Other Drug Abuse Services (DAODAS) State Opioid Response (SOR) Grant will provide up to $500,000.00 to fund single-year sub-awards to approximately five Recovery Community Organizations (RCOs) that serve South Carolina communities. Three levels of funding are available. The purpose of the sub-awards is to support implementation and continuance of recovery-based initiatives and programs in an effort to prevent opioid and stimulant misuse, and to reduce the consequences of opioid and stimulant misuse in South Carolina.

Strategies may be implemented for the general population, or may be implemented for targeted populations. The planned sub-award period is **January 29, 2020, through December 31, 2021**. The total number of anticipated sub-awards for each available funding level is listed below.

* **Level 1 (New Programs):** $90,000.00
* **Level 2 (Emerging Programs):** $75,000.00
* **Level 3 (Existing Programs):** $65,000.00

**Description of Sub-grantee Levels**

In order to meet the differing needs of new, emerging, and established RCOs, the required activities will reflect specific tasks for each level. For the purposes of clarity, ***New programs*** shall be defined as any applicant not having provided any RCO services to date. ***Emerging programs*** shall be defined as having 5 or less years of professional recovery services provision. ***Established programs*** shall be defined as having 5 or more years of professional recovery services provision. The required activities for new, emerging, and established RCOs are listed below in the “Pre-Approved Strategy List” section.

**Funding Source**

The funding source is the Substance Abuse and Mental Health Services Administration. The State Opioid Response (SOR) grant is administered by the South Carolina Department of Alcohol and Drug Abuse Services. The CFDA number is 93.788.

**Eligibility for Funding**

All RCOs based in South Carolina are eligible to apply for funding. Any questions concerning eligibility can be submitted to the e-mail address provided under “Question Period.” DAODAS will respond to ensure that your organization is eligible prior to submitting the application.

**Question Period**

Prospective applicants can propose any question(s) to DAODAS between **November 23, 2020 and December 04, 2020,** concerning the application requirements. The question(s) should be e-mailed to [gjacobs@daodas.sc.gov](file:///C:\Users\LaptopUser\Downloads\gjacobs@daodas.sc.gov). A complete summary of all questions and answers received by **close of business (5:00 p.m.) December 04, 2020** will be posted on the DAODAS website ([www.daodas.sc.gov](http://www.daodas.sc.gov)) no later than **close of business (5:00 p.m.) on** **December 08, 2020.**

**Due Date**

Applications are due to DAODAS *(see submission instructions on Page 17)* **by close of business (5:00 p.m.) on December 30, 2020**. No late applications will be accepted. Late applications are those that arrive via e-mail any time **after 5:00 p.m. on December 30, 2020.**

**Review Process**

Applications will be reviewed and scored using the following criteria:

* Technical Proposal (25 points)
* Qualifications and Experience (15 points)
* Budget (10 points)

**Scoring Criteria**

Technical Proposal (25 points)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Outstanding** | **Very Good** | **Good** | **Marginal** | **Poor** |
| 25-20 | 19-15 | 14-10 | 9-5 | 4-0 |

Qualifications and Experience (15 points)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Outstanding** | **Very Good** | **Good** | **Marginal** | **Poor** |
| 15-12 | 11-9 | 8-6 | 5-3 | 2-0 |

Budget (10 points)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Outstanding** | **Very Good** | **Good** | **Marginal** | **Poor** |
| 10-9 | 8-7 | 6-5 | 4-3 | 2-0 |

**Descriptors for Scoring Criteria**

**Outstanding:** The applicant organization explicitly addresses the criteria by providing comprehensive descriptions and thorough details. Relevant examples and data are included to support the information presented. The applicant organization demonstrates a strong and informed understanding of the topic, and the level of detail provided reinforces each response. The applicant organization effectively describes how the project will be implemented.

**Very Good:** The applicant organization provides significant descriptions and relevant and related detail in addressing the criteria, but the response is not entirely comprehensive. The applicant organization demonstrates a sound understanding of the topic and includes pertinent examples. It is possible to distinguish what makes the response better than “Good,” but not up to the standard of “Outstanding.”

**Good:** The applicant organization provides a basic response to the criteria. The applicant organization does not include significant detail or pertinent information. Key details and examples are limited. The applicant organization minimally translates the requirement of the application into practice.

**Marginal:** The applicant organization provides insufficient information, details, and/or descriptions that do not completely answer the criteria. The applicant may have answered part of the criteria but missed a key point and/or there are major gaps in the information presented.

**Poor:** The applicant organization does not address the criteria. The applicant organization states the question but does not elaborate on the response. The applicant merely repeats information included in the application. The applicant organization skips or otherwise ignores the criteria or includes irrelevant information that does not meet the criteria elements.

*\*Information adapted from the Centers for Disease Control and Prevention (CDC)   
Application Field Review Process for NOFOs #CE20-2002 and CE20-2003*

**Notification of Awards**

Final awards will be posted on DAODAS website homepage ([www.daodas.sc.gov](http://www.daodas.sc.gov)) on or before **January 29, 2021.** **All posted awards are considered final.** All non-funded applicants will receive a summary report with evaluative comments for the submitted application no later than January 29, 2021.

**Application Requirements**

All applications must meet the requirements listed below.

| **Requirements** | **Description** |
| --- | --- |
| Submit an application that addresses the need for recovery-based services/programs. The application must be submitted by the due date and time stated in the “Due Date” section on Page 2. | * Submit an application to:  1. promote and deliver recovery-oriented services (peer support, recovery groups, treatment referrals, sober housing referrals, etc.) to help reduce the misuse of opioids and/or stimulants; *and/or* 2. develop recovery-oriented program(s) (recovery club, recovery center, etc.) designed to promote holistic health and social well-being of individuals from multiple pathways of recovery.  * Examples of **opioid** drugs are: Vicodin, oxycodone, codeine, morphine, heroin, fentanyl, etc. * Examples of **stimulant** drugs are: Adderall, Ritalin, Didrex, cocaine, methamphetamine, etc. |
| Complete each required document and then **submit the documents as a single PDF** to the  e-mail address provided on Page 17. | * Complete an Application Cover Letter to indicate your organization’s intent to apply for a sub-grant award. * Complete the Application Information section as requested, to share important contact information, other details about your organization, and the desired funding award amount. * Complete the Technical Proposal and include the required content. * Complete the Qualifications and Experience section and include the required content. * Complete the Budget, using the template provided, and include the required content. |
| Adhere to the maximum page lengths where indicated. | * The Technical Proposal must be no longer than eight pages, the Qualifications and Experience section must be no longer than four pages, and the Budget must be no longer than four pages. |
| Use the Pre-Approved Strategy List (Pages 6-11) to identify strategies and actions required according to the specific level. | * The Pre-Approved Strategy List also includes a list of items for which funds can be used to support implementation of sub-awards. Required purchases per strategy are printed in bold. Please ensure that required purchases for any strategies selected are clearly included in the Budget. |

**State Opioid Response (SOR) Grant Application Package for Recovery Community Organizations**

**Pre-Approved Strategy List**

# Data and Needs Assessment Strategies

| **Funding Level** | **Types of Strategies** | **Intended Audience** | **Allowable Uses of Funds** |
| --- | --- | --- | --- |
| All | * Scanning/mapping of recovery-related resources available in the community * Identifying and mapping local detention centers, hospitals, doctor’s offices, and treatment providers that have access to potential candidates for recovery | Internal | * Mileage reimbursement * Electronic devices such as laptops and tablets * Office supplies, gloves, masks, hand sanitizer * Cost for personnel or contractual staff to complete community scans and mapping * Non-cash incentives for volunteers |
| All | * Developing, maintaining, and disseminating paper and electronic copies of a recovery resource guide | Internal | * Cost of licensing fees for software * Cost for personnel or contractual staff to take current data and create a resource guide * Creation of printed materials to disseminate to partner agencies and/or the general public |

# Recovery-Oriented Strategies

| **Funding Level** | **Types of Strategies** | **Intended Audience** | **Allowable Uses of Funds** |
| --- | --- | --- | --- |
| Level  1, 2  Level  1, 2  Level  1, 2,3 | * Developing a plan for becoming a community distributor of Narcan® * Engaging with local stakeholders to remove all barriers to access for persons seeking recovery from opioid and stimulant use disorders * Establishing and documenting relationships with multiple recovery resources within the broader community. Providing a quarterly report summarizing these relationships | General Population  General Population (including detention centers, emergency rooms, treatment providers, faith-based groups, etc.).  Recovery Service Providers | * This grant does not provide funding for Narcan® distribution; however, DAODAS may have other resources available to assist with this strategy. * Please send questions regarding Narcan® distribution to community.distribution@daodas.sc.gov. * Open house events to create and maintain familiarity within the community * Establishing and maintaining regularly scheduled meetings with other recovery service providers/organizations * Recognition activities for community partners * Advertising/promoting recovery-related events |
| Level  1, 2,3 | * Developing strategic plans (see “Deliverables” on Page 14) based on ROSC values, operational elements, and principles *(see attached “ROSC Resource Guide”)* | Internal | * Consultant fees to assist with development and implementation of strategic plan |
| Level  1, 2 | * Providing services delivered by Certified Peer Support Specialists (CPSSs) and Recovery Coaches (RCs) * Providing a monthly report accounting for the number of individual and group attendees of recovery-related services, to include attendance rates and new member rates | General Population | * Non-cash incentives for program participants with perfect attendance (less than $10.00 in value) * Resources to maintain the meeting/work spaces, such as gloves, masks, hand sanitizer, etc. |
| Level  1, 2  Level  1, 2 | * Developing and/or refining an approach to family-oriented recovery services that include education and support groups for family members affected by opioid/stimulant use disorders * Providing referrals to recovery housing when possible, with CPSS services onsite * Providing a monthly summary of the number of referrals | General Population  Recovery Service Providers |  |

# Education, Health, and Awareness Strategies

| **Funding Level** | **Types of Strategies** | **Intended Audience** | **Allowable Uses of Funds** |
| --- | --- | --- | --- |
| Level  1, 2, 3  Level  1, 2, 3 | Developing and maintaining a comprehensive job-readiness training program, to include job search assistance, résumé writing, etc. (The provider must also develop and maintain a recovery-friendly employer referral list.)  Providing a mutual aid group or supportive model of group work for individuals recovering from opioid use disorder (e.g., Opiates Anonymous) that is inclusive and non-discriminating of individuals engaged in medication-assisted treatment for opioid use disorder | Persons in Active Recovery  Persons in Recovery from Opioid Use Disorder | * Costs related to consultant fees * Costs to purchase curriculum materials for trainers and participants * Computers and software licensing fees * Contractual costs for room rental fees (if applicable) * Subscription fees for virtual meeting software * Contractual costs for room rental fees (if applicable) * Subscription fees for virtual meeting software |
| Level  1, 2, 3 | Providing a recovery-oriented and holistic wellness-based community space for gathering, socializing, and practicing multiple pathways of recovery | General Public (to include youth and family members of persons in recovery) | * Educational print materials on multiple pathways * Subscription fees for virtual meeting software * Contractual costs for room rental fees (if applicable) * Development of promotional materials and their dissemination on social media and other information-sharing platforms |
| Level  1, 2, 3 | Providing access to resources and technologies to assist community members with development of recovery-related life skills and psychosocial stabilization | Persons in Active Recovery | * Costs to purchase curriculum materials for trainers and students * Office supplies (if applicable) * Non-cash attendance incentives for participants (not to exceed $10.00 in monetary value) |
| Level  1,2,3  Level  1,2, 3 | Attend mandatory Bi-Monthly RCO learning collaborative to include such topics as Business Mgmt., Marketing, Program Development, Diversity/Inclusion Practices, Holistic Wellness in Recovery, MAT-based Recovery, Advocacy, etc.  Increasing community member participation, engagement, and momentum for the Recovery Community Organization and its programs. | Internal  General Population | * Travel expenses related to training attendance * Print/electronic materials and travel to and from speaking engagements to promote and advocate recovery |
| Level  1,2, 3 | Providing examples of methods for measuring and demonstrating efficacy and efficiency of recovery-support services and the Recovery Community Organization over time | Internal | * Administrative costs |

# Additional Required Strategies for Emerging and Existing Recovery Community Organizations

|  |  |  |  |
| --- | --- | --- | --- |
| **Funding Level** | **Types of Strategies** | **Intended Audience** | **Allowable Uses of Funds** |
| Level  2, 3 | Providing and/or facilitating professional development for organization personnel (staff/volunteers), including CPSS supervision, administrative, and management training | Internal | * Costs to purchase curriculum materials for trainers and students * Print and electronic materials required for training |
| Level 3  Level 3  Level 3 | Creating meaningful and sustainable leadership opportunities for engaged community members to promote advocacy at the local, state, and federal levels  Developing sustainability plans, to include fundraising plans, cultivation of prospects, building lasting relationships, developing a funding database, grant writing, and event planning  Providing and/or facilitating scholarships and financial assistance for community members seeking paid services (i.e., housing, skills, education, and treatment) | General Population  Internal  Program Participants | * Consultant fees to assist with development and implementation of strategic plan |

# Community Events Strategies

|  |  |  |  |
| --- | --- | --- | --- |
| **Funding Level** | **Types of Strategies** | **Intended Audience** | **Allowable Uses of Funds** |
| Level  1,2,3 | Hosting recovery-related “town hall” meetings/community forums (can be held virtually) | General Population, Persons in Recovery | * Promotion of the event * Supplies/materials to host event * Room rental, speaker fees, etc. * Masks, gloves, hand sanitizer * **Funds from other DAODAS grants may not be used to fund the events.** |
| Level  1,2,3 | Hosting recovery community social events and gatherings that promote healthy family and social bonding among members of the recovery community and the community at large in safe spaces (can be held virtually) | General Population, Persons in Recovery | * Promotion of the event * Supplies/materials to host event * Room rental, speaker fees, etc. * Masks, gloves, hand sanitizer * **Funds from other DAODAS grants may not be used to fund the events.** |

**Performance**

**Program Goals**

1. To address opioid and stimulant use, misuse, and commonly co-occurring disorders by providing enhanced recovery support services.
2. To connect recovery community organization (RCO) members/participants and helping professionals to resources and facilitate community solidarity and continuity of evidence-based care for the chronic illness management of opioid and stimulant use disorders and commonly co-occurring conditions.
3. To complete GPRA intakes for all individuals seeking recovery from opioid and stimulant use disorders. The RCO will complete a GPRA intake on all such individuals that captures all required information. RCOs are required to ensure that all such data reported to the Substance Abuse and Mental Health Services Administration (SAMHSA) are accurate.
4. To gather this information using the South Carolina Grants Data System as stipulated by DAODAS. Data will be collected via face-to-face interview using this tool at three data collection points:
5. intake to services;
6. six months post-intake; and
7. time of completion and/or discharge from services.
8. To complete a GPRA intake interview on all individuals (100%) in their specified unduplicated target number and to achieve a six-month follow-up rate of 100%.
9. To name two volunteer community stakeholders as Recovery Community Allies and to educate and coordinate these allies to broaden public awareness and support for persons recovering from substance use disorders in collaboration with the RCO and DAODAS. Examples of Recovery Community Allies are hospital programs, law enforcement, educational institutions, local business leaders, treatment providers, recovery-oriented advocacy groups, and non-profit social benefit organizations.

**Desired Results (Performance Outcomes)**

1. Increase access to and engagement with recovery support services and reduce opioid overdose deaths and emergency room visits resulting from opioid use or abuse.
2. Increase by 25% the number of Certified Peer Support Specialists (CPSSs) and Recovery Coaches (RCs) employed by RCOs, county alcohol and drug abuse authorities, and other providers in a region.
3. Increase by 50% engagement in general recovery community services (e.g., All Recovery meetings, open house events, rallies, fundraisers).
4. Increase by 25% engagement in general family recovery services.
5. Increase by 25% engagement in individual recovery support services with CPSSs/RCs (e.g., coaching session, family consult).
6. Review and evaluate client waiting time for services, engagement, and communication. Develop a process-improvement model, as needed, to include:
7. Reduction of waiting time between first request for service and first recovery service session.
8. Reduction of non-engagement by increasing the number of community members who keep an appointment.
9. Transformation of evolving communications into formal contacts and successful social networks.
10. Maintain/increase engagement from the first through the 10th recovery service session within three months after start of recovery support services, to include engagement with physical and behavioral health providers as needed. Improve community members’ comorbidity outcomes.

**Deliverables**

1. The sub-grantee’s Point of Contact must submit monthly progress reports to the DAODAS Project Director that contain the following information:
   1. number of unduplicated community members served monthly;
   2. number of unduplicated recovery “service encounters” by community members served monthly;
   3. number of individual recovery coaching sessions provided monthly;
   4. number of general recovery group sessions facilitated monthly;
   5. number of community members who attended these general recovery groups monthly;
   6. number of family-oriented recovery group sessions facilitated monthly;
   7. number of family members who attended family-oriented recovery groups monthly;
   8. number of opiate-oriented recovery group sessions facilitated monthly;
   9. number of individuals who attended opiate-oriented recovery groups monthly;
   10. number of other type of recovery group sessions facilitated monthly; and
   11. number of community members who attended other type of recovery group sessions monthly.
2. The sub-grantee must submit a quarterly report to the DAODAS Project Director that will contain the names and details summarizing new relationships developed in the broader community during the quarter.
3. Sub-grantee must prioritize and develop a strategic and sustainable plan for the future. A sustainability plan is an evolving part of this process. Successful applicants will consider strategies for success that incorporate a detailed sustainability plan, including:
   1. draft document with a timeline for implementing the proposed approach at three months;
   2. revisions at the mid-point mark; and
   3. final version one month prior to project end date.

**Contract Period**

Contracts for funded applicants will be issued by DAODAS on **or about January 29, 2021.** The funds will be reimbursed on a monthly basis, contingent upon meeting the reporting requirements outlined on Page 15.  **Final budget reimbursement requests must be made no later than February 17, 2022. All services must be rendered and all goods purchased must be received by this date.**

**Reporting Requirements**

# Sub-grantee will submit all grant activity information as directed by DAODAS through web-based reporting. Deliverables will be due the 5th working day of the month for all services and activities implemented the previous month. Monthly finance and program implementation data will be required to be reported. Accurate reporting of this data will be required for reimbursement requests to be processed by DAODAS.

**Financial Guidelines**

Funds will be available on a reimbursement basis upon submission of monthly deliverables to DAODAS. Agencies are welcome to supplement the federal funding with other appropriate agency funds. DAODAS will conduct quarterly reviews of budget spending. If the budget is not spent in a timely manner, funds could be reduced up to 10%.

## Defining “Supplement” and “Supplant”

“Supplement” means to “build upon” or “add to”; “supplant” means to “replace” or “take the place of.” Federal law prohibits recipients of federal funds from replacing state, local, or agency funds with federal funds. Existing funds for a project and its activities **may not** be displaced by federal funds and reallocated for other organizational expenses. This is illegal. On the other hand, federal agencies encourage supplementing (i.e., adding federal funds to what is available through state, local, or agency funds).

**Unallowable Expenditures**

SAMHSA grant funds may not be used to:

* Pay for promotional items, including, but not limited to, clothing and commemorative items such as pens, mugs/cups, folders/folios, lanyards, and conference bags, purchased solely for the purposes of marketing your organization or for general prevention messaging. All materials purchased must be linked directly to selected strategies.
* Make direct payments to individuals to enter treatment or continue to participate in prevention or treatment services.

***Note: A recipient may provide up to $30.00 in non-cash incentives to individuals to participate in required data collection follow-up. This amount may be paid for participation in each required follow-up interview.***

* Pay for meals, which are generally unallowable unless they are an integral part of an education strategy, such as the Strengthening Families program. Grant funds may be used for light snacks, not to exceed $3.00 per person per day.
* Purchase equipment items costing more than $5,000 per unit, often with a useful life of more than one year.

**Difference Between Contracts and Consultants**

* **Contracts** are a legal instrument by which the grant recipient purchases goods and services needed to carry out the project or program under a federal award. Contracts include vendors (dealer, distributor, or other seller) that provide, for example, supplies, expendable materials, or data processing services in support of the project activities. The sub-grant recipient must have established written procurement policies and procedures that are consistently applied.
* **Consultants** are individuals retained to provide professional advice or services for a fee. Travel for consultants and contractors should be shown in this category, along with consultant/contractor fees.

**Submission Information**

**What to Submit**

Applicants must submit the following documents – attached as a single PDF file – via e-mail to [daodasapplication@daodas.sc.gov](mailto:daodasapplication@daodas.sc.gov):

* Application Cover Letter
* Applicant Information
* Technical Proposal
* Qualifications and Experience
* Budget

Text must be legible. Pages must be typed in black, single-spaced, and using a font of Times New Roman 12, with all margins (left, right, top, bottom) at least one inch each.

Applicants may use Times New Roman 10 for charts and tables *only*.

**Application Package for Submission**

**Applicant Information**

**Organization Name:** Click or tap here to enter text.

**Organization Mailing Address:** Click or tap here to enter text.

**Organization Type:** Choose an item.

**Application Contact:** Click or tap here to enter text.

**Application Contact E-mail Address:** Click or tap here to enter text.

**Application Contact Phone Number:** Click or tap here to enter text.

**Amount of Application:** Choose an item.

**Technical Proposal (maximum of 8 pages)**

**To include the following information:**

| **Technical Proposal Sections** | **Required Content** |
| --- | --- |
| 1. **Statement of Need** | * Information that documents the impact of opioids and stimulants within the proposed service area. Include qualitative and quantitative data. Identify the source of all data. (Data can be placed in tables/charts with explanations to follow.) * Clearly identified geographic area and/or communities that the strategies/recovery-based initiatives will impact, including the population of the proposed service area. * Any specific challenges motivating the applicant’s interest in applying for this grant. * Gaps in recovery-related services that will be addressed with the funding. * Description of other efforts (either provided by your organization or others in the community) and explanation of how this effort will not be duplicative. * Explanation of the inability to fund the proposed program without federal assistance and description of any existing funding or resources that are being leveraged to support the proposed program. |
| 1. **Plan to Implement Selected Strategy/Strategies** | * Measurable SMART goals and objectives *(See Attachment 1 for more information on writing SMART goals and objectives.)* * The pre-approved recovery-based initiatives/strategies that will be implemented *(a minimum of three initiatives/strategies must be selected)*, and a description of how the identified initiatives/strategies will be implemented and how they will address the need identified through data in the “Statement of Need” section. * Month-by-month timeline for strategy implementation, to include the following: * Key activities that will be implemented per strategy by month * Responsible party per key activity   *(Please present the monthly timeline as a Gantt chart, a table, or in another format that can be viewed at a glance.)*   * Description of any potential barriers to implementation and how you plan to overcome the barriers. |
| 1. **Data Collection and Reporting Plan** | * Description of the following: * Who will be responsible for collecting the required data * How the data will be collected * How the data will be reported to DAODAS * Description of how the SMART goals and objectives will be monitored and measured to achieve strategy implementation and address the overall need(s) identified. |

**Qualifications and Experience (maximum of 4 pages)**

**Include the following information:**

|  |  |
| --- | --- |
| **Qualifications and Experience Sections** | **Required Content** |
| 1. **Capacity and Competencies** | * Description of the organization’s structure and staffing/volunteer plan for strategy implementation. * Key person or people responsible for implementation of the strategies. * Description of the experience your organization has with similar projects and providing services to the population(s) of focus for this application. * Any other organization(s) that will partner in the proposed project and the role the partners will play to ensure successful strategy implementation. * Discussion of any previous collaboration that will help to achieve the objectives. * Explanation of existing partnership agreements, to include formal or informal agreements. * Training plan or information that demonstrates that all relevant project staff and partners currently have or will acquire the required training for successful implementation of the selected strategies *(if applicable)*. |

**Budget/Budget Narrative (maximum of 4 pages)**

Submit a budget that is complete, cost effective, and allowable (e.g., reasonable, allocable, and necessary for project activities). The budget narrative should generally demonstrate how the applicant will maximize cost effectiveness of grant expenditures. The budget narrative should demonstrate cost effectiveness in relation to potential alternatives and the objectives of the project.

You must provide a narrative justification for the items included in your proposed budget, as well as a description of existing resources and other support you expect to receive for the proposed project. “Other support” is defined as funds or resources, whether federal, non-federal, or institutional, in direct support of activities through fellowships, gifts, prizes, in-kind contributions, or non-federal means. (This should correspond to Item #18 on your SF-424, Estimated Funding.) Other sources of funds may be used for unallowable costs (e.g., meals, sporting events, entertainment).

See sample budget and budget narrative in Attachment 2 for additional information.

**Include the following information:**

* Organization name
* Total amount requested
* Overall requested amount by category for travel, supplies/materials, contractual services, “other,” and administrative costs.  
  **NOTE:** Administrative costs cannot exceed more than 5% of the total award.
* Narrative/justification for each item, to include a breakdown of costs to demonstrate the calculations for each item

**Attachment 1 – SMART Goals and Objectives**

To be able to effectively evaluate your project, it is critical that you develop realistic goals and measurable objectives. This attachment provides information on developing goals and objectives. It also provides examples of well-written goals and measurable objectives.

**GOALS**

**Definition −** A goal is a broad statement about the long-term expectation of what should happen as a result of your program (i.e., 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 be only 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 that is expected to change.
* Goals describe who will be affected by the project.
* Goals lead clearly to one or more measurable results.
* Goals are concise.

**Examples**

|  |  |  |
| --- | --- | --- |
| **Unclear Goal** | **Critique** | **Improved Goal** |
| Increase the number of recovery-based participants in a designated area. | This goal could be improved by specifying an expected program effect in reducing a health problem. | Increase the number of participants in recovery-based activities in a designated area (ZIP Code) by developing multiple pathway-oriented programs. |
| Decrease the prevalence of marijuana, alcohol, and prescription drug use among youth in the community by increasing the number of recovery programs that implement effective policies, environmental change, intensive training of volunteers, and educational approaches to address high-risk behaviors, peer pressure, and substance use. | This goal is not concise. | Decrease youth substance use in the community by implementing evidence-based programs that address behaviors that may lead to the initiation of use. |

**OBJECTIVES**

**Definition –** Objectives describe the results to be achieved and the manner in which they will be achieved. Multiple objectives are generally needed to address a single goal. Well-written objectives help set program priorities and targets for progress and accountability. It is recommended that you avoid verbs that may have vague meanings to describe the intended outcomes, like “understand” or “know,” because it might prove difficult to measure them. Instead, use verbs that document action, such as: “By the end of 2021, 75% of program participants will be *placed* in permanent employment.”

In order to be effective, objectives should be clear and leave no room for interpretation. **SMART** is a helpful acronym for developing objectives that are ***specific, measurable, achievable,* *realistic, and time-bound*:**

* ***Specific* –** Includes the “who” and “what” of program activities. Use only one action verb to avoid issues with measuring success. For example, “Outreach workers will administer the HIV risk assessment tool to at least 100 injection drug users in the population of focus” is a more specific objective than “Outreach workers will use their skills to reach out to drug users on the street.”
* ***Measurable* –** How much change is expected. It must be possible to count or otherwise quantify an activity or its results. It also means that the source of and mechanism for collecting measurement data can be identified and that collection of the data is feasible for your program. A baseline measurement is required to document change (e.g., to measure the percentage of increase or decrease). If you plan to use a specific measurement instrument, it is recommended that you incorporate its use into the objective. For example, “By 9/20 increase by 10% the number of 8th-, 9th-, and 10th-grade students who disapprove of marijuana use as measured by the annual school youth survey.”
* ***Achievable –*** Objectives should be attainable within a given time frame and with available program resources. For example, “The new part-time nutritionist will meet with seven teenage mothers each week to design a complete dietary plan” is a more achievable objective than “Teenage mothers will learn about proper nutrition.”
* ***Realistic –*** Objectives should be within the scope of the project and propose reasonable programmatic steps that can be implemented within a specific time frame. For example, “Two ex-gang members will make one school presentation each week for two months to raise community awareness about the presence of gangs” is a more realistic objective than “Gang-related violence in the community will be eliminated.”
* ***Time-bound* –** Provide a time frame indicating when the objective will be measured or a time by which the objective will be met. For example, “Five new peer educators will be recruited by the second quarter of the first funding year” is a better objective than “New peer educators will be hired.”

**Examples**

|  |  |  |
| --- | --- | --- |
| **Non-SMART Objective** | **Critique** | **SMART Objective** |
| Volunteers will be trained on the “Language of Recovery.” | The objective is not SMART because it is not *specific*, *measurable*, or *time-bound*. It can be made SMART by *specifically* indicating who is responsible for training the teachers, *how many* will be trained, *who* they are, and *by when* the trainings will be conducted. | ***By March 1, 2021****,* ***RCO supervisory staff*** will have trained ***100% of its volunteers*** on the ***“Language of Recovery.”*** |
| 90% of youth will participate in classes on assertive communication skills. | This objective is not SMART because it is not *specific* or *time-bound.* It can be made SMART by indicating *who* will conduct the activity, *by when*, and *who* will participate in the lessons on assertive communication skills. | By the ***June 1, 2021, RCOs*** will have conducted classes on assertive communication skills for 90% of youth participating in recovery-based programs/services. |
| Train individuals in the legal system on multiple pathways to recovery and other recovery-oriented resources. | This objective is not SMART as it is not *specific, measurable* or *time-bound.* It can be made SMART by specifically indicating *who* is responsible for the training, *how many* people will be trained, *who* they are, and *by* *when* the training will be conducted. | ***By the end of the contract year of the project***, the ***RCO*** will have trained ***75% of Department of Juvenile Justice staff*** ***in the* *county government***on the selected curriculum addressing multiple pathways to recovery and other recovery-oriented resources. |

*Below is an example of how information could be displayed for the data that will be collected to measure the objectives that are included:*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Objective** | **Data Source** | **Data Collection Frequency** | **Responsible Staff for Data Collection** | **Method of  Data Analysis** |
| Objective 1.a. |  |  |  |  |
| Objective 1.b. |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

*\*Information adapted from the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Strategic Prevention Framework – Partnership for Success Application (Funding Opportunity Announcement No. SP-20-002)*

**Attachment 2 – Sample Budget and Budget Narrative**

**CATEGORIES**

**Travel and Training:** Funds requested in this category should be only for training related to project implementation. Travel for consultants and contractors should be shown in the “Contract” cost category along with consultant/contractor fees. Because these costs are associated with contract-related work, they must be billed under the “Contract” cost category. If your organization does not have documented travel policies, the federal GSA rates must be used (<https://www.gsa.gov/portal/category/26429>).

Provide the following information for the narrative and justification:

* 1. *Purpose* – Briefly note the purpose of the travel-training for strategy implementation.

1. The justification must identify the need for the travel.
2. The narrative description should include the purpose, why it is necessary and directly relates to the scope of work, number of trips planned, staff that will be making the trip, and approximate dates.
   1. *Location* – Specify the start and ending locations of the trip.
   2. *Item* – Specify the costs associated with travel (e.g., mode of transportation, accommodations, per diem).
   3. *Rate Calculation* – Specify the basis for the travel costs.
3. For mileage, specify the number of miles and the cost per mile. For air transportation, specify the cost. For per diem, specify the number of days and daily cost. For lodging, specify the number of nights and daily cost.
4. Costs for contingencies and miscellaneous costs are not allowable.
5. *Travel Cost Charged to Award* – Provide the total cost of the travel to be charged to the award during the budget period.

**Supplies and Materials:** Supplies are items costing less than $5,000 per unit (federal definition), often having one-time use. Provide the following information for the narrative and justification:

1. *Items* – List supplies by type (e.g., office supplies, postage, laptop computers). The justification must include an explanation of the type of supplies to be purchased and how it relates back to meeting the project objectives.
2. *Calculation* – Describe the basis for the cost, specifically the unit cost of each item, number needed, and total amount.
3. *Supply Cost Charged to the Award* − Provide the total cost of the supply items to be charged to the award during the budget period.

**Contractual Services:** List the budgets for each contract or consultant. Provide the following information for the narrative and justification:

* 1. *Name* – Provide the name of the entity and identify if it is a contractor or consultant.
  2. *Service* – Identify the products or services to be obtained.

1. As part of the justification, provide a summary of the scope of work, the specific tasks to be performed, and the necessity of the task for each contract as it relates to the Project Narrative. Include the dates/length of the performance period. **NOTE:** Costs that are outside the period of performance of the award cannot be charged to the award.
   1. *Rate* – Provide an itemized line-item breakdown.
   2. *Contract Costs Charged to the Award* − Provide the total of the consultant or contract costs to be charged to the award during the budget period.

**Other:** This category includes costs for participant incentives.

**Administrative Costs:** This category, which cannot exceed 5% of the total award, is to cover the costs incurred by the agency for administering the grant.

**Budget Example**

|  |  |
| --- | --- |
| **Organization Name:** Fresh Start Recovery Community Organization | |
| **Funding Amount:** $23,354.94 | |
| **Strategies to be implemented:** (1) Data Tracking (SAMHSA), (2) “This Is Recovery” Public Information Messaging Campaign and Community Event, (3) Blue Skies Complete Multimedia Curriculum for Job Readiness/Life Skills Training Sponsored by Fresh Start | |
| **Travel and Training** | Training for Blue Skies Job Readiness/Life Skills teachers – $250.00 x 2 paid volunteers = $500.00 |
| **Supplies and Materials** | Honorarium for keynote speaker at “This Is Recovery” outdoor community event – $2,000.00  1 20´x30´ customized tent for “This Is Recovery” outdoor community event – $1,999.99  Food and beverage snack items at $3.00 per person x 150 people = $450.00  Gloves for events – box of 200 gloves at $9.99 per box x 10 boxes = $99.99  Masks for events – 150 customized triple-ply cotton masks – $289.99  Hand sanitizer for events – 12 oz. bottles (15 in case) $139.99/case x 3 cases = $419.97  Blue Skies Job Readiness curriculum materials – 1 Full Course Curriculum Set (includes 1 instructor’s manual, 50 participant guides for each level, 1 stress management techniques CD, and 1 Job Wellness DVD – $645.00  Blue Skies Life Skills Module (includes 1 teacher’s manual and student worksheets for 50 participants) – $200.00  Paid social media boosts to promote Community Forum and Town Hall events – $500.00/month x 4 months = $2,000.00 x 2 platforms = $4,000.00 |
| **Contractual Services** | Contract with data analyst to input data into management information system and pull reports for real-time data analysis – $25.00/hour x 10 hours/week x 32 weeks = $8,000.00  Contract with media specialist to assist with design of messages and implementation of “This Is Recovery” campaign and community event – $25.00/hour x 10 hours/month x 8 months = $2,000.00 |
| **Other** | Non-cash incentives for participant enrollment in the Job Readiness program – $10.00 x 50 participants = $500.00  Non-cash incentives for “This Is Recovery” community event volunteers to provide to up to 25 participants at each event – $10.00 x 25 participants x 4 events = $1,000.00 |
| **Administrative Costs** | Administrative costs for Fresh Start RCO to support the implementation of the grant through staff support – 5% of total award – $1,250.00 |

**Budget Narrative:**

**Travel and Training:**

Two paid volunteers with Fresh Start RCO will attend an online facilitator’s training for the Blue Skies Job Readiness/Life Skills curriculum in the spring of 2021 to ensure the program is delivered with fidelity beginning in May 2021 at Fresh Start’s main recovery center. This expenditure relates to the implementation of Strategy 3.

**Supplies and Materials:**

**Supplies for recovery-related public events (Strategy #2)**

* Paid social media (Facebook/Instagram) boosts to promote “This Is Recovery” campaign/events at $500.00/month x 4 months = $2,000.00 x 2 platforms = $4,000.00.
* Honorarium for keynote speaker at “This Is Recovery” outdoor community event – $2,000.00
* Food and beverage snack items at $3.00 per person x 150 people = $450.00
* 1 20´x30´ customized tent for “This Is Recovery” outdoor community event – $1999.99
* Gloves for events – box of 100 gloves at $9.99 x 10 boxes = $99.99
* Masks for events – 100 customized triple-ply cotton masks – $289.99
* Hand sanitizer for events – 12 oz. bottles (15 in case) at $139.99/case x 3 cases = $419.97

**Supplies for job readiness/life skills training (Strategy #3)**

* Blue Skies Job Readiness curriculum materials – 1 Full Course Curriculum Set (includes 1 instructor’s manual, 50 participant’s guides for each level, 1 stress management techniques CD, and 1 Job Wellness DVD – $645.00
* Blue Skies Life Skills Module – 1 teacher’s manual and student worksheets for 50 participants – $200.00

**Contractual Services:**

Contract with data analyst to input data into information management system and pull reports for real-time data analysis $25.00/hour x 10 hours week x 32 weeks = $8,000.00 **(Strategy #1)**

Contract with media specialist to assist with design messages and implementation of “This Is Recovery” campaign and community event, $25.00/hour x 10 hours/month x 8 months= $2,000.00 **(Strategy #2)**

**Other:**

Non-cash incentives for participant enrollment into the Job Readiness program – $10.00 x 50 participants = $500.00 **(Strategy #3)**

Non-cash incentives for “This Is Recovery” community event volunteers, to provide to up to 25 participants at each event – $10.00 x 25 participants x 4 events = $1,000.00 **(Strategy #2)**

**Administrative Costs:**

$1,250.00 (5% as allowed) will be allocated to cover administration of the grant through the police department.

**State Opioid Response (SOR) Grant Application Package  
for Recovery Community Organization Services**

**Questions and Responses**

1. **Please clarify what is considered as being included in the definition for “RCO Services” under the description of sub-grantee levels, so that we can best determine our level of eligibility.**

Professional RCO services can be defined as delivering peer recovery support services (peer support groups, individual case management, peer coaching, referrals, etc.) to individuals with substance use disorders or co-occurring substance use and mental disorders, or those in recovery from these disorders.

1. **For the use of non-cash incentives for participants with perfect attendance (under allowable use of funds, recovery-oriented strategies) how would “perfect attendance” be measured in the context of recovery services? Because this is not a treatment program, individuals accessing recovery services may not have a “prescribed” amount of services they must attend. And recovery services accessed may vary significantly. This could be anything from receiving coaching, attending groups, and getting help with a referral to housing or a treatment center, etc. How is attendance measured?**

Perfect attendance would apply to individuals attending regularly scheduled peer support groups (daily, weekly, etc.), peer coaching sessions, peer case management sessions, or individuals who participate in a life skills/job readiness training program.

1. **Under Education, Health and Awareness Strategies, what is the mandatory “Bimonthly RCO Learning collaborative”? Is this something that is going to be developed?**

The Bi-monthly RCO Learning Collaborative will be scheduled through a DAODAS sub-contractor.

1. **For the GPRA requirements under the program goals, what is the threshold for completing a GPRA? Will RCOs be expected to provide incentives for the 6-month follow-up survey?**

After receiving questions/concerns regarding the use of GPRA for this solicitation, DAODAS has reconsidered the requirement, and the GPRA intake and follow-up are no longer a requirement for awardees.

1. **Under the Budget Narrative description on page 23, it states “administrative costs cannot exceed more than 5% of the total award.” How are administrative costs defined for the purpose of this grant?**

Administrative costs refer to any expenditures directly associated with administration of the grant through staff support. For the purposes of this grant, it is defined as real-time staffing/resource hours used to support the delivery and maintenance of the grant requirements.

1. **In Recovery-Oriented Strategies, “Developing a plan for becoming a community distributor of NARCAN” – Why is this a requirement for supporting individuals in recovery? This seems like harm reduction and not recovery oriented.**

It is very likely an RCO may encounter individuals still involved in active use/misuse of opioids. The purpose of Narcan® community distribution is to help the RCO engage all individuals, regardless of current recovery status, and assist them along the recovery path.

1. **On Page 7 of the application, one of the requirements is listed as, “Providing a quarterly report summarizing relationships.” This seems like an administrative task, yet funding is capped at 5% for administrative expenses.**

The listed 5% cap on all administrative costs is standard for all DAODAS solicitations, regardless of the requested deliverables and reporting requirements.

1. **On Page 7 of the application, an allowable expense is listed as, “Consultant fees to assist with development and implementation of strategic plan.” What defines consultant fees here? If we are operating with employees, can we retag them as consultants to cover the expense of their wages?**

For the purposes of this grant, consultants are defined as individuals retained to provide professional advice or services for a fee. Travel and lodging for consultants should be shown in this category, along with their fees.

1. **Please explain the “monthly report accounting for the number of individual and group attendees of recovery-related services, to include attendance rates and new member rates,” located on page 8 of the RFP.**

This requirement should include the number of individuals attending peer support groups and the number of individuals enrolled in peer coaching or case management services.

1. **Can you define the scope of family services for an organization that is not focused on family services? The requirement on Page 8 mentions “family-oriented recovery services that include education and support groups.” Can we refer out to other organizations that are focused on this?**

This requirement is a holistic enhancement of recovery-related services. Family-oriented recovery services can include basic substance use disorder education presentations, opioid and stimulant awareness education, multiple pathways education, Narcan® education, support groups for family members, child-friendly community (virtual/live) events, etc. The RCO may also provide a space for family members to attend self-help groups (Nar-Anon, Al-Anon, etc.). Each RCO may also refer individuals to traditional family services programs when deemed necessary.

1. **Can you clarify how funds can be used when “providing a recovery-oriented and holistic wellness-based community space for gathering, socializing, and practicing multiple pathways of recovery” as listed on page 9 of the application? Does this mean we can use the funds to cover portions of our rental expenses?**

If you currently do not have a meeting space, you can use the funds to pay rental fees for a meeting space. If you are already paying rental fees for outside meeting space, funds from this grant can be applied to that expense.

1. **Can you clarify what “providing access to resources and technologies” means? What qualifies as technology resources we can provide if we are not allowed to give incentives above $10?**

Access to technology and resources, as listed on page 9 of the application, refers to granting computer and internet access to members of the recovery community. The use of non-cash incentives refers to participants of job readiness/life skills training classes.

1. **I don’t readily know of any recovery-related consultants. Please clarify the statement “Consultant fees to assist with development and implementation of strategic plan” found on page 11 of the application. Is there a preapproved list of consultants? I do know of some very qualified Directors that could do this, but is that not covered in this expense? If we used our Director as a “consultant,” how would this process work?**

A person or entity providing Project Management services can be used to assist with development of strategic planning and implementation. If your agency is fully capable of in-house project management, then there will not be a need to pay for a project management consultant.

1. **If services are provided off-site, is mileage allowable under this grant per the guidance on page 8 of the application?**

If peer support or other recovery-related services covered under this grant are provided offsite, the accrued mileage would be allowable for reimbursement at the standard state allowance of 57.5 cents per mile.

1. **Since Recovery Coaches occasionally work with folks who are not quite ready to commit to services (e.g., emergency room patients), would GPRA be expected for those individuals per the guidance on page 13 of the application?**

After receiving several questions and concerns regarding the use of GPRA for this grant, DAODAS has reconsidered the requirement, and the GPRA intake and follow-up are no longer a requirement for this solicitation.

1. **In regards to “Increasing access to and engagement with recovery support services and reduce opioid overdose deaths and emergency room visits resulting from opioid use or abuse” as listed on page 13 of the application, how will these indicators be measured?**

Increasing access to and engagement with recovery support services can be measured by reporting the number of individuals receiving any recovery support services on or off site, and the number of individuals attending live/virtual community events sponsored by the RCO.

1. **In regards to having (2) volunteer recovery community allies per the guidance on page 13 of the application, if the RCO covers multiple counties, do you intend to have Recovery Community Allies in each?**

Each RCO should have at least two community allies in each county under their service area.

1. **Can you please clarify what “transformation of evolving communications into formal contacts and successful social networks” means as listed on page 14,   
   item 6c.?**

Each RCO is required to develop and cultivate a solid and reportable social/community network as a result of continuous engagement within the recovery community, as well as supporter/advocates of the recovery community.

1. **Can you confirm the 4 items below are required reporting for this solicitation?**

* **Monthly deliverable numbers**
* **Monthly finance and program implementation data**
* **Quarterly summary of relationships in the community**
* **Quarterly budget spending**

Each RCO will be required to report monthly deliverables in the Box data system, as well as monthly finance and program implementation data. Deliverable requirements and financial reporting instructions are listed on pages 14-15 of the application. Each RCO will also be required to submit quarterly reports summarizing quarterly spending, as well as a quarterly report summarizing “new” relationships developed within the broader community.

1. **Please clarify that the program implementation data is how we are monitoring the progress of our plan to implement the strategies for our level.**

Yes, the program implementation data submitted to DAODAS will help track the progress each RCO is making toward full implementation of the required strategies.