**UNIVERSITY OF BALTIMORE**

**FY 2022 Competitive Subaward Solicitation**

**Combating Overdose through Community-level Intervention (COCLI)**

**Notice of Funding Availability (NOFA)**

**Application Guidance**

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**Center for Drug Policy and Prevention**

**Submission Deadline: November 7, 2022**

**Funded through:**

**Office of National Drug Control Policy**

**Catalog of Federal Domestic Assistance (CFDA) Number: 95.007**

**University of Baltimore**

**Center for Drug Policy and Prevention**

**1420 N. Charles St.
Baltimore, MD 21201-5779**

**410-837-6191**

**Kurt L. Schmoke, President**

**Roger Hartley, Ph.D., Dean, College of Public Affairs**

**Thomas H. Carr, Executive Director, Center for Drug Policy and Prevention**

**Getting Started**

Thank you for applying for the **Combating Overdose through Community-level Intervention (COCLI) Subaward from the University of Baltimore.** The COCLI program targets communities of the United States with the highest rates of fatal and non-fatal overdoses.

Proposals must support and promote collaboration between public safety and public health agencies to ensure that overdose reduction efforts are robust and that communities benefit from a comprehensive and coordinated response. Applicants must leverage evidence-based or promising practices approaches to implement or enhance new or on-going community-based programs that aim to reduce opioid-involved overdoses, overdoses involving stimulants, or polydrug overdose, and other harms associated with drug (mis)use. Some applicants (Tier 3) must also evaluate these community-based efforts to assess their efficacy in reducing overdose and other harms associated with drug (mis)use.

If you need assistance with your application, please contact:

Sherae Lonick

Deputy Director for Finance

Center for Drug Policy and Prevention

301-489-1711

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# **I. BACKGROUND/ SCOPE**

The United States continues to experience unprecedented numbers of drug overdose deaths. According to the Centers for Disease Control and Prevention, a record 107,000 people died from a drug overdose in the United States in 2021, which represents a 15% increase from 2020. Most drug overdose deaths are due to opioids, with fentanyl becoming the number one cause of death for adults 18 to 45 years old. An average of 136 Americans die every day from an opioid overdose. In 2018, the economic cost of the opioid crisis was more than $700 billion. The opioid crisis was declared an ongoing public health emergency in 2017, which was recently renewed in April of 2022. The opioid crisis was further exacerbated the COVID-19 pandemic, during which substance use disorder intensified, substance abuse treatment centers were closed, and emergency room visits for mental health conditions increased.

Opioids and synthetic opioids such as fentanyl continue to drive the majority of drug overdose deaths. In 2020, opioids were involved in 74.8% of all drug overdose deaths, with synthetic opioids being involved in 82.3% of opioid-involved overdose deaths. Fentanyl availability in illicit markets continues to increase across the country. All the while, fentanyl suppliers experiment with new synthetic opioids in an attempt to circumvent regulations imposed by the U.S. and China. China remains the primary source of fentanyl and fentanyl-related substances trafficked into the U.S., either through traditional Mexican drug trafficking organizations or through mail and express consignment. Counterfeit prescription pills, such as oxycodone, laced with fentanyl are rising. The Drug Enforcement Administration (DEA) reports inconsistencies in the amounts of fentanyl present in fentanyl-containing counterfeit pills and this contributes to their lethality. Of the seized exhibits examined in 2018 by DEA’s Fentanyl Signature Profiling Program, the amount of fentanyl per tablet ranged from 0.02 to 4.84 milligrams—more than twice that of a potentially lethal dose. Fentanyl can be deadly at very small doses and is being laced into other substances like cocaine and methamphetamine, without users’ awareness. The amount of fentanyl seizures in 2021 increased by 134% and could give every American a lethal dose, according to the DEA. The increased availability, very low cost, and lethality of fake prescription pills is alarming.

While the opioid epidemic justifiably dominates national and state priorities, overdose deaths involving cocaine and psychostimulants are increasing too. Methamphetamine drug overdose deaths are increasing both with and without synthetic opioid involvement. The rate of overdose deaths involving psychostimulants such as methamphetamine and amphetamine increased nearly five-fold and the rate of overdose deaths involving cocaine more than tripled between 2012 and 2018. In 2021, cocaine seizures increased 68%, and methamphetamine seizures increased 7%. Overdose deaths from methamphetamine and cocaine both increased in 2021 by 8,280 deaths and 4,611 deaths, respectively. Overdose deaths involving methamphetamine and cocaine accounted for 57,124 deaths.

Opioid overdose deaths involving cocaine and methamphetamine are increasing. Data from 24 states and D.C. from January 2019 through June 2019 indicate that 48.9% of drug overdose deaths involved opioids without stimulants, 32.5% involved opioids and stimulants, 12.7% involved stimulants without opioids, and 5.8% involved neither opioids nor stimulants. Illicitly manufactured fentanyl, heroin, cocaine or methamphetamine, either alone or a combination of, were involved in the vast majority of these deaths, accounting for 83.8%. These trends are part of a pattern of increased stimulant use and polysubstance use in the midst of the opioid crisis.

The rate of methamphetamine use is increasing in treatment-seeking opioid users, with one sample showing an increase from 18.8% in 2011 to 34.2% in 2017. This trend is particularly pronounced in the Western region of the U.S. with the highest estimated rates of past-year methamphetamine use in states such as Arizona, Colorado, Oregon, and Nevada. Prior research consistently shows that individuals using both opioids and stimulants have suboptimal treatment outcomes and greater risk for overdose and death. Polysubstance use can complicate intervention and treatment efforts and is associated with poorer physical health, mental health, and substance use outcomes.

The resurgence of stimulant use and related harms stands to further challenge ongoing opioid overdose prevention, treatment, and response efforts, and innovative strategies to combat this evolving dynamic are urgently needed. Given the scope, scale, and complexity of this national crisis, collaboration across and among agencies and disciplines is essential. Nearly every sector of government has a role to play in stemming this crisis—whether implementing prevention activities, providing treatment to individuals with substance use disorder, identifying and disrupting the flow of illicit opioids and other drugs into and across the country, or advancing research to increase our knowledge on promising practices. It is necessary to consider the combination and lethality of substances being used (fentanyl, stimulants, polysubstance, etc.); utilizing effective public health interventions can prevent deaths.

In April 2022, the White House released the 2022 National Drug Control Strategy. The Strategy aims to reduce the number of drug overdose deaths, increase access to quality public health services to people with substance use disorders, and to stop drug trafficking organizations. The Strategy prioritizes prevention and early intervention, supply reduction, substance use disorder treatment, recovery support, and harm reduction. As stated in the Strategy:

*This call to action comes at a critical moment. For the first time in our Nation’s history we have passed the tragic milestone of 100,000 deaths resulting from drug overdoses in a 12-month period. As we continue to lose an American life to drug overdose every five minutes around the clock, we find ourselves at an inflection point where we, as a Nation, must commit ourselves to doing what we know will help us triumph over this crisis…Working together, we can build healthy, safe and resilient communities where we have reduced the adverse experiences that can lead to substance use disorder, where public health services are available to everyone who needs them, and where the millions of Americans living in recovery have their health, their home, their community, and their purpose in life.*

Overall, these staggering figures and emerging trends illustrate the need to implement and/or enhance community-based efforts to reduce overdose deaths.

# **II. ELIGIBILE APPLICANT**

The following entities are eligible to submit subaward applications, providing the application includes a letter of support/commitment from the participating HIDTA signed by the sponsoring HIDTA Director. (See Section C-9. Letters of Support/Commitment)

* High Intensity Drug Trafficking Areas Programs
* Public/State Controlled Institutions of Higher Education
* Private Institutions of Higher Education
* Nonprofits with 501(c) (3) IRS Status (Other than Institutions of Higher Education)
* Nonprofits without 501(c) (3) IRS Status (Other than Institutions of Higher Education)
* State Governments
* County Governments (Health departments)
* City or Township Governments
* Special District Governments
* Indian/Native American Tribal Governments (Federally Recognized)
* Indian/Native American Tribal Governments (Other than Federally Recognized)
* U.S. Territory or Possession
* Independent School Districts
* Public Housing Authorities/Indian Housing Authorities
* Native American Tribal Organizations (other than Federally recognized tribal governments)
* Faith-based or Community-based Organizations

# **III. ELIGIBILITY CRITERIA**

* Applicants must have expert knowledge and extensive experience in conducting research and analysis.
* Applicants must have expert knowledge and experience developing or enhancing new or ongoing programs that aim to reduce opioid or other drug overdose through strategic, evidence-based and promising approaches.
* **Applicants must partner with a regional High Intensity Drug Trafficking Areas (HIDTA) program. Applications must include a letter of support/commitment from the participating HIDTA and signed by the sponsoring HIDTA Director.**

# **IV. APPLICATION PROCESS**

Applicants are required to apply for subaward funding through the University of Baltimore (UBalt).

**The UB must receive the emailed copy of the application no later than midnight, Eastern Standard Time, November 7, 2021.**

# **V. APPLICATION REQUIREMENTS**

**Sub-recipient Organization Eligibility Requirements**

The UBalt established criteria for the Combating Overdose through Community-level Intervention subaward that all organizations receiving these funds **must** fulfill.

Sub-recipients must focus on opioid-involved overdose, overdose involving stimulants, or poly-drug overdose in communities of the United States with the highest rates of fatal and non-fatal overdoses. Also, they must:

* Support and promote collaboration between public safety and public health agencies to ensure that overdose reduction efforts are aligned and communities benefit from a comprehensive and coordinated response.
* leverage evidence-based or promising approaches to implement or enhance new or on-going community-based programs that aim to reduce drug overdose.
* Once implemented, evaluate these community-based efforts to assess their efficacy in reducing overdose and other harms associated with drug (mis)use.

Each subcontract recipient organization ***shall*** meet the following requirements:

1. You must comply with the Government-wide Suspension and Debarment provision set forth at 2 CPR Part 180, dealing with all sub-awards and contracts issued under the grant.
2. Reporting Sub-award and Executive Compensation Information - This part provides guidance concerning requirements for Federal Funding Accountability and Transparency Act of 2006 (FFATA) reporting. ONDCP must report Federal fund awards of more than

$25,000. Subcontracts also fall under reporting requirements but please note that the definition of "Sub-contract" does not include your procurement of property and services needed to carry out the project. (See 2 CPR Part 170)

1. Requirements for Drug-Free Workplace (Financial Assistance) - This part requires that the award and administration of ONDCP grants and cooperative agreements comply with Office of Management and Budget (OMB) guidance implementing the portion of the Drug Free Workplace Act of 1988 (41 U.S.C. 701-707, as amended, hereafter referred to as "the Act") that applies to grants. (2 CPR Part 421)
2. Non Discrimination Statement: The UBalt and ONDCP prohibit discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political belief, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Agency. (Not all prohibited bases will apply to all programs and/or employment activities.)
3. Compensation- Personnel Services: This part requires that charges to Federal awards for salaries and wages must be based on records that accurately reflect the work performed. (See 2 CFR 200.430)
4. Financial Management: This part requires that systems must be sufficient to permit the preparation of reports required by general and program-specific terms and conditions, and the tracing of funds to a level of expenditures adequate to establish that such funds have been used according to the Federal statutes, regulations, and the terms and conditions of the award. (See 2 CFR 200.302)
5. As specified in this notice of funding opportunity, recipient must:
	1. Establish and maintain effective internal controls over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with the guidance in "Standards for Internal Control in the Federal Government," issued by the Comptroller General of the United States and the "Internal Control Integrated Framework," issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).
	2. Comply with Federal statutes, regulations, and the terms and conditions of the Federal awards.
	3. Evaluate and monitor the non-Federal entity's compliance with statute, regulations, and the terms and conditions of the Federal awards.
	4. Take prompt action when instances of noncompliance are identified, including noncompliance identified in audit findings.
	5. Take reasonable measures to safeguard protected personally identified information and other information the Federal awarding agency or pass-through entity designates as sensitive or the non-Federal entity considers sensitive consistent with applicable Federal, state, and local laws regarding privacy and obligations of confidentiality.

**Evidence-Based Practices and Promising Approaches**

* UBalt will give priority to applicants that propose to implement and/or evaluate an evidence-based or promising practices strategy to create new information for prevention efforts. Specifically, for Tier 2, emphasis should be on developing and implementing new approaches or adapting existing evidence-based practices/programs in new settings or with new populations. Priority for Tier 3 will be evaluating evidence-based or promising strategies after full implementation of the proposed program.
* Applicants are encouraged to review national best practices, evidence-based and promising program examples when developing or identifying a programmatic strategy for implementation and/or evaluation.
* Applicants are encouraged to use existing theory, research, and evidence in new, innovative ways to: effectively reach populations at highest risk of a drug overdose; overcome known barriers to accessing treatment and harm reduction services; retain persons who use drugs (PWUD) in treatment; and/or enhance long-term recovery.
* Applicants should also provide details on how they will maintain fidelity to the proposed program or approach.

# **VI. FAITH-BASED/COMMUNITY ORGANIZATIONS**

**Faith-based organizations** applying for COCLI funds do not have to lose or modify their religious identity (i.e., removing religious symbols) to be considered an eligible applicant. However, these funds may not be used to fund any inherently religious activity, such as prayer or worship. Inherently religious activity is permissible, although it cannot occur during an activity funded with subaward funds; such religious activity must be separate (in time and/or place) from the subaward funded project. Further, participation in such religious activity by individuals receiving services must be voluntary.

Such organizations receiving COCLI funds must offer services without regard to religious affiliation and ensure the receipt of services is not contingent upon participation in a religious activity or event.

# **VII. IMPORTANT DATES**

➢ Deadline to Submit an Application: November 7, 2022

➢ Sub-award Start Date: December 12, 2022

➢ Sub-award End Date: December 11, 2023

# **VIII. PROJECT PRIORITY AREAS**

This Notice of Funding Availability seeks projects focused on the following priority areas:

1. Activities that research and analyze a range of existing community-based efforts to address overdoses;
2. Evidence-based and proven strategies designed to reduce overdose deaths that incorporate approaches that advance equity;
3. Research activities that address opioid-involved overdose, overdose involving stimulants, or poly-drug overdose, and other harms associated with substance (mis)use;
4. Research activities that deal with Adverse Childhood Experiences (ACEs); or
5. Efforts that support and promote the partnership of law enforcement and public health agencies, whose collaboration is critical to reducing drug overdose and other harms associated with substance (mis)use.

**Funding Specifications:** The UBalt will use a tier system when making subcontract awards.

Tier 1-up to $50,000 per award: Awards in this tier fund program planning of new or innovative approaches. The UBalt recognizes that complex community problems typically necessitate an involved planning process. It is often challenging for researchers and practitioners to suggest an effective response to a community’s problem without first engaging the community to discover why the problem exists and how the problem could be addressed effectively and efficiently. The UBalt expects to fund up to five planning grants.

Requirements for application include having a broad cross-section of the targeted community involved in the planning and having subject matter experts engage with the community, Applicants should consider developing and administering surveys to help gather pertinent information. The planning process must be completed and a well-documented written plan must be submitted at the end of the subcontract period.

Tier 2- up to $150,000 per award: Awards in this tier focus on innovative program development and implementation. Projects should be designed to support small, innovative projects that either: (a) develop, clarify, and implement a novel program, strategy, or approach that has not yet been evaluated; or (b) adapt an existing evidence-based strategy for use in new setting/s or with new population/s.

Requirements for application include a logic model for the programmatic approach, a clear articulation of the program elements (e.g., What is being delivered? By whom? How? What is the theory of change?), and proposed evaluation measures for each component. No other evaluation is necessary.

Tier 3-$150,001 to $300,000 per award: Awards in this category focus on implementation and evaluation of evidence-based or evidence-informed strategies. Projects should be designed to support medium sized innovative projects that already have some evidence base, but would benefit from full implementation and rigorous evaluation.

Requirements for application include a logic model, a clear articulation of the program elements, a plan for fidelity of implementation, and an evaluation plan that includes anticipated outputs and outcomes measures.

COCLI projects funded in prior years are eligible for 2022-2023 funding; however, COCLI projects funded in prior years must include a built-in evaluation component i.e., anticipated outputs, outcomes, and impact measures to receive funding consideration in 2022-2023. COCLI projects will not be eligible to receive more than 3 years of continuous funding.

# **IX. FUNDING EVALUATION**

The UBalt will assess the worth of each organization's overall project based on the following:

* Problem Statement/ Needs Justification (10%)
* Project Description (15% for Tier 1, 10% for Tiers 2 & 3)
* Project Priority Areas, and Evidence-based and Promising Categories (5%\*)
* Project Innovation (10%)
* Impact Statement (10%)
* Evaluation plan, Goals and Objectives, and Outcome-Based Performance Measures (15%)
* Strategy and Timeline (5%)
* Management Capabilities/ Cooperating Agencies (5%)
* Covid-19 Statement (5%)
* Project Sustainability (5% - Not applicable for Tier 1 proposals)
* Budget (20%)

\* Tiers 2 and 3 Projects that focus on any of the following areas may receive up to a total of 5% additional credit.

* Recovery Support Services
* Quick Response Teams (QRTs)
* Stigma reduction
* Working with non-traditional partners (businesses, retail establishments, parental groups, families)
* Stimulants or poly-drug substance (mis)use
* Adverse Childhood Experiences (ACEs)
* Partnerships with Drug- Free Communities (DFC) programs
* Novel approaches to address known barriers to linking PWUD to treatment and harm reduction

Additional factors UBalt will consider in making a funding evaluation are:

* Leveraging or using evidence-based practices or promising and proven programs
* Geographic size, reach, and location of the project
* Whether new staff are required to implement the project and, if so, how quickly new staff can be hired
* Whether the project will require approval of an Institutional Review Board (IRB) and, if so, whether steps have been taken by the applicant to prepare for the IRB review process
* Performance history with previous Combating Overdose through Community-level Intervention awards
* Audit Findings

The Combating Overdose through Community-level Intervention subaward includes a competitive application process. Applicants should ensure they address funding evaluation factors in the appropriate section/s of the narrative in their application. The UBalt will conduct a review of each application submitted in accordance with this Notice of Funding Availability.

# **X. FUNDING SPECIFICATIONS**

**A. Funding Cycle**

COCLI awards will commence on December 12, 2022 and end on December 11, 2023. This is a twelve (12) month award. Funds are paid on a reimbursable basis. **Note: Cost extensions for sub-recipients’ projects will not be granted under any circumstances.**

**B. Budget**

Budgets must be clear, specific, and tie directly to performance measures. Budgets must reflect months of spending and, where applicable, be adjusted to reflect start date, state furlough days, and holidays. *The UBalt reserves the right to reduce budgets*.

The prioritization of line items is required for all applications having multiple line items.

Applicant requirements will be taken into consideration should budgets need to be reduced.

The justification sections must contain brief statements (1 to 2 sentences per line item) that explain each line item and their relevance to the project goals and objectives. Do not state "See Narrative, Goals, or Objectives".

**C. Allowable Costs**

The following is a listing of services, activities, and costs that are eligible for support with Combating Overdose through Community-level Intervention funds. Before these costs can be supported with Combating Overdose through Community-level Intervention funds, the applicant must agree that direct services cannot be offered without the support for these expenses; and that the sub-recipient has no other source of support for them:

* Personnel and Fringe Benefits
* Facilities
* Travel
* Contractual Services
* Services
* Supplies
* Equipment
* Indirect Costs

**D. Unallowable Costs**

The following services, activities, and costs, although not exhaustive, cannot be supported with Combating Overdose through Community-level Intervention subaward funds:

* Overtime
* Lobbying and Administrative Advocacy
* Perpetrator Rehabilitation and Counseling
* Audit Costs
* Property Insurance
* Food/Beverage for program staff
* Vehicle purchases
* Trinkets (items such as hats, mugs, portfolios, t-shirts, coins, gift bags, etc.)

**E. Indirect Cost Rate**

Applicants that intend to charge indirect costs through the use of an indirect cost rate must have a Federally-approved indirect cost agreement.

Please provide a copy of a current, signed Federally- approved indirect cost rate agreement.

Non-federal entities, other than State and local governments that have never received a Federally- approved indirect cost rate, may elect to charge a de minimis rate of 10% of modified total direct costs. If chosen, this methodology, once elected, must be used consistently for all Federal awards until such time as a non-federal entity chooses to negotiate for a rate.

Line item justification must include the agency/ organization's direct cost rate illustrating how the indirect cost rate was determined as well as the costs associated under this heading.

**F. Consultant Rates**

The limit for consultant rates is $650 per day or $81.25 per hour.

# **XI. DISTRIBUTION OF FUNDS & REPORTING REQUIREMENTS**

The UBalt will distribute awarded funds to sub-recipients in conjunction with the timely submission of corresponding Fiscal and Programmatic Reports. These reports must be emailed to the UBalt. The programmatic reports are due within 15 calendar days following the end date of the quarter; a financial report is due within 15 calendar days following the end of each month. All reporting activity occurs through email.

**Electronic Funds Transfer (EFT)** – The UBalt encourages the use of electronic funds transfer (EFT). To obtain the appropriate form, the address to submit the form, and a general overview, including FAQs, refer to the following website:

<https://www.marylandtaxes.gov/divisions/gad/eft-program.php>

# **XII. MATCH**

There is no match requirement for this subaward.

# **XIII. SUPPLANTING, TRANSPARENCY AND ACCOUNTABILITY**

Federal funds must be used to supplement existing state and local funds for project activities and must not replace those funds that have been appropriated for the same purpose. There are strict federal laws against the use of federal funds to supplant current funding of an existing project. Jurisdictions must provide assurances and certifications as to non-supplanting and the existence of proper administrative/financial procedures.

A strong emphasis is being placed on accountability and transparency. Award recipients must be prepared to track, report on, and document specific outcomes, benefits, and expenditures attributable to the use of subaward funds. Misuse of subaward funds may result in a range of penalties to include suspension of current and future funds and civil/criminal penalties.

# **XIV. APPLICATION**

**Notice to All Applicants:**

The information collected on the subaward application form is collected for the purposes of the

UBalt. Failure to provide all of this information may result in the denial of your application for funding. The UBalt is a government entity; upon submission, this application is considered public information. The UBalt does not sell collected subaward information. Under the Maryland Public Information Act (PIA) (MD State Government Code Ann. 10-617 (h) (5)), you may request in writing to review subaward award documentation. Please send those requests to:

Margarita M. Cardona, MS, CRA

Assistant Provost, Sponsored Research

University of Baltimore
1420 N Charles St.

Baltimore, MD 21201-5779

410-837-6191

OSR@ubalt.edu

**A. COVER SHEET INSTRUCTIONS**

**1. PROJECT TITLE**

The project title should be brief, precise, and reflect what is being funded.

**2**. **TIER**

 List the Tier for the award being sought; Tier1, Tier 2, or Tier 3.

**3. APPLICANT AGENCY**

The organization or government agency that is eligible to apply for subaward funds (See Eligible Applicants).

If the Government, Township, or Board of Commissioners mandates that the County Executive, Mayor, or Commissioner sign all subaward award documents (for all subordinate agencies) then the Government, Township, or Board of Commissioners MUST be the APPLICANT Agency.

**SAM Registration:** Provide your Unique Entity Identifier obtained through SAM.gov. In an appendix, submit proof of your agency's current SAM registration from www.sam.gov. Include a screenshot of **just the page that lists your Unique Entity Identifier number and SAM.GOV expiration date**. Please do not include any additional pages (i.e., those containing banking information).

**Access to SAM.GOV:**

<https://www.sam.gov/SAM/>

**4. IMPLEMENTING AGENCY**

The name of the entity that is responsible for the operation of the project.

**5. PROPOSED START/END DATES**

**Start and end date are determined by the parameters of the NOFA.** Projects may not exceed twelve (12) months or commence before the NOFA defined start date.

**6. PREPARER INFORMATION**

Enter the name of the person completing the application, their mailing address, phone number and email address.

**7. PROJECT DIRECTOR**

Enter the name of the person, their mailing address, phone number and email address who will be responsible for oversight and administration of the project.

**8. FISCAL OFFICER**

Enter the name of the person, their mailing address, phone number and email address who will be responsible for financial reporting and record keeping for the project.

**9. CIVIL RIGHTS CONTACT**

Provide your agency's point of contact for handling internal civil rights violation complaints (usually a Human Resources or Personnel Manager).

**B. SUMMARY INSTRUCTIONS**

The Project Summary should provide a concise summary of your proposal and be limited to 150 words or less. Be sure to include the name of the implementing agency, the project’s main function, and a brief explanation of the budget for the subaward.

**Note: UBalt may use your summary for press releases should your application receive a subaward.**

**C. NARRATIVE INSTRUCTIONS**

Provide a description of the project timeline, and potential for information sharing. The contents for the narrative are explained below. **The Narrative must be in an outline-styled format (retaining all numbering, lettering, and headers). The Project Narrative may not exceed 15 pages, excluding the Cover Sheet and Appendices. Applications that are incomplete and/or improperly formatted will not be considered for funding.**

* **Use a New *Roman* typeface and a font size of 12 points**
* **Use standard letter size (8 ½” x 11”) sheets of paper**
* **Use at least one-inch margins (top, bottom, left, and right) for all pages**
* **All page limits specified refer to double-spaced format using the above formatting**

 **requirements**

**1. Problem Statement:** Include a description of the nature and extent of the problem to be addressed, target population, and geographical area served. Provide the latest statistical data to document the problem. Describe any past effort made to address this problem.

**2. Project Description:** This section of the application should contain a general description of activities that justifies and describes the project to be implemented. The project description should include specific services that will be provided and explain what the project will accomplish.

**3. Project Priority Areas, and Evidence-based and Promising Practices Categories**: This section must explain how the project will support and promote the partnership of law enforcement and public health agencies, whose collaboration is critical to reducing overdose and other harms associated with substance (mis)use, and identify the Evidence-based Category that the proposed project will fall under.

Evidence-based and Promising Practices Categories:

* Drug use prevention
* Drug use early intervention – such as Adverse Childhood Experiences (ACEs), trauma-informed responses for children and families (e.g. Handle with Care programs), school-based strategies
* Linkage to care for People Who Use Drugs (PWUD)
* Drug use treatment and strategies to retain people in treatment long-term
* Sustained drug use recovery
* Innovative strategies to prevent overdose under conditions of COVID-19
* Harm reduction (e.g., syringe services programs, drug checking, naloxone distribution)
* Innovative drug use policy
* Healthcare systems interventions
* Peer Navigation and Recovery Support Services
* Criminal justice interventions and criminal justice reform
* Innovative technologies to advance prevention, linkage to care, treatment, retention in card, or recovery
* Opioid (mis)use
* Methamphetamine and other stimulant (mis)use
* Polysubstance use

**4. Project Innovation**: Describe how the project intends to improve the processes currently used to address the problem being solved and/or describe how the project intends to improve the practice being implemented to solve the problem. Explain whether this project will improve an evidence-based or promising practice, provide a new promising practice, incrementally improve existing program/s in the targeted community, or develop an entirely new practice or process.

**5. Impact Statement:** Explain in detail how the project addresses the specific needs of the community where it will be implemented and describe the impact the project will have on that community.

**6. Evaluation Plan, Goals and Objectives, and Outcome-Based Performance Measures:** Eachapplicant must submit an evaluation plan that describes how the applicant intends to maintain records of services provided, how services are provided, and how the desired or intended changes and effects will be measured.

Tier 2 applications must include a logic model for the programmatic approach, a clear articulation of the program elements (e.g., What is being delivered? By whom? How? What is the theory of change?), and proposed evaluation measures for each component. No other evaluation is necessary.

Tier 3 applications must include a logic model for the programmatic approach, a clear articulation of the program elements, a plan for fidelity of implementation, and an evaluation plan that includes anticipated outputs and outcomes measures.

**Logic Model:** graphic depiction (chart) that presents the shared relationships among the resources, activities, outputs and outcomes for your program.

Each application must include clearly defined goals, objectives, and outcome-based performance measures and available data sources to use to track measures.

**Goals**: Provide a broad statement that conveys, in general terms, the project’s intent to change, reduce, or eliminate the problem described. Goals identify the project’s intended short and long-term results for the anticipated funding year. Explain how the project will accomplish the goals.

**Objectives**: Objectives are specific, quantifiable statements of the project’s desired results, and should include the target level of achievement, thereby further defining goals and providing the means to measure project performance.

**Outcome-based Performance Measures**: The UBalt encourages projects to focus on delivering products and services and show their efficiency and effectiveness via outcome measures.

**7. Strategy and Timeline:** This section details any planning process undertaken in developing the plan of response. Further, it should provide an overview of the strategy to be employed and the timeline for implementing the strategy. Include linkages to other programs, organizations, and stakeholders that will be involved in or impacted by your program.

Applicants must submit a detailed timeline/work plan. This timeline/work plan must include:

* Key tasks that must be carried out to implement the project successfully
* Person(s) responsible for seeing that each task is completed within the proposed timeline
* Target dates for task completion

**8. Management Capabilities:**

Qualifications and Experience: Provide a brief description of the experience and achievements that qualify the organization or agency to conduct the project.

Present and Proposed Staff: List the name of the project director and in an appendix provide a resume or curriculum vitae (no more than 3 pages) for this individual. List the names and provide a short professional biography of the key consultants, financial officer, and other professional staff members. Clearly identify, by name and title, requested personnel. Indicate how all requested staff are currently funded (i.e., name subaward fund or state that personnel are line items in the existing agency budget. If funded by more than one source, list percentages for each funding source).

**9. COVID-19 Statement:**

The UBalt recognizes that COVID-19 is weakening the ability of many organizations to address substance use disorder in their communities. The COVID-19 pandemic challenged the resources devoted to drug treatment, prevention and research, and activities. Many practitioners either curtailed their work or put in on pause. Center for Drug Policy and Prevention (CDPP) staff believe this situation will continue into the near future and will consider this when reviewing funding proposals. Provide your plan to assure the UBalt that the proposed project can be completed in a timely fashion despite the adverse impact of COVID-19.

**10. Project Evaluation & Sustainability:**

Explain what prospects exist for continued financing of the project when subaward funds are terminated: What efforts have been or will be made to continue the methods, techniques, and operational aspects of the project when the subaward funds are concluded? Indicate planned future sources of funding or proposed jurisdictional planning efforts.

**11. Letters of support/commitment:**

In an appendix, provide letters of commitment by partners who will participate in the execution of the project or whose cooperation and support are necessary to its success. **Letters of support/commitment are not optional. The participating HIDTA must provide a letter of support/commitment signed by the sponsoring HIDTA Director for this subaward application to receive consideration for funding.**

**D. BUDGET INSTRUCTIONS**

***BUDGET – GENERAL REQUIREMENTS***

You must complete a detailed budget for your proposed project. All 'Total Budget' fields must be rounded to the nearest whole dollar.

Budgets must be clear and specific. Budgets must reflect twelve (12) months of spending and where applicable, be adjusted to reflect start date, state furlough days, and holidays.

Each budget line item must include a justification entry. The justification sections must contain brief statements (1 to 2 sentences per line item) that explain each line item and their relevance to the project goals and objectives. **Do not state "See Narrative, Goals, or Objectives”.**

**PERSONNEL AND FRINGE BENEFITS**

List the personnel/positions, salaries and fringe benefits for staff required to implement the project. Consultants must be listed in Contractual Services. **Either Time and Effort reports or Timesheets must be maintained for all personnel included in the subaward project.**

If you are paying an employee directly, they should be entered in the Personnel category. For each position, list salary and fringe benefits on separate line items.

- The ‘Description of Position' field must contain the title of the position.

- Position line items (salary and fringe) are grouped via the ‘Description of Position' field.

- After completing the first Position's line item, use the dropdown to add additional budget items to the position.

- The ‘Description of Position' is used to select existing positions and to add new positions.

- For multiple staff in the same position, use a suffix (i.e., Position 1, Position 2, etc.)

- Multiple positions with the same hourly rate may be grouped.

**Note:** For each line item entered, you must include a justification that ties that item to the activities described in your narrative.

Example justifications based on the Personnel category:

Justification (line 1):

The Community Outreach Coordinator helps prepare, schedule, and develop trainings targeted for hospitals and other medical facilities.

Annual salary is $60,000. She will be devoting 33% of her time to this project. We are requesting $60,000 x.33 = $20,000 in subaward funds to support her time on this project.

Justification (line 2):

Fringe benefits @ 10% of salary. $20,000 x .10 = $2,000

Justification (line 3):

The Community Outreach Trainer makes presentations at hospitals and other medical facilities.

Annual salary is $40,000. She will be devoting 25% of her time to this project. We are requesting $40,000 x.25 = $10,000 in subaward funds to support her time on this project.

Justification (line 4):

Fringe benefits @ 10% of salary. $10,000 x .10 = $1,000

**FACILITIES**

Facilities refers to costs associated with leased space and rent.For each line item entered, you must include a justification that ties that item to the activities described in your narrative.

**TRAVEL AND TRAINING**

Travel expenses may include mileage and/or other transportation costs, meals and lodging consistent with the local jurisdiction's travel regulations and cannot exceed the State of Maryland reimbursement rate specified below. Training includes, but is not limited to, such costs as registration fees or tuition. For each line item entered, you must include a justification that ties that item to the activities described in your narrative.

Mileage maximum: $.625 cents/mile as of 7/1/2022.

Maximum Per Diem/Meal Allowance is $63/day ($15 Breakfast, $18 Lunch, $30 Dinner).

\*Lodging Per Diem must follow the GSA rate:

<https://www.gsa.gov/portal/content/104877>

**SERVICES**

Services include, but are not limited to, costs associated with telephone, copier, and utility services. For each line item entered, you must include a justification that ties that item to the activities described in your narrative.

**CONTRACTUAL SERVICES**

Consultant contracts for training or evaluation should be included here and shall be consistent with federal guidelines. If you are paying an outside agency for an employee, they are Contractual. For the line item description, enter the agency (Consulting firm, temporary agency, etc.), a dash and then the nature of the service to be provided (e.g., Consultants ABC – analyze evaluation data). For each line item entered, you must include a justification that ties that item to the activities described in your narrative. A copy of all contracts associated with items listed in the Contractual Services category must be provided to UBalt within 30 days following receipt of subcontract award.

**Construction projects are ineligible for funding under subaward projects and expenses for construction may not be included.**

**SUPPLIES**

Supplies include those items with an expected life of less than one year and that cost less than $5,000 per unit. Supplies include, but are not limited to, items such as laptop computers, telephones, recorders, projectors, cameras, calculators, pencils, paper, paper clips, staplers, and folders, etc. For each line item entered, you must include a justification that ties that item to the activities described in your narrative.

**EQUIPMENT**

Equipment is defined as having a useful life in excess of one year. Property Inventory Report Forms (PIRFs) will only be required for equipment that costs $5,000 or more per unit cost.

Costs include taxes, delivery, installation and similarly related charges. The procurement process used must be consistent with your written procurement guidelines. For each line item entered, you must include a justification that ties that item to the activities described in your narrative.

Maintaining internal inventory records for equipment procured under this subcontract is mandatory.

**INDIRECT COSTS**

Include the indirect costs and computations illustrating how the indirect costs were determined.

**E. APPLICATION STATUS INSTRUCTIONS**

After completing and reviewing all sections of the application, email your application to **OSR@ubalt.edu**, return receipt request. If the email is received by the UBalt, you will receive a receipt for your submission. Be sure to retain your receipt.

Your Application will be placed in a pending file while it is considered for funding.

After the UBalt has considered your application, you will be notified by email whether your application was selected for funding.

**F. DOCUMENTS INSTRUCTIONS**

Included required forms (e.g. Letters of Support) and other required documents in an appendix to your application.

**G. SIGNATURE PAGES**

The Certified Assurances and Federal Anti-Lobbying Certification must be signed by the appropriate agency representative and included with the application. Both forms may only be signed by the Applicant Agency's Authorized Official or their duly assigned alternate signatory.

**H. AUDIT FINDINGS / CORRECTIVE ACTION PLAN**

Applicants must submit copies of any Audit Findings and Corrective Action Plans with the application. **Do not send a copy of your audited financial statements**; ONLY the applicable audit findings and/or corrective action plan is required.

# **XV. CERTIFIED ASSURANCES**

1. [Certification Regarding Lobbying](http://www.ubalt.edu/about-ub/offices-and-services/provost/reporting-units/sponsored-research/Lobbying.pdf)
2. [Assurances – Non-Construction Programs](http://www.ubalt.edu/about-ub/offices-and-services/provost/reporting-units/sponsored-research/sf424b.pdf)