

RFA No. RMO DOR012221



**Government of the District of Columbia
Department of Behavioral Health (DBH)**

**RFA Title: District of Columbia Opioid Response (DCOR) Grant
Opportunities**

RFA Release Date: January 22, 2021

**Application Submission Deadline:
February 22, 2021, 12:00 p.m. ET**

Pre-Application Conference:

- Competition 1:** January 29, 2021 from 10:00-10:45 a.m.ET
- Competition 2:** January 29, 2021 from 11:00-11:45 a.m. ET
- Competition 3:** January 29, 2021 from 1:00-1:45 p.m. ET
- Competition 4:** January 29, 2021 from 2:00-2:45 p.m. ET
- Competition 5:** January 29, 2021 from 3:00-3:45 p.m. ET

Department of Behavioral Health (DBH)
 Adult Services Administration
Notice of Funding Availability (NOFA)
 RFA No. RM0 DOR012221
District of Columbia Opioid Response (DCOR) Grant Opportunities

The District of Columbia, Department of Behavioral Health (DBH) is soliciting applications from qualified applicants for services in the program and service areas described in this Notice of Funding Availability (NOFA). This announcement is to provide public notice of the DBH's intent to make funds available for the purpose described herein. The applicable Request for Application (RFA) will be released under a separate announcement with guidelines for submitting the application, review criteria, and DBH terms and conditions for applying for and receiving funding.

General Information:

Funding Opportunity Title:	District of Columbia Opioid Response (DCOR) Grant Opportunities
Funding Opportunity Number:	RM0 DOR012221
Opportunity Category:	Competitive
DBH Branch/Division Unit:	Adult Services Administration
Program Contact:	Julie Wiegandt Julie.Wiegandt@dc.gov
Program Description:	This RFA identifies opportunities for organizations in the District to provide prevention, treatment, and recovery support services to individuals with Opioid Use Disorder and Stimulant Use Disorder.
Eligible Applicants:	Eligible applicants must have the ability to enter into an agreement with DBH requiring compliance with all governing federal and District of Columbia laws and regulations, including Substance Use Disorders and Mental Health Grants (22-A DCMR Chapter 44).
Anticipated Number of Awards:	Competition 1: Up to 16 awards Competition 2: Up to 1 award Competition 3: Up to 4 awards Competition 4: Up to 1 award Competition 5: Up to 3 awards
Anticipated Amount Available:	Competition 1: Up to \$960,000 Competition 2: Up to \$200,000 Competition 3: Up to \$885,928 Competition 4: Up to \$424,883 Competition 5: Up to \$1,100,000
Floor Award Amount:	N/A
Ceiling Award Amount:	Competition 1: Up to \$960,000 total for all awards Competition 2: Up to \$200,000

	<p>Competition 3: Up to \$885,928 total for all awards</p> <p>Competition 4: Up to \$424,883</p> <p>Competition 5: Up to \$1,100,000 total for all awards</p>
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Funding Authorization:

Legislative Authorization:	Title II Division H of the Consolidated Appropriations Act 2020
Cost Sharing/Match Required?	No
RFA Release Date:	Friday, January 22, 2021
Pre-Application Conference (Date):	Friday, January 29, 2021
Pre-Application Conference (Times):	<p>Competition 1: January 29, 2021 from 10:00-10:45 a.m. ET</p> <p>Competition 2: January 29, 2021 from 11:00-11:45 a.m. ET</p> <p>Competition 3: January 29, 2021 from 1:00-1:45 p.m. ET</p> <p>Competition 4: January 29, 2021 from 2:00-2:45 p.m. ET</p> <p>Competition 5: January 29, 2021 from 3:00-3:45 p.m. ET</p>
Pre-Application Conference (WebEx/Conference Call Access):	Please find access information (web link and phone number) for each competition in Request for Application.
Letter of Intent Due Date:	Tuesday, January 26, 2021
Application Deadline Date:	Monday, February 22, 2021
Application Deadline Time:	12:00 p.m. ET
Links to Additional Information about this Funding Opportunity:	<p>DC Grants Clearinghouse: https://communityaffairs.dc.gov/content/community-grant-program#4</p> <p>DBH RFA Opportunities: https://dbh.dc.gov/page/request-applications-001</p>

Notes:

- A. DBH reserves the right to issue addenda and/or amendments subsequent to the issuance of the NOFA or RFA, or to rescind the NOFA or RFA.
- B. Awards are contingent upon the availability of funds.**
- C. Individuals are not eligible for DBH grant funding.
- D. Applicants must have a DUNS#, Tax ID#, and be registered in the federal Systems for Award Management (SAM).
- E. Contact the program manager assigned to this funding opportunity for additional information.

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District of Columbia Department of Behavioral Health RFA Terms and Conditions

The following terms and conditions are applicable to this and all Requests for Applications (RFA) issued by the District of Columbia Department of Behavioral Health (DBH) and to all awards, if funded under this RFA:

- Funding for a DC DBH award/sub-award is contingent on DBH's receipt of funding (local or federal) to support the services and activities to be provided under this RFA.
- The RFA does not commit DBH to make an award.
- DBH may suspend or terminate any RFA pursuant to its own grant making rule(s) or any applicable federal law, regulation, or requirement.
- Individual persons are not eligible to apply or receive funding under any DBH RFA.
- DBH reserves the right to accept or deny any or all applications if DBH determines it is in the best interest of DBH to do so. An application will be rejected if it does not comply with eligibility requirements outlined in the RFA. DBH shall notify the applicant if it rejects that applicant's proposal for review.
- DBH reserves the right to issue addenda and/or amendments subsequent to the issuance of the RFA, or to rescind the RFA. The prospective applicant is responsible for retrieving this information via sources outlined in the RFA (e.g., DC Grants Clearinghouse).
- DBH shall not be liable for any costs incurred in the preparation of applications in response to the RFA. Applicant agrees that all costs incurred in developing the application are the applicant's sole responsibility. No funds already awarded to the applicant under other instruments or agreements shall be used by the applicant to fund the preparation of this application.
- DBH may conduct pre-award on-site visits to verify information submitted in the application and to determine if the applicant's facilities are appropriate for the services intended. In addition, DBH may review the fiscal system and programmatic capabilities to ensure that the organization has adequate systems in place to implement the proposed program.
- DBH shall determine an applicant's eligibility by way of local and federal registries for excluded parties, searches and documents, and certifications submitted by the applicant.
- The Applicant Organization must obtain a Data Universal Numbering System (DUNS) number to apply for funding and register for the federal System for Award Management (SAM) at www.sam.gov prior to award.
- DBH reserves the right to require registry into local and federal systems for award management at any point prior to or during the Project Period.
- DBH may enter into negotiations with an applicant and adopt a firm funding amount or other revision of the applicant's proposal that may result from negotiations.
- If funded, the applicant will receive a Notice of Grant Award (NOGA), which shall incorporate the requirements of this RFA and identify the project period and budget period.
- Continuation funding, if awarded, shall be based on availability of funds, documented satisfactory progress in interim and annual reports, continued eligibility, and determination that the continued funding and activities is in the best interest of the District of Columbia.
- OMB 2 CFR Part 200 (effective December 26, 2014) and 45 CFR Chapter 75, and Title 22A, D.C. Municipal Regulation, Chapter 44, apply to all grants issued under this RFA.
- If there are any conflicts between the terms and conditions of the RFA and any applicable federal or local law or regulation, or any ambiguity related thereto, then the provisions of the applicable law or regulation shall control and it shall be the responsibility of the applicant to ensure compliance.

Additional information about grants management policy and procedures may be obtained at the following site: <https://is.dc.gov/book/citywide-grant-manual-and-sourcebook> (City-Wide Grants Manual and Sourcebook).

If your agency would like to obtain a copy of the DBH RFA Dispute Resolution Procedures, please contact the DBH Grants Management Office at DBH.Grants@dc.gov or find on the DBH website, www.dbh.dc.gov under Opportunities, Request for Applications. Your request for this document **will not** be shared with DBH program staff or reviewers.

CHECKLIST FOR APPLICATIONS

The complete Application Package should include the following:

- Notice of Eligibility and Experience Requirements (**Attachment A**)
- Intent to Apply Notification (**Attachment B**)
- Application Profile (**Attachment C**)
- Table of Contents
- Project Abstract (**Attachment C**)
- Project Narrative
- Work Plan (**Attachment D**)
- Staffing Plan (**Attachment E**)
- Budget and Budget Justification (**Attachment F**)
- Advance Payment Request Form (**Attachment G**)
- Letters of Agreement
- Organization's Required Documents
 - A.** Business License & Certificate of Occupancy
 - B.** Clean Hands Certification
 - C.** 501(c)(3) Letter
 - D.** Articles of Incorporation & Bylaws
 - E.** IRS W-9 Tax Form
 - F.** IRS Tax Exemption Letter
 - G.** Current Fiscal Year Budget
 - H.** Financial Statements
 - I.** Separation of Duties Policy
 - J.** Board of Directors
 - K.** System of Award Management (SAM) Registration
 - L.** Partner Documents (if applicable)
 - M.** Proof of Insurance for Commercial, General Liability, Professional Liability, Comprehensive Automobile and Worker's Compensation

- General Terms and Conditions (Attachment 1)
- Assurances, Certifications, & Disclosures (Attachment 2)
- Program Income and Financial Disclosure (Attachment 3)
- DC Contribution and Solicitation Certification (Attachment 4)
- Federal Assurances and Certifications (Attachment 5)
- Special Terms of State Opioid Response (SOR) Award Funding (Attachment 6)
- Special Terms of Award Funding (Attachment 7)
- Tax Certification (Attachment 8)
- Sub-Grantee Single Audit Certification (Attachment 9)
- DBH Grant Terms and Conditions (Attachment 10)
- Documents requiring signature have been signed by an agency head or **AUTHORIZED** Representative of the applicant organization.
- The application must have a DUNS number to be awarded funds. Go to Dun and Bradstreet to apply for and obtain a DUNS # if needed.
- The Project Narrative is typed using the following formats: 8-½ by 11-inch paper, 1.0 spaced, Arial or Times New Roman font 12-point type (10-point font for tables and figures), and a minimum of one-inch margins. **Applications that do not conform to these requirements will not be forwarded to the review panel.**
- The application proposal format conforms to the “Application Elements” listed in the RFA.
- The proposed budget is complete and complies with the budget forms provided in the RFA. The budget narrative is complete and describes the categories of items proposed.
- The proposed work plan, logic model, and other attachments are complete and comply with the forms and format provided in the RFA.
- Submit your application via email to DBH Grants, DBH.Grants@dc.gov by **12:00 p.m. ET** on the deadline of **February 22, 2021**. **Applications will not be accepted late. Applicants are encouraged to submit their applications on February 22, 2021 to allow time for any required troubleshooting.**

GENERAL INFORMATION

Key Dates

Notice of Funding Announcement Date: Friday, January 22, 2021

Request for Application Release Date: Friday, January 22, 2021

Letter of Intent Due Date: Tuesday, January 26, 2021

Pre-Application Conference Date: Friday, January 29, 2021

Application Submission Deadline: Monday, February 22, 2021

Anticipated Award Start Date: Monday, March 15, 2021

Authority for the Grant

The Department of Behavioral Health (DBH) was established, effective October 1, 2013, by the Department of Behavioral Health Establishment Act, D.C. Law 20-0061, D.C. Official Code § 7-1141.01, *et seq.*, and is the successor-in-interest to the Department of Mental Health, established by the Mental Health Establishment Amendment Act of 2001, effective December 18, 2001 and the Department of Health Addiction Prevention and Recovery Administration, established in the Department of Health by Reorganization Plan No. 4 of 1996, effective July 17, 1996. DBH is responsible, *inter alia*, for developing and monitoring comprehensive and integrated behavioral health systems of care for adults and for children, youth and their families, and serves as the state mental health authority and as the single state agency for substance abuse services. The Director of DBH has the authority to make grants pursuant to D.C. Official Code § 7-1141.06(7) and has implemented this authority by rulemaking in Title 22A, D.C. Municipal Regulation, Chapter 44.

Overview

The Government of the District of Columbia, Department of Behavioral Health, Adult Services Administration is soliciting applications from qualified organizations to implement initiatives that build a comprehensive system of care for residents with opioid use disorder (OUD) throughout the District under the District of Columbia Opioid Response (DCOR) grants (i.e., DCOR 1 and 2). The purpose of the DCOR grants are to increase access to medications for opioid use disorder (MOUD), reduce unmet treatment needs, and reduce opioid and stimulant overdose-related deaths in DC through the provision of prevention, treatment, and recovery support services (RSS) to individuals with OUD. Under the DCOR 2 grant, there can also be a focus on individuals with stimulant use disorder (STUD) Applicants may apply to one or several of the opportunities listed in this RFA.

This solicitation includes four (5) application opportunities:

Competition 1: Faith-Based Prevention, Outreach, and Recovery

Competition 2: Pregnant and Parenting Individuals: Screening for Substance Use Disorders

Competition 3: Pregnant and Parenting Individuals: Treatment for Substance Use Disorders

Competition 4: Hospital-Based Naloxone Training and Technical Assistance

Competition 5: Comprehensive Care Management for Individuals with Opioid and/or Stimulant Use Disorder

Applying To Multiple Competitions

An organization applying to multiple competitions must submit a separate application for each competition. Applications may not be combined.

Source of Grant Funding

Funding for competitions 2, 3, and 4 is made available from the United States Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, State Opioid Response (SOR) 1 grant program. Funding for competitions 1 and 5 is made available

from the United States Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, SOR 2 grant program.

AWARD INFORMATION

Amount of Funding Available

Competition 1 (Faith-Based Prevention, Outreach, and Recovery): This RFA will make available up to \$960,000 for up to 16 awards over 1 base year with 4 option years. Each individual grant budget should not exceed \$60,000.

Competition 2 (Pregnant and Parenting Individuals: Screening for Substance Use Disorders): This RFA will make available up to \$200,000 for 1 award over 1 base year.

Competition 3 (Pregnant and Parenting Individuals: Treatment for Substance Use Disorders): This RFA will make available up to \$885,928 for up to 4 awards over 1 base year. Each individual grant budget should not exceed \$300,000.

Competition 4 (Hospital-Based Naloxone Training and Technical Assistance and Workflow): This RFA will make available \$424,883 for 1 award over 1 base year.

Competition 5: (Comprehensive Care Management for Individuals with Opioid and/or Stimulant Use Disorder): This RFA will make available up to \$1,100,000 for up to 3 awards over 1 base year with 4 option years. Each individual grant budget should not exceed \$500,000.

Performance and Funding Period

The anticipated performance and funding period is April 1 through September 29, 2021. Subsequent to the first 6-month budget period, funding will be awarded for up to 4 option years for competitions 1 and 5. **The number of awards, budget periods and award amounts are contingent upon the continued availability of funds and the recipient performance.**

Eligibility Requirements

A. Eligibility requirements for all competitions associated with this RFA:

1. Ability to enter into an agreement with DBH requiring compliance with all governing federal and District of Columbia laws and regulations, including Substance Use Disorders and Mental Health Grants (22-A DCMR Chapter 44).

Additional eligibility criteria are listed under each competition as applicable.

Non-Supplantation

Recipients must supplement, and not supplant, funds from other sources for initiatives that are the same or similar to the initiatives proposed in this award. Further, 45 CFR Chapter 75 contains additional restrictions for for-profit commercial entities that may require a reduction of approved grant awards based upon program income earned.

Application Page Limit

The documents that will be counted in the page limit may not exceed the equivalent of **11 (eleven)** pages. Letters of agreement are not included in the page limit. The page limit includes the following documents:

- A. Project Abstract – One (1) page**
- B. Project Narrative –Ten (10) pages**

BACKGROUND & PURPOSE

Background

The DCOR grants (i.e., DCOR 1 and 2) are focused on increasing access to medications for opioid use disorder (MOUD), reducing unmet treatment needs, and reducing opioid overdose-related deaths in the District through the provision of prevention, treatment, and recovery support services (RSS) to individuals with opioid use disorder (OUD). Under the DCOR 2 grant, there can also be a focus on individuals with stimulant use disorder (STUD). The District is building a model with multiple access points to a coordinated network of treatment and RSS providers that will collaborate around the assessment, stabilization, and ongoing treatment of individuals with OUD and STUD.

LIVE. LONG. DC., the District's Strategic Plan to Reduce Opioid Use, Misuse, and Related Deaths, will continue to build the city-wide effort to ensure equitable and timely access to high-quality substance use disorder (SUD) treatment and RSS through a network of treatment services that are adequate to meet demand consistent with the criteria of the American Society of Addiction Medicine (ASAM); educate District residents and key stakeholders on the risk of OUD and effective prevention and treatment; engage health professionals and organizations in the prevention and early intervention of SUD among District residents; support the awareness and availability of, and access to, harm reduction services in the District consistent with evolving best and promising practices; develop and implement a shared vision between the District's justice and public health agencies to address the needs of individuals who come in contact with the criminal justice system; and prepare for program sustainability through evaluation, planning, and performance monitoring and training.

DBH is particularly interested in supporting innovative initiatives under DCOR that reflect the urgency around increased overdose deaths driven primarily by an increased amount of fentanyl in both opioids and stimulants (primarily cocaine and methamphetamines). After a slight decrease in overdose deaths in 2018, the number of deaths rose to 281 in 2019 and is on track to increase again in 2020. There have been 317 overdose deaths in the District through September 2020 compared to only 194 during the same timeframe in 2019. The percentage of fentanyl or fentanyl analogs involved with opioid overdoses has steadily increased since the first quarter of 2015 (22%) to 95% in 2020. This increase in preventable deaths, alongside the dramatic change in the District's drug supply, calls for a move away from "business as usual" and towards creative strategies that can make meaningful, positive impact for District residents who have OUD and/or STUD.

Purpose

The competitions included in this RFA are all tied to the following specific goals and strategies within the LIVE. LONG. DC. strategic plan:

Competition 1 (Faith-Based Prevention, Outreach, and Recovery): This competition will support the District to address Goal 2, Strategy 2.3, "Conduct outreach and training in community settings (e.g., after-school programs, summer camps, churches, and community centers) to engage youth, parents, educators, school staff, and childcare providers on ways to effectively communicate regarding substance use disorder and engage/support those impacted." It also supports Strategy 4.1, "Increase harm reduction education to families and communities, including naloxone distribution for those most affected."

Competition 2 (Pregnant and Parenting Individuals: Screening for Substance Use Disorders): This competition will support the District to address Goal 5, "Ensure equitable and timely access to high-quality substance use disorder treatment and recovery support services."

Competition 3 (Pregnant and Parenting Individuals: Treatment for Substance Use Disorders):

This competition will support the District to address Goal 5, “Ensure equitable and timely access to high-quality substance use disorder treatment and recovery support services.”

Competition 4 (Hospital-Based Naloxone Training and Technical Assistance): This competition will support the LIVE. LONG.DC. Plan Strategy 3.8, “Encourage provider continuing education on increasing prescriptions of naloxone for persons identified with OUD or those at risk.” It also supports Strategy 4.1, “Increase harm reduction education to families and communities, including naloxone distribution for those most affected.”

Competition 5 (Comprehensive Care Management): This competition will support the District to address Goal 5, Strategy 5.5, “Incorporate emphasis on physical health (including intensive health screenings) and mental well-being in substance use disorder treatment and programming.”

COMPETITION 1:
FAITH-BASED PREVENTION, OUTREACH, AND RECOVERY

Background

A primary goal of the LIVE. LONG. DC. Strategy and the District of Columbia Opioid Response (DCOR 2) initiative is to leverage and enhance the experience and knowledge of community-based organizations to connect with a wide range of families and individuals living in the District. By working with organizations who operate outside of the formal behavioral health system, Department of Behavioral Health (DBH) hopes to engage community members who do not necessarily need behavioral health services themselves, but may need help seeking treatment for a friend, neighbor, or loved one. DBH also hopes to leverage the credibility and reach of faith-based organizations specifically to raise awareness about both the risks associated with opioids and stimulants as well as the possibilities for treatment and recovery. Most importantly, DBH hopes that partnering with faith-based organizations will help alleviate the stigma around substance use disorders and allow community members to feel empowered to help their neighbors by being knowledgeable about treatment and recovery options and carrying naloxone.

DBH has engaged with faith-based partners previously by supporting naloxone trainings and educational events about opioid use disorder (OUD), treatment, and recovery. The goal of this grant is to deepen and expand that work by supporting more extensive programming around community education and prevention, stigma reduction, treatment and recovery support, and the importance of naloxone and harm reduction. DBH is also encouraging faith-based partners to proactively reach out to members of their community who may benefit from the grant's supported activities to increase awareness and maximize the reach of these important services.

This competition will support the District to address Goal 2, Strategy 2.3 in the LIVE.LONG.DC strategic plan, "Conduct outreach and training in community settings (e.g., after-school programs, summer camps, churches, and community centers) to engage youth, parents, educators, school staff, and childcare providers on ways to effectively communicate regarding substance use disorder and engage/support those impacted." It also supports Strategy 4.1, "Increase harm reduction education to families and communities, including naloxone distribution for those most affected." This competition will be funded by the DCOR 2 grant.

Pre-Application Meeting

A Pre-Application Meeting will be held on January 29, 2021. The meeting will be held virtually at the time below:

Competition 1: January 29, 2021 from 10:00-10:45am

Meeting link: <https://dcnet.webex.com/dcnet/j.php?MTID=m9a2927e47e21f722bd8708495f61977b>

Meeting number: 180 401 6676

Password: Wx2djqXhM75

Join by video system: Dial 1804016676@dcnet.webex.com

You can also dial 173.243.2.68 and enter your meeting number.

Join by phone: 1-650-479-3208 Call-in number (US/Canada)

+1-202-860-2110 United States Toll (Washington D.C.)

Access code: 180 401 6676

The meeting will provide an overview of the RFA requirements and address specific issues and concerns about the RFA. No applications shall be accepted by any DBH personnel at this conference. Do not submit drafts, outlines, or summaries to DBH for review, comment, or technical assistance.

Performance Requirements

Eligibility Criteria

Eligible entities who can apply for grant funds under this RFA are/have:

1. Faith-based organizations located in the District of Columbia;
2. 501(c)(3) non-profit status, or the ability to enlist the services of a fiscal agent that meets this criteria to apply for the funding on behalf of the applicant organization; and,
3. Active Charitable Solicitation license from DC Department of Consumer and Regulatory Affairs (DCRA).

Experience Criteria

Those applying should meet the following criteria:

1. Demonstrated ability to start work within seven (7) days of award; and,
2. If a current or former DBH grantee, the ability to prove compliance with all past or ongoing grant requirements (e.g., proof that all milestones have been met, data reports submitted, etc.).

Target Population

The target population is individuals who live in the District of Columbia.

Location of Services

Services associated with this grant must take place in the District of Columbia. Applicants must specify their ward and describe their community's need for harm reduction and substance use prevention services (e.g., information about overdoses, high prevalence of people in recovery, etc.). Preference will be given to applicants in wards 5, 6, 7, and 8 due to the high proportion of overdoses (fatal and nonfatal) in these wards.

Scope of Services

Services to be provided under the Faith-Based Prevention, Outreach, and Recovery initiative include the following:

1. Disseminate literature and materials using information provided by DBH regarding OUD and STUD prevention, treatment (including MOUD), and recovery, both in-person and virtually (at least once per month) over social media channels;
2. Host at least six (6) community events that aim to educate the community about OUD and STUD, treatment options, recovery, and naloxone. Applicants have flexibility to determine the themes and format of the events, but they should include a plan for each event in the application (e.g., theme, intended audience, specific activities). At least three (3) of the events must feature individuals who have lived experience with OUD or STUD;
3. Obtain a standing order to distribute naloxone via DC Health;
4. Host at least three naloxone (3) training and distribution events. Event attendees should all leave with at least one (1) dose of naloxone;
5. Host 12-step groups, support groups (e.g., groups led by a DBH recovery coach), or some other activity for individuals with SUD, as well as family support groups (applicants should describe their intended number of sessions). Applicants are encouraged to partner with treatment providers or other organizations to host these groups. All groups must be supportive of MOUD as an evidence-based treatment path to recovery;
6. Host a Drug Take Back Day that promotes safe disposal of expired and unused medications;
7. Sponsor International Opioid Awareness Day activities in August;
8. Host at least three (3) "Days of Recovery" during primary days of worship using DBH-provided information regarding OUD prevention, treatment (including MOUD), and recovery;

9. Plan and execute at least three (3) outreach events that aim to engage the broader community (outside of the applicant's congregation) in treatment, recovery, or naloxone-related activities. At least one (1) of these events must focus on stigma reduction. These outreach events can be completed in conjunction with the six (6) community events or separately. Applicants are expected to plan and execute these events with other community or faith-based organizations that are addressing the opioid epidemic. Applicants have flexibility to determine the themes and format of the events, but they should include a work plan (**Attachment D**) for each event in the application (e.g., theme, intended audience, specific activities); and,
10. Meet, as prescribed by DBH, with other SOR grantees and stakeholders in the same ward that are addressing the opioid epidemic.

Data Collection and Reporting

Applicants must describe their capacity to accurately capture and report the following key outcomes:

1. Number of individuals at each event and cumulatively (demonstrated through completed sign-in sheets);
 2. Number of individuals who received naloxone training;
 3. Number of individuals who were provided naloxone;
 4. A list of major themes and comments from the workshops and trainings; and,
 5. A list of partners engaged in the planning and execution of events and outreach activities.
- A. Annual reporting: On an annual basis, the grantee must provide summary data on their events and activities. Annual reports shall include, at a minimum, the administrative data points included in the monthly reports.
 - B. Applicants must also obtain continuous feedback from the individuals, families and community they serve to ensure that the events and activities offered are aligned with the needs and wants of the community. The applicant must describe the process, methods, and frequency (e.g., bi-monthly, paper-based surveys or social media polls) to obtain feedback. Organizations are encouraged to be creative and innovative.

Data Collection and Tracking

1. Grantees will identify a point of contact for all data matters pertaining to the activities.
2. Grantees will be responsible for tracking and evaluating grant activities.
3. Grantees will submit program narrative and data reports to DBH and participate in annual programmatic site visits.

APPLICATION REQUIREMENTS

Project Narrative – up to ten (10) pages

A. Organizational Capacity

Applicants should include the following information to highlight their experience and capacity to implement the grant activities:

1. Describe their mission, structure, scope of current activities, experience, and capacity to meet the deliverables outlined in this RFA;
2. Describe how existing resources, materials, and partnerships can be leveraged to educate the communities and congregations;
3. Describe the team who will work on this initiative, including anyone that would be hired to run this work;
4. Describe the process that the applicant will implement to promote these activities and events with members of the congregation and the community (virtual and otherwise);

5. Describe any potential challenges and contingency plans for addressing concerns related to circumstances that may arise; and,
6. Describe the organization's plan to be fully operational within seven (7) calendar days of the new grant agreement.

B. Project Need

Applicants should describe the unmet need for faith-based recovery and treatment activities in the community where the activities will occur. Note: if referencing publicly-available sources of needs assessment data, citations must be provided.

C. Project Description (align to Work Plan, Attachment D)

Applicants should describe their plan to develop and implement the following activities:

1. Creating marketing items (including items such as posters, flyers, palm cards, brochures, and social media content) using information provided by DBH regarding OUD prevention, treatment (including MOUD), and recovery;
2. Hosting at least six (6) community events that aim to educate the community about OUD and STUD, treatment options, recovery, and naloxone. Applicants have flexibility to determine the themes and format of the events, but they should include a plan for each event in the application (e.g., timeline, theme, intended audience, specific activities). At least three (3) of the events must feature individuals who have lived experience with OUD or STUD;
3. Identifying an individual responsible for obtaining a standing order to distribute naloxone via DC Health;
5. Hosting at least three naloxone training and distribution events. Event attendees should all leave with at least one (1) dose of naloxone. These events can take place in conjunction with other events. Applicants should describe any potential partners;
6. Hosting 12-step groups, support groups (e.g., groups led by a DBH recovery coach) or some other activity for individuals with SUD, as well as family support groups (describe number of sessions). Applicants are encouraged to partner with treatment providers to host these groups. All groups must be supportive of MOUD as a valid and evidence-based path to recovery;
7. Hosting a Drug Take Back Day that promotes safe disposal of expired and unused medications;
8. Sponsoring International Opioid Awareness Day activities in August;
9. Hosting at least three (3) "Days of Recovery" during primary days of worship using DBH-provided information regarding OUD prevention, treatment (including MOUD), and recovery;
10. Planning and executing at least three (3) outreach events that aim to engage the broader community (outside of the applicant's congregation) in treatment, recovery, or naloxone-related activities. At least one (1) of these events must focus on stigma reduction. These outreach events can be completed in conjunction with the six (6) community events or separately. Applicants should describe their plans to partner with other community or faith-based organizations. Applicants have flexibility to determine the themes and format of the events, but they should include a plan for each event in the application (e.g. timeline, theme, intended audience, specific activities); and,
11. Meeting, as prescribed by DBH, with other SOR grantees and stakeholders in the same Ward that are addressing the opioid epidemic.

A sample work plan from a past initiative is attached as Attachment 11.

D. Project Evaluation

The applicant must include clear, quantitative goals and objectives for the grant period.

The section should describe the applicant's plan to evaluate the activities. The description should include the proposed targets (e.g., percent to be achieved) to be approved by DBH for the following key grant outcomes:

1. Number of individuals at each event (demonstrated through completed sign-in sheets);
2. Number of individuals served by the program by activity and cumulatively;
3. Number of individuals who received naloxone training; and,
4. Number of individuals who were provided naloxone.

The grantee may propose additional outcome measures specific to their activities, subject to DBH approval. The section should also briefly describe the infrastructure that will support evaluation activities.

Project Attachments

Some of the attachments for this application include required templates that the applicants must use, as indicated below.

A. Project Abstract (1 page)

A one-page project abstract is required (see **Attachment C**). Please provide a one-page abstract that is clear, accurate, concise, and without reference to other parts of the Project Narrative. The project abstract must be typed on 8 ½ by 11-inch paper, 1.0 spaced, Arial or Times New Roman font using 12-point type (10-point font for tables and figures) with a minimum of one-inch margins, **limited to one page in length**, and include the following sections (*no template provided*):

1. **Project Description:** Briefly outline how the organization will implement the project in service of the goal and objectives.
2. **Performance Metrics:** Outline the key outcome and process metrics and associated targets that will be used to assess grantee performance.

B. Work Plan (not counted in page limit)

The work plan template (see **Attachment D**) provided by DBH is required. The work plan describes key activities and tasks to successfully deliver the (program/effort) scope of services and aligns with the Project Description narrative under Application Requirements. The activities and tasks should be organized chronologically, and each should have an identified responsible staff, target completion date, and associated output.

C. Staffing Plan (not counted in page limit)

The applicant's staff plan template (see **Attachment E**) provided by DBH is required. The staffing plan should describe staff duties, qualifications, and the percent of time to be spent on project activities, and whether the time will be charged to the grant. The plan should clearly indicate which staff positions will need to be hired. Staff CVs, resumes, and position descriptions shall be submitted and will not count towards the page limit. Staffing should include, at a minimum, the program director responsible for the oversight and day-to-day management of the proposed program; staff responsible for service delivery; staff responsible for monitoring programmatic activities and use of funds; and staff responsible for data collection, quality, and reporting.

D. Project Budget and Justification (not counted in page limit)

The application should include a project budget (see **Attachment F**) with justification using the provided template. The project budget and budget justification should be directly

aligned with the work plan and project description. All expenses should relate directly to achieving the key grant outcomes, including the following activities:

1. Hosting activities and events that educate the community and raise awareness about OUD and STUD;
2. Hosting naloxone trainings and distributing naloxone; and,
3. Hosting support activities for individuals with SUD and their families.

The budget should reflect a six (6) month period. Personnel charges must be based on actual, not budgeted labor. Salaries and other expenditures budgeted for in the grant must be for activities that will occur during the six (6) month grant period.

Grant funds cannot be used to:

1. Pay for promotional items including, but not limited to, clothing and commemorative items such as pens, mugs/cups, folders/folios, lanyards, and conference bags;
2. Make direct payments to individuals to enter treatment or continue to participate in prevention or treatment services; and,
3. Pay for meals. Grant funds may be used for light snacks, not to exceed \$3.00 per person per day.

The following categories and descriptions should be covered in the Budget/Justification:

1. **Personnel:** Include the title of the position, job description (for peers and supervisors and relevant hospital staff), name (or indicate vacancy), annual salary (cannot exceed \$197,300) and level of effort (percentage of time) dedicated to this project.
2. **Fringe:** Provide the position, name (or indicate vacancy), total fringe benefit rate used.
3. **Travel:** Only local travel related to the (insert name of project/effort) and for the project staff will be approved in the grant budget. Provide purpose, destination, and type of travel.
4. **Equipment:** Provide the item, quantity, amount, and percent charged to the grant.
5. **Supplies:** Include the items being requested and rate. Description should also include how the supplies directly support the project.
6. **Contractual:** Provide the name of entity and identify whether it's a sub-recipient, contractor, consultant, or service. Also, provide the entity's rate. Any vendors selected under this RFA will be required to provide a breakdown of its personnel costs for each person performing services under the contract. This breakdown shall include: the actual salary paid, the actual fringe rate applied to the salary, any overhead applied, and the profit amount.
7. **Other Direct Costs:** List any costs not included in any of the other cost categories.
8. **Indirect Costs:** Indirect costs should not exceed 10% of direct costs unless the organization has a negotiated indirect cost rate agreement. Please reference 45 CFR §75.414.
9. **Program Income:** If the possibility of generating program income as a result of DBH funding exists, list source and amount as budget line items.

E. **Advances (not counted in page limit)**

An applicant seeking an advance, must submit a completed Advance Payment Request form (**Attachment G**) signed by the organization's Chair of the Board of Directors and Executive

Director, or equivalent positions. Applicants must detail the amount requested per budget category in the budget and justification (see **Attachment F**). **No advance payment will be provided without prior official request and approval.**

F. **Letters of Agreement (not counted in page limit)**

Applicant should submit all letters of agreement, from other agencies and organizations, that will be actively engaged in the proposed project (*no template provided*).

G. **Business License (not counted in page limit)**

The applicant must submit a current business license with Active Charitable Solicitation and Certificate of Occupancy issued by the District of Columbia Department of Consumer and Regulatory Affairs. If the applicant does not have a current license, a copy of the business license application and receipt filed no later than the due date of the grant application may be submitted.

H. **Clean Hands Certification (not counted in page limit)**

Each applicant must submit a current Clean Hands Certification from the District of Columbia Office of Tax and Revenue (OTR). DBH requires that the submitted Clean Hands Certification reflect a date within a six-month period immediately preceding the application's submission. Self-Certification and Certificates of Good Standing are not acceptable.

I. **501(c)(3) Letter (not counted in page limit)**

The applicant must submit the organization's determination or affirmation letter approving and/or confirming the tax-exempt status.

J. **Articles of Incorporation & Bylaws (not counted in page limit)**

The applicant must submit a copy of each with certification of current/active Articles of Incorporation from the DC Department of Consumer and Regulatory Affairs.

K. **IRS W-9 Tax Form (not counted in page limit)**

The applicant must submit a current completed W-9 form prepared for the U.S. Internal Revenue Service (IRS). DBH defines "current" to mean the document was completed within the same calendar year as that of the application date.

L. **IRS Tax Exemption Affirmation Letter (not counted in page limit)**

The tax exemption affirmation letter is the IRS's determination letter of non-profit status. If this letter is not available, then the applicant should provide its most recent IRS Form 990 tax return if one was submitted. If no return has yet been filed, the organization can submit its application for tax-exempt status. If the group has a supporting organization with an IRS tax-exempt status determination, then that organization's tax exemption affirmation letter should also be submitted.

If there is no IRS tax exemption letter because the organization is a religious organization, then the applicant may submit the best evidence it can of its status. Examples of potential best evidence for this purpose include, but are not limited to (i) a letter from the leader of the organization verifying that the organization is a religious group; (ii) a letter from the group's board chair or similar official, verifying that the organization is a religious group; (iii) the applicant's most recently submitted state sales or other tax exemption form, if it exists (Form 164 in the District of Columbia); or (iv) the state's issued tax exemption certificate or card, if it exists. (See IRS publication no. 1828, *Tax Guide for Churches and Religious Organizations*).

M. **Current Fiscal Year Budget (not counted in page limit)**

The applicant must submit its full budget, including a projected income, for the current fiscal year and comparison of budgeted versus actual income and expenses of the fiscal year, to

date.

N. Financial Statements (not counted in page limit)

If the applicant has undergone an audit or financial review, it must provide the most recent audited financial statements or reviews. If audited financial statements or reviews are not available, the applicant must provide its most recent complete year's unaudited financial statements.

O. Separation of Duties Policy (not counted in page limit)

The applicant must state how the organization separates financial transactions and duties among people within the organization to prevent fraud or waste. This may be a statement that already exists as a formal policy of the organization, or the applicant may create the statement for purposes of the application. The applicant should state which of these situations apply.

This statement should:

1. Describe how financial transactions are handled and recorded;
2. Provide the names and titles of personnel involved in handling money;
3. Identify how many signatures the financial institution(s) require on the organization's checks and withdrawal slips; and,
4. Address other limits on staff and board members' handling of the organization's money.

P. Board of Directors (not counted in page limit)

The applicant must submit an official list of the current board of directors on letterhead to include: names and board titles of officers, mailing and e-mail addresses, and phone numbers. The document must be signed by the authorized executive of the applicant organization.

Q. System for Award Management (SAM) Registration

If a project within this RFA is funded wholly or partially by federal funding sources, applicants must be registered in the System of Award Management at www.sam.gov and provide evidence of this registration as part of the application package.

R. Partner Documents (not counted in page limit)

If applicable, the applicant must submit the partnering organization's Clean Hands Certificate (from the Office of Tax and Revenue) and documentation of the partner's tax-exempt status.

S. Proof of Insurance for: Commercial, General Liability, Professional Liability, Comprehensive Automobile and Worker's Compensation (not counted in page limit)

The applicant must provide in writing the name of all its insurance carriers and type of insurance provided (e.g., its general liability insurance carrier and automobile insurance carrier, worker's compensation insurance carrier), fidelity bond holder (if applicable), and before execution of the grant award, a copy of the binder or cover sheet of the current policy for any policy that covers activities that might be undertaken in connection with performance of the grant award, showing the limits of coverage and endorsements.

All policies, except the Worker's Compensation, Errors and Omissions, and Professional Liability policies that cover activities that might be undertaken in connection with the performance of the grant award shall contain additional endorsements naming the Government of the District of Columbia and its officers, employees, agents and volunteers as additional named insured with respect to liability abilities arising out of the performance of services under the grant award. The applicant shall require their insurance carrier of the

required coverage to waive all rights of subrogation against the District, its officers, employees, agents, volunteers, contractors, and subcontractors.

EVALUATION CRITERIA

Indicators have been developed for each review criterion to assist the applicant in presenting pertinent information and to provide the reviewer with a standard for evaluation. The five review criteria are outlined below with specific detail and scoring points. These criteria are the basis upon which the reviewers will evaluate the application. The entire proposal will be considered during objective review.

Criterion 1: Capacity (Corresponds to Organizational Capacity Section) – 30 points

Applicants should:

1. Describe their mission, structure, scope of current activities, experience, and capacity to meet the deliverables outlined in this RFA **(5 points)**;
2. Describe how existing resources, materials, and partnerships can be leveraged to educate the communities and congregations **(5 points)**;
3. Describe the team who will work on this initiative, including anyone that would be hired to run this work **(5 points)**;
4. Describe the process that the applicant will implement to promote these activities and events with members of the congregation and the community (virtual and otherwise) **(5 points)**;
5. Describe any potential challenges and contingency plans for addressing concerns related to circumstances that may arise **(5 points)**; and,
6. Describe the organization's plan to be fully operational within thirty (30) days of the new grant agreement **(5 points)**.

Criterion 2: Need (Corresponds to Project Need Section) – 20 points

Applicants described the unmet need for faith-based treatment and recovery activities in the community where the activities will occur. Note: if referencing publicly-available sources of needs assessment data, citations must be provided **(5 points)**. Preference will be given to applicants in wards 5, 6, 7, and 8 **(15 points)**.

Criterion 3: Strategic Approach (Corresponds to Project Description Section) – 50 points

Applicants should describe their plan to develop and implement the following activities:

1. Creating marketing items (including items such as posters, flyers, palm cards, brochures, and social media content) using information provided by DBH regarding OUD prevention, treatment (including MOUD), and recovery **(5 points)**;
2. Hosting at least six (6) community events that aim to educate the community about OUD and STUD, treatment options, recovery, and naloxone. Applicants have flexibility to determine the themes and format of the events, but they should include a plan for each event in the application (e.g. timeline, theme, intended audience, specific activities). At least three (3) of the events must feature individuals who have lived experience with OUD or STUD **(10 points)**;
3. Identifying individuals responsible for obtaining a standing order to distribute naloxone via DC Health **(5 points)**;
4. Hosting at least three naloxone training and distribution events. Event attendees should all leave with at least one (1) dose of naloxone. These events can take place in conjunction with other events. Applicants should describe any potential partners **(5 points)**;
5. Hosting 12-step groups, support groups (e.g., groups led by a DBH recovery coach), or some other activity for individuals with SUD, as well as family support groups (describe number of sessions) Applicants are encouraged to partner with treatment providers to host these groups **(10 points)**;

6. Hosting a Drug Take Back Day that promotes safe disposal of expired and unused medications **(2 points)**;
7. Sponsoring International Opioid Awareness Day activities in August **(2 points)**;
8. Hosting at least three (3) “Days of Recovery” during primary days of worship using DBH-provided information regarding OUD prevention, treatment (including MOUD), and recovery **(5 points)**;
9. Planning and executing at least three (3) outreach events that aim to engage the broader community (outside of the applicant's congregation) in treatment, recovery, or naloxone-related activities. At least one (1) of these events must focus on stigma reduction. These outreach events can be completed in conjunction with the six (6) community events or separately. Applicants should describe their plans to partner with other community or faith-based organizations. Applicants have flexibility to determine the themes and format of the events, but they should include a plan for each event in the application (e.g. timeline, theme, intended audience, and specific activities) **(5 points)**; and,
10. Meeting, as prescribed by DBH, with other SOR grantees and stakeholders in the same Ward that are addressing the opioid epidemic **(1 point)**.

Criterion 4: Evaluation (Corresponds to Project Evaluation Section) – 10 points

Applicants should describe the plan to evaluate the activities, including how the organization will track work plan progress to ensure deliverables are achieved by September 29, 2021 and reported on no later than October 15, 2021. The applicant should also present a sound and feasible evaluation plan that describes how the applicant plans to monitor progress toward meeting their objectives **(5 points)**.

The description should include the proposed targets for the following key grant outcomes **(5 points)**:

1. Number of individuals at each event and cumulatively (demonstrated through completed sign-in sheets);
2. Number of individuals who received naloxone training; and,
3. Number of individuals who were provided naloxone.

Criterion 5: Project Budget and Justification – 5 points

The applicant provided a budget and budget narrative justification of the items included in their proposed budget. **(5 points)**

COMPETITION 2:
**PREGNANT AND PARENTING INDIVIDUALS: SCREENING FOR SUBSTANCE USE
DISORDER**

Background

Individuals who are pregnant and/or parenting small children are particularly vulnerable to the negative effects of untreated substance use disorder (SUD), including opioid use disorder (OUD). In order to build a continuum of care and ensure equitable and timely access to high-quality SUD treatment and recovery services, Department of Behavioral Health (DBH) aims to support an organization to 1) conduct a comprehensive needs assessment; and, 2) provide training and education about SUD with a focus on OUD screening and treatment to maternal and child healthcare providers in the District. Applicants to this competition are expected to work closely with the sub-grantee for Competition 3: Pregnant and Parenting Individuals: Treatment for Substance Use Disorders.

This competition will support the District to address LIVE.LONG.DC Goal 5, "Ensure equitable and timely access to high-quality substance use disorder treatment and recovery support services." This competition will be funded by the DCOR 1 grant.

Pre-Application Meeting

A Pre-Application Meeting will be held on January 29, 2021. The meeting will be held virtually at the time below:

Competition 2: January 29, 2021 from 11:00-11:45am

Meeting link:

<https://dcnet.webex.com/dcnet/j.php?MTID=mb15548f7c49463228599a44463067ed3>

Meeting number: 180 807 8666

Password: Udd7ipgsm47

Join by video system: Dial 1808078666@dcnet.webex.com

You can also dial 173.243.2.68 and enter your meeting number.

Join by phone: +1-202-860-2110 United States Toll (Washington D.C.)
1-650-479-3208 Call-in number (US/Canada)

Access code: 180 807 8666

The meeting will provide an overview of the RFA requirements and address specific issues and concerns about the RFA. DBH personnel shall not accept any applications at this conference. Do not submit drafts, outlines, or summaries to DBH for review, comment, or technical assistance.

Performance Requirements

Eligibility Criteria

Those applying should meet the following criteria:

1. Demonstrated ability to start work within thirty (30) calendar days of award.
2. Demonstrated knowledge of pre- and post-natal care in the District or demonstrated knowledge of effective SUD screening.

Additional Experience Requirements

3. Experience with managing grants or contracts greater than \$100,000.00.
4. Experience managing local (District of Columbia) or federal grants.
5. A functioning accounting system that is operated in accordance with generally accepted accounting principles.

Target Population

The target population is pregnant and/or parenting individuals, their children, and their health care providers in the District of Columbia.

Location of Services

Services associated with this grant must take place in the District of Columbia.

Scope of Services

Services to be provided under the Pregnant and Parenting Individuals: Screening for Substance Use Disorders grant include:

1. Start implementation within 30 calendar days of award.
2. Develop and administer a needs assessment for OB/GYN clinics, primary care clinics, pediatric clinics, urgent care clinics, WIC offices, and federally-qualified health centers (FQHCs) that evaluates:
 - a. Ongoing efforts to screen and treat pregnant and parenting individuals with SUD with a focus on OUD in the District;
 - b. The need for pregnant and parenting-specific SUD screening in the District;
 - c. The need for pregnant and parenting-specific SUD and OUD treatment (including buprenorphine, methadone, naltrexone, and accompanying psycho-social interventions) and recovery support services in the District;
 - d. The barriers to accessing high quality pregnant and parenting-specific SUD screening, treatment, and recovery support services in the District (this must involve soliciting feedback directly from pregnant and parenting individuals with SUD/OUD); and,
 - e. The barriers to providing high quality treatment and recovery support services to pregnant and parenting individuals in the District.
3. Develop and deliver training based on the results of the needs assessment to providers to increase screening rates and access to high-quality treatment and recovery support services for pregnant and parenting individuals in the District.
4. Provide ongoing support to providers who are screening and treating individuals who are pregnant and/or parenting with SUD including OUD. This could include activities like: hosting ongoing forums, setting up a community of practice, or holding provider office hours.
5. Develop or adopt a standard protocol for screening pregnant and parenting individuals with SUD/OUD in the District and distribute it to providers.
6. Develop and disseminate a referral list of treatment providers that are able to provide higher levels of SUD treatment, including OUD treatment for pregnant and parenting individuals who cannot be treated in an office-based setting.

Data Collection and Reporting

Grantees will be required to collect, track, and report information on services provided and individuals served.

- A. Monthly reporting: Grantee shall report on grant activities on a monthly basis on a form/format prescribed by DBH. Monthly reports will cover: grantee performance (e.g., service delivery data, accomplishments, challenges) and administrative data including:
 1. Total number of providers engaged in the needs assessment;
 2. Total number of providers engaged through outreach and trainings;
 3. Total number of pregnant and parenting individuals engaged to provide feedback on their needs and the barriers to accessing treatment; and,
 4. Number of providers who have started screening pregnant and parenting individuals for SUD for the first-time following training and technical assistance.
- B. Evaluation: The grantee will also complete an evaluation plan. The evaluation plan may be developed in collaboration with DBH upon award.

Data Collection and Tracking

1. Grantees will identify a point of contact for all data matters pertaining to the initiative.
2. Grantees will be responsible for tracking and evaluating grant activities.

APPLICATION REQUIREMENTS

Project Narrative – up to ten (10) pages

A. Organizational Capacity

Applicants should include the following information to highlight their experience and capacity to implement the grant activities:

1. Describe their mission, structure, scope of current activities, target population, experience, and capacity to meet the deliverables outlined in this RFA;
2. Describe the team who will work on this initiative, including anyone that would be hired to run this work;
3. Estimate the number of individuals that will be screened through the initiative;
4. Describe any potential challenges and contingency plans for addressing concerns related to circumstances that may arise; and,
5. Describe the organization's plan to be fully operational within thirty (30) calendar days of the new grant agreement.

B. Project Need

Applicants should describe the need for enhanced SUD (with a focus on OUD) screening and treatment services for pregnant and/or parenting individuals and their children in the District in addition to their plans for developing a formal needs assessment.

C. Project Description (align to Work Plan, Attachment D)

Applicants should describe:

1. Clearly defined measurable goals, objectives, and anticipated outcomes;
2. A timeline for implementation that clearly defines milestones, inclusive of start-up;
3. Involvement of key partners and the roles they will assume in the administration of the needs assessment, outreach to pregnant and parenting individuals, and the development and delivery of provider training;
4. A plan for developing and delivering a comprehensive needs assessment that evaluates ongoing work and gaps in service related to screening and treating pregnant and parenting individuals with SUD;
5. A plan for using the results of the needs assessment to develop training, resources, and ongoing support for health care providers and pregnant and parenting individuals with OUD in the District;
6. A plan to develop and disseminate a standard operating protocol for screening pregnant and parenting individuals for SUD and a referral list of SUD treatment providers to health care providers in the District; and,
7. Any potential challenges, if known, and contingency plans for addressing concerns related to circumstances that may arise.

D. Project Evaluation

The applicant must include clear, quantitative goals and objectives for the grant period and present a sound and feasible evaluation plan that meets the goals in this application. The applicant should demonstrate their ability to collect data on the following key outputs/outcomes:

1. Total number of providers engaged in the needs assessment;

2. Total number of providers engaged through outreach and trainings;
3. Total number of pregnant and parenting individuals engaged to provide feedback on their needs and the barriers to accessing treatment; and,
4. Number of providers who have started screening pregnant and parenting individuals for SUD for the first time.

The grantee may propose additional outcome measures specific to initiative, subject to DBH approval.

Project Attachments

Some of the attachments for this application include required templates that the applicants must use, as indicated below.

A. Project Abstract (1 page)

A one-page project abstract is required (see **Attachment C**). Please provide a one-page abstract that is clear, accurate, concise, and without reference to other parts of the Project Narrative. The project abstract must be written on 8-½ by 11-inch paper, 1.0 spaced, Arial or Times New Roman font using 12-point type (10-point font for tables and figures) with a minimum of one-inch margins, **limited to one page in length**, and include the following sections (*no template provided*):

1. **Project Description:** Briefly outline how the organization will implement the project in service of the goal and objectives.
2. **Performance Metrics:** Outline the key outcome and process metrics and associated targets that will be used to assess grantee performance.

B. Work Plan (not counted in page limit)

The work plan template (see **Attachment D**) provided by DBH is required. The work plan describes key activities and tasks to successfully deliver the crisis stabilization scope of services and aligns with the Project Description narrative under Application Requirements. The activities and tasks should be organized chronologically, and each should have an identified responsible staff, target completion date, and associated output.

C. Staffing Plan (not counted in page limit)

The applicant's staff plan template (see **Attachment E**) provided by DBH is required. The staffing plan should describe staff duties, qualifications, and the percent of time to be spent on project activities, and whether the time will be charged to the grant. The plan should clearly indicate which staff positions will need to be hired. Staff CVs, resumes, and position descriptions shall be submitted and will not count towards the page limit. Staffing should include, at a minimum, the program director responsible for the oversight and day-to-day management of the proposed program; staff responsible for service delivery; staff responsible for monitoring programmatic activities and use of funds; and staff responsible for data collection, quality and reporting. The applicant must identify the individual who will be responsible for Government Performance and Results Act (GPRA) data collection.

D. Project Budget and Justification (not counted in page limit)

The application should include a project budget (see **Attachment F**) with justification using the provided template. The project budget and budget justification should be directly aligned with the work plan and project description. All expenses should relate directly to achieving the key grant outcomes, including the following activities:

1. Developing and administering a needs assessment to evaluate ongoing efforts to screen and treat pregnant/parenting individuals with SUD, with a focus on OUD and gaps in service; and,

2. Providing ongoing training, support, and resources to providers based on the needs assessment.

The budget should reflect a six (6) month period. Personnel charges must be based on actual, not budgeted labor. Salaries and other expenditures budgeted for in the grant must be for services that will occur during the six (6) month grant period.

The following categories and descriptions should be covered in the Budget/Justification:

1. **Personnel:** Include the title of the position, name (or indicate vacancy), annual salary (cannot exceed \$197,300) and level of effort (percentage of time) dedicated to this project.
2. **Fringe:** Provide the position, name (or indicate vacancy), total fringe benefit rate used.
3. **Travel:** Only local travel related to the (insert name of project/effort) and for the project staff will be approved in the grant budget. Provide purpose, destination, and type of travel.
4. **Equipment:** Provide the item, quantity, amount, and percent charged to the grant.
5. **Supplies:** Include the items being requested and rate. Description should also include how the supplies directly support the project.
6. **Contractual:** Provide the name of entity and identify whether it's a sub-recipient, contractor, consultant, or service. Also provide the entity's rate. Any vendors selected under this RFA will be required to provide a breakdown of its personnel costs for each person performing services under the contract. This breakdown shall include: the actual salary paid, the actual fringe rate applied to the salary, and any overhead applied and the profit amount.
7. **Other Direct Costs:** List any costs not included in any of the other cost categories.
8. **Indirect Costs:** Indirect costs should not exceed 10% of direct costs unless the organization has a negotiated indirect cost rate agreement. Please reference 45 CFR §75.414.
9. **Program Income:** If the possibility of generating program income as a result of DBH funding exists, list source and amount as budget line items. For sustainability purposes, hospitals should be billing behavioral health observation codes to Medicaid and other forms of insurance whenever possible.

E. Advances (not counted in page limit)

An applicant seeking an advance must submit a completed Advance Payment Request form (**Attachment G**) signed by the organization's Chair of the Board of Directors and Executive Director, or equivalent positions. Applicants must detail the amount requested per budget category in the budget and justification (**see Attachment F**). **No advance payment will be provided without prior official request and approval.**

F. Letters of Agreement (not counted in page limit)

Applicant should submit all letters of agreement, from other agencies and organizations that will be actively engaged in the proposed project (*no template provided*).

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The applicant must submit a current business license and Certificate of Occupancy issued by the District of Columbia Department of Consumer and Regulatory Affairs. If the applicant does not have a current license, a copy of the business license application and receipt filed no later than the due date of the grant application may be submitted.

- H. **Clean Hands Certification (not counted in page limit)**
Each applicant must submit a current Clean Hands Certification from the District of Columbia Office of Tax and Revenue (OTR). DBH requires that the submitted Clean Hands Certification reflect a date within a six-month period immediately preceding the application's submission. Self-Certification is not acceptable.
- I. **501(c)(3) Letter (not counted in page limit)**
The applicant must submit the organization's determination or affirmation letter approving and/or confirming the tax-exempt status.
- J. **Articles of Incorporation & Bylaws (not counted in page limit)**
The applicant must submit certification of current/active Articles of Incorporation from the DC Department of Consumer and Regulatory Affairs. Also, the current/active Bylaws must also be submitted.
- K. **IRS W-9 Tax Form (not counted in page limit)**
The applicant must submit a current completed W-9 form prepared for the U.S. Internal Revenue Service (IRS). DBH defines "current" to mean the document was completed within the same calendar year as that of the application date.
- L. **IRS Tax Exemption Affirmation Letter (not counted in page limit)**
The tax exemption affirmation letter is the IRS's determination letter of non-profit status. If this letter is not available, then the applicant should provide its most recent IRS Form 990 tax return if one was submitted. If no return has yet been filed, the organization can submit its application for tax-exempt status. If the group has a supporting organization with an IRS tax-exempt status determination, then that organization's tax exemption affirmation letter should also be submitted.
- If there is no IRS tax exemption letter because the organization is a religious organization, then the applicant may submit the best evidence it can of its status. Examples of potential best evidence for this purpose include, but are not limited to (i) a letter from the leader of the organization verifying that the organization is a religious group; (ii) a letter from the group's board chair or similar official, verifying that the organization is a religious group; (iii) the applicant's most recently submitted state sales or other tax exemption form, if it exists (Form 164 in the District of Columbia); or (iv) the state's issued tax exemption certificate or card, if it exists. (See IRS publication no. 1828, *Tax Guide for Churches and Religious Organizations*).
- M. **Current Fiscal Year Budget (not counted in page limit)**
The applicant must submit its full budget, including a projected income, for the current fiscal year and comparison of budgeted versus actual income and expenses of the fiscal year to date.
- N. **Financial Statements (not counted in page limit)**
If the applicant has undergone an audit or financial review, it must provide the most recent audited financial statements or reviews. If audited financial statements or reviews are not available, the applicant must provide its most recent complete year's unaudited financial statements.

O. **Separation of Duties Policy (not counted in page limit)**

The applicant must state how the organization separates financial transactions and duties among people within the organization to prevent fraud or waste. This may be a statement that already exists as a formal policy of the organization, or the applicant may create the statement for purposes of the application. The applicant should state which of these situations apply.

This statement should:

1. Describe how financial transactions are handled and recorded;
2. Provide the names and titles of personnel involved in handling money;
3. Identify how many signatures the financial institution(s) require on the organization's checks and withdrawal slips; and,
4. Address other limits on staff and board members' handling of the organization's money.

P. **Board of Directors (not counted in page limit)**

The applicant must submit an official list of the current board of directors on letterhead to include: names and board titles of officers, mailing and e-mail addresses, and phone numbers. The document must be signed by the authorized executive of the applicant organization.

Q. **System for Award Management (SAM) Registration**

If a project within this RFA is funded wholly or partially by federal funding sources, applicants must be registered in the System of Award Management at www.sam.gov and provide evidence of this registration as part of the application package.

R. **Partner Documents (not counted in page limit)**

If applicable, the applicant must submit the partnering organization's Clean Hands Certificate (from the Office of Tax and Revenue) and documentation of the partner's tax-exempt status.

S. **Proof of Insurance for: Commercial, General Liability, Professional Liability, Comprehensive Automobile and Worker's Compensation (not counted in page limit)**

The applicant must provide, in writing, the name of all its insurance carriers and type of insurance provided (e.g., its general liability insurance carrier and automobile insurance carrier, worker's compensation insurance carrier), fidelity bond holder (if applicable), and before execution of the grant award, a copy of the binder or cover sheet of the current policy for any policy that covers activities that might be undertaken in connection with performance of the grant award, showing the limits of coverage and endorsements.

All policies, except the Worker's Compensation, Errors and Omissions, and Professional Liability policies that cover activities that might be undertaken in connection with the performance of the grant award shall contain additional endorsements naming the Government of the District of Columbia and its officers, employees, agents and volunteers as additional named insured, with respect to liability abilities arising out of the performance of services under the grant award. The applicant shall require their insurance carrier of the required coverage to waive all rights of subrogation against the District, its officers, employees, agents, volunteers, contractors, and subcontractors.

EVALUATION CRITERIA

Indicators have been developed for each review criterion to assist the applicant in presenting pertinent information and to provide the reviewer with a standard for evaluation. The five review criteria are outlined below with specific detail and scoring points. These criteria are the basis upon which the reviewers will evaluate the application. The entire proposal will be considered during objective review.

Criterion 1: Capacity (Corresponds to Organizational Capacity Section) – 45 points

Applicants should:

1. Describe their mission, structure, scope of current activities, target population, experience, and capacity to meet the deliverables outlined in this RFA **(10 points)**;
2. Describe the team who will work on this initiative, including anyone that would be hired to run this work **(10 points)**;
3. Estimate the number of individuals that will be screened by the program **(10 points)**;
4. Describe any potential challenges and contingency plans for addressing concerns related to circumstances that may arise **(10 points)**; and,
5. Describe the organization's plan to be fully operational within thirty (30) calendar days of the new grant agreement **(5 points)**.

Criterion 2: Need (Corresponds to Project Need Section) – 10 points

Applicants should describe the need for enhanced substance use disorder (SUD) screening and treatment services for pregnant and/or parenting individuals and their children in the District in addition to their plans for developing a formal needs assessment **(10 points)**.

Criterion 3: Strategic Approach (Corresponds to Project Description Section) – 30 points

Applicants should describe their plan to develop a needs assessment and provide technical assistance around screening for SUD in pregnant and parenting people, including:

1. Clearly defined measurable goals, objectives, and anticipated outcomes **(5 points)**;
2. A timeline for implementation that clearly defines milestones, inclusive of start-up **(3 points)**;
3. Involvement of key partners and the roles they will assume in the administration of the needs assessment, outreach to pregnant and parenting individuals, and the development and delivery of provider training **(5 points)**;
4. A plan for developing and delivering a comprehensive needs assessment that evaluates ongoing work and gaps in service related to screening and treating pregnant and parenting individuals with SUD **(5 points)**;
5. A plan for using the results of the needs assessment to develop training, resources, and ongoing support for health care providers and pregnant and parenting individuals with opioid use disorder (OUD) in the District **(5 points)**;
6. A plan to develop and disseminate a standard operating protocol for screening pregnant and parenting individuals for SUD and a referral list of SUD treatment providers to health care providers in the District **(5 points)**; and
7. Description of any potential challenges, if known, and contingency plans for addressing concerns related to circumstances that may arise **(2 points)**.

Criterion 4: Evaluation (Corresponds to Project Evaluation Section) – 10 points

Applicants should describe the plan to evaluate the initiative, including how the organization will track work plan progress to ensure deliverables are achieved by September 29, 2021 and reported on no later than October 15, 2021. The applicant presented a sound and feasible evaluation plan that meets the goals in this application **(5 points)**.

The description should include the proposed targets for the following key grant outcomes **(5 points)**:

1. Total number of providers engaged in the needs assessment;
2. Total number of providers engaged through outreach and trainings;
3. Total number of pregnant and parenting individuals engaged to provide feedback on their needs and the barriers to accessing treatment; and,
4. Number of providers who have started screening pregnant and parenting individuals for SUD for the first time.

Criterion 5: Project Budget and Justification – 5 points

The applicant provided a budget and budget narrative justification of the items included in their proposed budget (**5 points**).

**COMPETITION 3:
PREGNANT AND PARENTING INDIVIDUALS: TREATMENT FOR SUBSTANCE USE
DISORDERS**

Background

Individuals who are pregnant and/or parenting small children are particularly vulnerable to the negative effects of untreated opioid use disorder (OUD). In order to build a continuum of care and ensure equitable and timely access to high-quality OUD treatment and recovery services, DBH aims to partner with treatment providers to fund the start-up or expansion of an OUD treatment and recovery program specifically for pregnant and parenting individuals. DBH envisions treatment programs that proactively cater to the unique needs of pregnant and parenting individuals through the provision of evidence-based substance use treatment, tailored recovery services, trauma-informed care, and childcare services.

This competition will support the District to address LIVE.LONG.DC Goal 5, "Ensure equitable and timely access to high-quality substance use disorder treatment and recovery support services." This competition will be funded by the DCOR 1 grant.

Pre-Application Meeting

A Pre-Application Meeting will be held on January 29, 2021. The meeting will be held virtually at the time below:

Competition 3: January 29, 2021 from 1:00-1:45pm

Meeting link:

<https://dcnet.webex.com/dcnet/j.php?MTID=m653997a0be4a67d3dd373e42764e48a4>

Meeting number: 180 320 3507

Password: GJsADD35MY5

Join by video system: Dial 1803203507@dcnet.webex.com

You can also dial 173.243.2.68 and enter your meeting number.

Join by phone: +1-202-860-2110 United States Toll (Washington D.C.)

1-650-479-3208 Call-in toll number (US/Canada)

Access code: 180 320 3507

The meeting will provide an overview of the RFA requirements and address specific issues and concerns about the RFA. The Department of Behavioral Health (DBH) will not accept any applications at this conference. Applicants should not submit drafts, outlines, or summaries to DBH for review, comment, or technical assistance.

Performance Requirements

Eligibility Criteria

Those applying should meet the following criteria:

1. Be a certified substance use treatment or recovery provider pursuant to 22-A DCMR Chapter 63 and/or a clinic-based medical care provider (e.g., licensed clinic, office, federally qualified health center, or group practice).

Additional Experience Requirements

1. Experience managing local (District of Columbia) or federal grants.
2. A functioning accounting system that is operated in accordance with generally accepted accounting principles.

Target Population

The target population is individuals who are pregnant and/or parenting and their dependent children.

Location of Services

Services associated with this grant must take place in the District of Columbia.

Scope of Services

Applicants should describe a program that will begin to operate within thirty (30) calendar days of the grant award and complete by September 29, 2021. The grant will support start-up activities (e.g. hiring, program design, developing policies and procedures necessary to bill Medicaid for services) for the following activities:

1. Applicants shall refer and link qualifying clients to gender-specific treatment and recovery services according to 22-A DCMR Chapter 63;
2. Applicants shall provide medications for opioid use disorder (MOUD) or partner directly with MOUD providers to ensure that individuals have access to all three forms of FDA-approved medication (methadone, buprenorphine, and naltrexone);
3. Applicants shall provide treatment and recovery services to individuals at-risk of OUD (i.e., provide documentation that individuals have been enrolled in services);
4. Applicants shall develop and implement an outreach plan to engage individuals in treatment;
5. Applicants shall be child-and-family-friendly (e.g., allow parents to bring children to appointments, partner with a licensed childcare provider, and/or have licensed childcare on-site);
6. Applicants shall provide on-site peer services;
7. Applicants shall develop a sustainability plan;
8. Applicants shall utilize start-up funds to design a treatment program for individuals based on the categories below. Applicants may apply to more than one category, if desired. For all of the following categories, applicants should demonstrate an established relationship with an MOUD provider (internal or external) to support referral to treatment and describe the organizational relationship with the addiction partner organization (i.e., communications, mechanisms of partnerships, number of clients previously referred and treated, prescribing authority of practitioner, range of substance use disorder services the organization provides, etc.). If the applicant must forge a new partnership with a MOUD provider, describe the commitments the organization will be establishing for the future in support of this initiative. The applicant shall include an outreach plan of any potential partnerships with government stakeholders, professional organizations, perinatal support groups, mothers with lived experience, and funders in systems-level policy work to support sustainability (i.e., warm consultation and linkage to community treatment provider, referrals for treatment and community follow up) of these screening services once the grant funding is over.

Category A: Residential Program for Pregnant Women and Women with Children

Category A applicants shall provide residential treatment services to pregnant women and women with children who have OUD. The provider shall meet the standards listed below as well as adhere to 22-A DCMR § 6324.

Level 3.5 Clinically Managed High-Intensity Residential/ Clinically Managed Medium-Intensity Residential providers shall have the capacity to provide a minimum of twenty-five (25) hours of a mixture of substance use disorder treatment services per week, per client, in accordance with 22-A DCMR Chapter 63 and medical necessity based on American Society of Addiction Medicine (ASAM) criteria.

Level 3.3 Clinically Managed Population-Specific High-Intensity Residential providers shall have the capacity to provide a minimum of twenty (20) hours of mixture of SUD treatment services per

week in accordance with 22-A DCMR Chapter 63 and based on medical necessity in ASAM criteria.

Level 3.1 Clinically Managed Low-Intensity Residential providers shall have the capacity to provide a minimum of five (5) hours of a mixture of SUD treatment services per week, per client, in accordance with 22-A DCMR Chapter 63 and medical necessity based on ASAM. Residential services shall meet the requirements of 22-A DCMR § 6324, including providing licensed child care and transportation during the course of the client's stay.

Category B: Intensive Outpatient Program for Pregnant and Individuals with Children

Category B applicants shall provide intensive outpatient services to pregnant and parenting individuals who have OUD. The provider shall meet the standards listed below as well as adhere to 22-A DCMR § 6325.

Level 2.1 Intensive Outpatient Program (IOP) providers shall have the capacity to provide a minimum of nine (9) hours of a mixture of SUD treatment services per week for adults and at least six (6) hours of treatment services per week for youth under the age of twenty-one (21) in accordance with 22-A DCMR Chapter 63 and medical necessity based on ASAM criteria.

Category C: Outpatient Treatment Program for Pregnant Individuals and Individuals with Children

Category C applicants shall provide outpatient services to pregnant individuals and individuals with children who have OUD. The provider shall either meet the standards listed below and adhere to 22-A DCMR § 6325 or be a certified provider of outpatient pre-natal care (i.e., at a federally qualified health center or primary care clinic).

Level 1 Outpatient providers shall have the capacity to provide up to eight (8) hours of SUD treatment services per week, per client, in accordance with 22-A DCMR Chapter 63 and medical necessity based on ASAM criteria. Outpatient services shall include transportation. Applicants should describe their ability to provide family-friendly services, partner with a licensed child care provider, and/or provide licensed child care on site.

Category D: Recovery Support Service (RSS) Program for Individuals who are Pregnant and Individuals with Children

Applicants shall provide recovery services to pregnant women and women with children who have OUD. The provider shall adhere to 22- A DCMR § 6335 regulation 6335 of the chapter 63 regulation for Level-R Recovery Support Services (RSS).

RSS covers the provision of non-clinical services for individuals in treatment or in need of supportive services to maintain their recovery.

Data Collection and Reporting

Grantees will be required to collect, track, and report information on services provided and individuals served in addition to Government Performance and Results Act (GPRA) data.

- A. Monthly reporting: Grantee shall report on grant activities monthly on a form/format prescribed by DBH. Monthly reports will cover grantee performance (e.g., service delivery data, accomplishments, challenges) and administrative data, including:
 - 1. Number of individuals enrolled in the program;
 - 2. Number of referrals to MOUD for:
 - a. Buprenorphine;
 - b. Methadone;
 - c. Naltrexone;

3. Number of individuals receiving MOUD;
 4. Number of women who continued treatment into the post-partum period (for at least three (3) months);
 5. Average length of stay or number of sessions for individuals enrolled in the program;
 6. Number of referrals to recovery support services;
 7. Number of individuals tested for Hepatitis C Virus (HCV) and/or Human Immunodeficiency Virus (HIV);
 8. Number of individuals referred to HCV and/or HIV treatment;
 9. Number of individuals given naloxone;
 10. Number of women receiving prenatal/post-natal care;
 11. Number of non-school-aged children engaged or accommodated (through licensed childcare or otherwise, e.g., regularly attending appointments or groups with a parent) throughout the course of the parent's treatment episode; and,
 12. Number of school-aged children engaged or accommodated (through licensed childcare or otherwise, e.g., regularly attending appointments or groups with a parent) throughout the course of the parent's treatment episode.
- B. Annual reporting: On an annual basis, the grantee shall provide summary data on service provision. Service-related data shall include, at a minimum, the administrative data points included in the monthly reports.
- C. Evaluation: The grantee will also complete an evaluation plan. The evaluation plan may be developed in collaboration with DBH upon award.
- D. Applicants must also obtain continuous feedback from the individuals they serve to ensure that the services offered are aligned with the needs of the client. The applicant must describe the formal process, methods, and frequency (e.g., bi-monthly, paper-based surveys) that they will use to obtain feedback from the individuals that they serve. Providers are encouraged to be creative and innovative.

Data Collection and Tracking

1. Grantees will identify a point of contact for all data matters pertaining to the initiative.
2. Grantees will be responsible for ensuring that all individuals receiving services under this funding opportunity will be included in the grant data collection and submit monthly data report, by the 10th day of each month outlining who will be included in the grant/data collection.
3. Grantees will be responsible for tracking and evaluating grant activities.
4. Grantees will submit monthly progress reports that detail strides toward meeting the deliverables as outlined in the DBH approved Scope of Work.

APPLICATION REQUIREMENTS

Project Narrative – up to ten (10) pages

A. Organizational Capacity

Applicants should include the following information to highlight their experience and capacity to implement the grant activities:

1. Describe their mission, structure, scope of current activities, target population, experience, and capacity to meet the deliverables outlined in this RFA;
2. Describe relevant experience, and duration of that experience, in delivering the services or partnering with others to deliver the services proposed under this RFA. Specify experience with OUD clients;
3. Describe the team who will work on this initiative, including anyone that would manage this work;

4. Describe the location where the treatment and recovery services will take place;
5. Describe any potential challenges and contingency plans for addressing concerns related to circumstances that may arise; and,
6. Describe the organization's plan to be fully operational within thirty (30) calendar days of the new grant agreement.

B. Project Need

Applicants should describe the unmet need in the community for OUD treatment that is tailored to pregnant and parenting individuals and their children.

C. Project Description (align to Work Plan, Attachment D)

Applicants should describe:

1. Clearly defined measurable goals, objectives, and anticipated outcomes;
2. A timeline for implementation that clearly defines milestones, inclusive of start-up;
3. Activities and services that will be provided, including other resources that can be leveraged to support the program along with a rationale for the inclusion of each specific service and activity;
4. Involvement of key partners and the roles they will assume in the implementation of services. (NOTE: letters of commitment are required from all key partners and these commitment letters will not count towards page limitations);
5. Training that the program administrators, facility staff, and providers will undergo;
6. The location and description of facility, including partner facilities if not a one-stop shop, including hours and days/evenings of operation for the populations served and description of Americans with Disabilities Act (ADA) compliance;
7. How the applicant plans to conduct outreach to pregnant and parenting individuals in the community to engage them in the treatment services;
8. The number of estimated individuals that will be served by the program on a monthly basis with a projected utilization within each distinct service or activity offered;
9. The continuous feedback loop(s) the applicant will implement with the individuals who are served by this program;
10. The plan for peer involvement in support services; and,
11. Any potential challenges, if known, and contingency plans for addressing concerns related to circumstances that may arise.

D. Project Evaluation

The applicant must include clear, quantitative goals and objectives for the grant period and present a sound and feasible evaluation plan that meets the goals in this application. Applicants must demonstrate how they collect data on each of the following key outcomes:

1. Number of individuals enrolled in the program;
2. Number of referrals to MOUD for:
 - (a) Buprenorphine;
 - (b) Methadone;
 - (c) Naltrexone.
3. Number of individuals receiving MOUD;
4. Number of women who continued treatment into the post-partum period (for at least three (3) months after the birth of a child);
5. Average length of stay or number of sessions for individuals enrolled in the program;
6. Number of referrals to recovery support services;
7. Number of individuals tested for HCV and/or HIV;
8. Number of individuals referred to HCV and/or HIV treatment;
9. Number of individuals given naloxone;
10. Number of women receiving prenatal/post-natal care;

11. Number of non-school-aged children engaged or accommodated (through licensed childcare or otherwise, e.g., regularly attending appointments or groups with a parent) throughout the course of the parent's treatment episode;
12. Number of school-aged children engaged or accommodated (through licensed childcare or otherwise, e.g., regularly attending appointments or groups with a parent) throughout the course of the parent's treatment episode.

For this initiative, the GPRA mandates increased accountability and performance-based management by federal grants and contracts must be used. This has resulted in greater focus on results or outcomes in evaluating the effectiveness of federal activities, and in measuring progress toward achieving goals and objectives. The grantee should also briefly describe the infrastructure that will support evaluation activities and the collection of GPRA data.

The grantee may propose additional outcome measures specific to their program, subject to DBH approval.

Project Attachments

Some of the attachments for this application include required templates that the applicants must use, as indicated below.

A. Project Abstract (1 page)

A one-page project abstract is required (see **Attachment C**). Please provide a one-page abstract that is clear, accurate, concise, and without reference to other parts of the Project Narrative. The project abstract must be typed on 8 ½ by 11-inch paper, 1.0 spaced, Arial or Times New Roman font using 12-point type (10-point font for tables and figures) with a minimum of one-inch margins, **limited to one page in length**, and include the following sections (*no template provided*):

1. **Project Description:** Briefly outline how the organization will implement the project in service of the goal and objectives.
2. **Performance Metrics:** Outline the key outcome and process metrics and associated targets that will be used to assess grantee performance.

B. Work Plan (not counted in page limit)

The work plan template (see **Attachment D**) provided by DBH is required. The work plan describes key activities and tasks to successfully deliver the POC scope of services and aligns with the Project Description narrative under Application Requirements. The activities and tasks should be organized chronologically, and each should have an identified responsible staff, target completion date, and associated output.

C. Staffing Plan (not counted in page limit)

The applicant's staff plan template (see **Attachment E**) provided by DBH is required. The staffing plan should describe staff duties, qualifications, and the percent of time to be spent on project activities, and whether the time will be charged to the grant. The plan should clearly indicate which staff positions will need to be hired. Staff CVs, resumes, and position descriptions shall be submitted and will not count towards the page limit. Staffing should include, at a minimum, the program director responsible for the oversight and day-to-day management of the proposed program; staff responsible for service delivery; staff responsible for monitoring programmatic activities and use of funds; and staff responsible for data collection, quality and reporting. The individual who will be responsible for Government Performance and Results Act (GPRA) data collection should be specified.

D. **Project Budget and Justification (not counted in page limit)**

The application should include a project budget (see **Attachment F**) with justification using the provided template. The project budget and budget justification should be directly aligned with the work plan and project description. All expenses should relate directly to achieving the key grant outcomes, including the following activities:

1. Providing OUD treatment to pregnant and parenting individuals and their children.

The budget should reflect a six (6) month period. Personnel charges must be based on actual, not budgeted labor. Salaries and other expenditures budgeted for in the grant must be for services that will occur during the six (6) month grant period. **The applicant must confirm that these funds are not being spent on Medicaid-billable services, specify how start-up activities will facilitate the provision of Medicaid-billable services, and provide a timeline for achieving sustainability.**

The following categories and descriptions should be covered in the Budget/Justification:

1. **Personnel:** Include the title of the position, name (or indicate vacancy), annual salary and level of effort (percentage of time) dedicated to this project.
2. **Fringe:** Provide the position, name (or indicate vacancy), total fringe benefit rate used.
3. **Travel:** Only local travel related to the (insert name of project/effort) and for the project staff will be approved in the grant budget. Provide purpose, destination, and type of travel.
4. **Equipment:** Provide the item, quantity, amount, and percent charged to the grant.
5. **Supplies:** Include the items being requested and rate. Description should also include how the supplies directly support the project.
6. **Contractual:** Provide the name of entity and identify whether it's a sub-recipient, contractor, consultant, or service. Also provide the entity's rate. Any vendors selected under this RFA will be required to provide a breakdown of its personnel costs for each person performing services under the contract. This breakdown shall include: the actual salary paid, the actual fringe rate applied to the salary, any overhead applied and the profit amount.
7. **Other Direct Costs:** List any costs not included in any of the other cost categories.
8. **Indirect Costs:** Indirect costs should not exceed 10% of direct costs unless the organization has a negotiated indirect cost rate agreement. Please reference 45 CFR §75.414.
9. **Program Income:** If the possibility of generating program income as a result of DBH funding exists, list source and amount as budget line items.

E. **Advances (not counted in page limit)**

An applicant seeking an advance must submit a completed Advance Payment Request form (**Attachment G**) signed by the organization's Chair of the Board of Directors and Executive Director, or equivalent positions. Applicants must detail the amount requested per budget category in the budget and justification (see **Attachment F**). **No advance payment will be provided without prior official request and approval.**

F. **Letters of Agreement (not counted in page limit)**

Applicant should submit all letters of agreement, from other agencies and organizations that will be actively engaged in the proposed project (*no template provided*).

G. **Business License (not counted in page limit)**

The applicant must submit a current business license and Certificate of Occupancy issued by the District of Columbia Department of Consumer and Regulatory Affairs. If the applicant

does not have a current license, a copy of the business license application and receipt filed no later than the due date of the grant application may be submitted.

H. **Clean Hands Certification (not counted in page limit)**

Each applicant must submit a current Clean Hands Certification from the District of Columbia Office of Tax and Revenue (OTR). DBH requires that the submitted Clean Hands Certification reflect a date within a six-month period immediately preceding the application's submission. Self-Certification is not acceptable.

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J. **Articles of Incorporation & Bylaws (not counted in page limit)**

The applicant must submit certification of current/active Articles of Incorporation from the DC Department of Consumer and Regulatory Affairs. Also, the current/active Bylaws must also be submitted.

K. **IRS W-9 Tax Form (not counted in page limit)**

The applicant must submit a current completed W-9 form prepared for the U.S. Internal Revenue Service (IRS). DBH defines "current" to mean the document was completed within the same calendar year as that of the application date.

L. **IRS Tax Exemption Affirmation Letter (not counted in page limit)**

The tax exemption affirmation letter is the IRS's determination letter of non-profit status. If this letter is not available, then the applicant should provide its most recent IRS Form 990 tax return, if one was submitted. If no return has yet been filed, the organization can submit its application for tax-exempt status. If the group has a supporting organization with an IRS tax-exempt status determination, then that organization's tax exemption affirmation letter should also be submitted.

If there is no IRS tax exemption letter because the organization is a religious organization, then the applicant may submit the best evidence it can of its status. Examples of potential best evidence for this purpose include, but are not limited to (i) a letter from the leader of the organization verifying that the organization is a religious group; (ii) a letter from the group's board chair or similar official, verifying that the organization is a religious group; (iii) the applicant's most recently submitted state sales or other tax exemption form, if it exists (Form 164 in the District of Columbia); or (iv) the state's issued tax exemption certificate or card, if it exists. (See IRS publication no. 1828, *Tax Guide for Churches and Religious Organizations*).

M. **Current Fiscal Year Budget (not counted in page limit)**

The applicant must submit its full budget, including a projected income, for the current fiscal year and comparison of budgeted versus actual income and expenses of the fiscal year to date.

N. **Financial Statements (not counted in page limit)**

If the applicant has undergone an audit or financial review, it must provide the most recent audited financial statements or reviews. If audited financial statements or reviews are not available, the applicant must provide its most recent complete year's unaudited financial statements.

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1. Describe how financial transactions are handled and recorded;
2. Provide the names and titles of personnel involved in handling money;
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The applicant must submit an official list of the current board of directors on letterhead to include: names and board titles of officers, mailing and e-mail addresses, and phone numbers. The document must be signed by the authorized executive of the applicant organization.

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S. **Proof of Insurance for: Commercial, General Liability, Professional Liability, Comprehensive Automobile and Worker's Compensation (not counted in page limit)**

The applicant must provide in writing the name of all its insurance carriers and type of insurance provided (e.g., its general liability insurance carrier and automobile insurance carrier, worker's compensation insurance carrier), fidelity bond holder (if applicable), and before execution of the grant award, a copy of the binder or cover sheet of the current policy for any policy that covers activities that might be undertaken in connection with performance of the grant award, showing the limits of coverage and endorsements.

All policies, except the Worker's Compensation, Errors and Omissions, and Professional Liability policies that cover activities that might be undertaken in connection with the performance of the grant award shall contain additional endorsements naming the Government of the District of Columbia and its officers, employees, agents and volunteers as additional named insured with respect to liability abilities arising out of the performance of services under the grant award. The applicant shall require their insurance carrier of the required coverage to waive all rights of subrogation against the District, its officers, employees, agents, volunteers, contractors, and subcontractors.

EVALUATION CRITERIA

Indicators have been developed for each review criterion to assist the applicant in presenting pertinent information and to provide the reviewer with a standard for evaluation. The five review criteria are outlined below with specific detail and scoring points. These criteria are the basis upon which the reviewers will evaluate the application. The entire proposal will be considered during objective review.

Criterion 1: Capacity (Corresponds to Organizational Capacity Section) – 30 points

Applicants should:

1. Describe their mission, structure, scope of current activities, target population, experience, and capacity to meet the deliverables outlined in this RFA **(5 points)**;
2. Describe relevant experience, and duration of that experience, in delivering the services or partnering with others to deliver the services proposed under this RFA. Specify experience with OUD clients **(5 points)**;
3. Describe the team who will work on this initiative, including anyone that would be hired to run this work **(5 points)**;
4. Describe the location where the treatment and recovery services will take place **(5 points)**;
5. Describe any potential challenges and contingency plans for addressing concerns related to circumstances that may arise **(5 points)**; and,
6. Describe the organization's plan to be fully operational within thirty (30) calendar days of the new grant agreement **(5 points)**.

Criterion 2: Need (Corresponds to Project Need Section) – 10 points

Applicants should describe the unmet need in the community for OUD treatment tailored to pregnant and parenting individuals and their children. **(10 points)**

Criterion 3: Strategic Approach (Corresponds to Project Description Section) – 45 points

Applicants should:

1. Provide clearly defined measurable goals, objectives, and anticipated outcomes **(5 points)**;
2. Provide a timeline for implementation that clearly defines milestones, inclusive of startup **(5 points)**;
3. Describe activities and services that will be provided, including other resources that can be leveraged to support the program along with a rationale for the inclusion of each specific service and activity **(5 points)**;
4. Describe involvement of key partners and the roles they will assume in the implementation of services. (NOTE: letters of commitment are required from all key partners and these commitment letters will not count towards page limitations) **(5 points)**;
5. Describe training that the program administrators, facility staff, and providers will undergo **(5 points)**;
6. Describe the location and description of facility, including partner facilities if not a one-stop shop, including hours and days/evenings of operation for the populations served and description of ADA compliance **(5 points)**;
7. Describe how the applicant plans to outreach to pregnant and parenting individuals in the community to engage them in the treatment services **(5 points)**;
8. Estimate the number of individuals that will be served by the program on a monthly basis with a projected utilization within each distinct service or activity offered **(2 points)**;
9. Describe the continuous feedback loop(s) the applicant will implement with the individuals who are served by this program **(3 points)**;
10. Describe a plan for peer involvement in support services **(3 points)**; and,
11. Describe any potential challenges, if known, and contingency plans for addressing concerns related to circumstances that may arise **(2 points)**.

Criterion 4: Evaluation (Corresponds to Project Evaluation Section) – 10 points

Applicants should describe the plan to evaluate the program, including how the organization will track work plan progress to ensure deliverables are achieved by September 29, 2021 and reported on no later than October 15, 2021. Applicants should also describe their plan to collect GPRA data **(5 points)**.

The description should include the proposed targets for the following key grant outcomes **(5 points)**:

1. Number of individuals enrolled in the program;
2. Number of referrals to MOUD for:
 - a. Buprenorphine;
 - b. Methadone;
 - c. Naltrexone.
3. Number of individuals enrolled in MOUD;
4. Number of women who continued treatment into the post-partum period (for at least three (3) months after the birth of a child);
5. Average length of stay or number of sessions for individuals enrolled in the program;
6. Number of referrals to recovery support services;
7. Number of individuals tested for HCV;
8. Number of individuals referred to HCV treatment;
9. Number of individuals given naloxone;
10. Number of non-school-aged children engaged or accommodated throughout the course of the parent's treatment episode; and
11. Number of school-aged children engaged or accommodated throughout the course of the parent's treatment episode.

Criterion 5: Project Budget and Justification – 5 points

The applicant provided a budget and budget narrative justification of the items included in their proposed budget **(5 points)**.

COMPETITION 4:
HOSPITAL-BASED NALOXONE TRAINING AND TECHNICAL ASSISTANCE

Background

Between August and October 2020, at least 9,552 individuals who presented to emergency departments (EDs) in the District screened positive for substance use. In October 2020 alone, there were at least 133 individuals who were in an ED for a suspected opioid overdose.¹ Experiencing a nonfatal overdose and acquiring an injection-related infection are two of the most significant predictors of a subsequent fatal overdose,² which makes hospitals critical intervention points for distributing naloxone, an opioid overdose reversal drug. Naloxone effectively and quickly reverses most opioid overdoses and can be dispensed at no cost to the patient without a prescription from all hospitals in the District. Currently, it is not common practice for hospitals to discharge patients who have OUD with naloxone. DBH intends to partner with a grantee to support training and technical assistance for hospitals to easily identify patients who might benefit from naloxone and dispense it to them upon release from the ED or an inpatient unit. At the end of this initiative, all DC hospitals should have developed policies, procedures and a workflow to ensure anyone at risk of using opioids or witnessing an opioid overdose is released with naloxone.

This competition will support the LIVE. LONG.DC. Plan Strategy 3.8, “Encourage provider continuing education on increasing prescriptions of naloxone for persons identified with OUD or those at risk.” It also supports Strategy 4.1, “Increase harm reduction education to families and communities, including naloxone distribution for those most affected.” This competition will be funded by the DCOR 1 grant.

Pre-Application Meeting

A Pre-Application Meeting will be held on January 29, 2021. The meeting will be held virtually at the time below:

Competition 4: January 29, 2021 from 2:00-2:45pm

Meeting link:

<https://dcnet.webex.com/dcnet/j.php?MTID=maea9b4b432211768ee6c80b88457db14>

Meeting number: 180 412 8321

Password: 4XBnRHayE23

More ways to join

Join by video system: Dial 1804128321@dcnet.webex.com

You can also dial 173.243.2.68 and enter your meeting number.

Join by phone: +1-202-860-2110 United States Toll (Washington D.C.)

1-650-479-3208 Call-in toll number (US/Canada)

Access code: 180 412 8321

The meeting will provide an overview of the RFA requirements and address specific issues and concerns about the RFA. Department of Behavioral Health (DBH) will not accept any applications at this conference. Applicants shall not submit drafts, outlines, or summaries to DBH for review, comment, or technical assistance.

Performance Requirements

Eligibility Criteria

1. At least two (2) years' experience providing training and/or technical assistance to large, urban hospitals;

¹ DC Hospital Association Monthly Report, November 2020.

² Larochelle, M., et al. Touchpoints – Opportunities to predict and prevent opioid overdose: A cohort study. 2019. <https://pubmed.ncbi.nlm.nih.gov/31521956/>

2. Demonstrated knowledge of the financial, legal, and regulatory landscape surrounding naloxone; and,
3. Demonstrated ability to start work within thirty (30) calendar days of award.

Additional Experience Requirements

1. Experience managing local (District of Columbia) or federal grants; and,
2. A functioning accounting system that is operated in accordance with generally accepted accounting principles.

Target Population

The target population is hospital administrators and staff in the following eight (8) hospitals: George Washington University Hospital, Howard University Hospital, MedStar Georgetown University Hospital, Sibley Memorial Hospital, MedStar Washington Hospital Center, United Medical Center, Psychiatric Institute of Washington, and St. Elizabeth's Hospital.

Location of Services

Services associated with this grant must take place in the District of Columbia.

Scope of Services

Services to be provided under the Hospital-Based Naloxone Training and Technical Assistance initiative shall include the following:

1. Conduct a needs assessment that evaluates any efforts already underway to expand naloxone access in DC hospitals and the barriers hospitals face in making naloxone freely available to patients who need it;
2. Use the results of the needs assessment to develop and deliver training and technical assistance to DC hospitals to help establish and implement policies, procedures, and a workflow to dispense naloxone to patients, upon release from the hospital;
3. Provide ongoing, individualized technical assistance to hospitals around naloxone dispensing for the duration of the grant period, as needed; and,
4. Develop a sustainability plan with the hospitals to ensure that naloxone continues to be distributed after the conclusion of the grant period.

Data Collection and Reporting

Grantees will be required to collect, track, and report information on services provided and individuals served, including:

1. The number of patients seen or admitted with opioid use disorder (OUD) by department;
2. The number of patients seen or admitted after an overdose;
3. The percentage of individuals with OUD who are discharged from the hospital with naloxone;
4. The amount of naloxone distributed at each hospital by department; and,
5. The number of hospital staff engaged in training/technical assistance at each hospital and each staff member's title.

Data Collection and Tracking

1. Grantees will identify a point of contact for all data matters pertaining to the initiative.
2. Grantees will be responsible for ensuring that all hospitals that received training or technical assistance under this funding opportunity will be included in the grant data collection and submit monthly data report, by the 10th day of each month.
3. Grantees will be responsible for tracking and evaluating grant activities.
4. Grantees will submit monthly progress reports that detail strides toward meeting the deliverables as outlined in the DBH approved Scope of Work (SOW).

APPLICATION REQUIREMENTS

Project Narrative – up to ten (10) pages

A. **Organizational Capacity**

Applicants should include the following information to highlight their experience and capacity to provide hospital-based naloxone training in the District:

1. Describe their experience and capacity to meet the scope of services outlined in this request for application (RFA);
2. Have among its organizational purposes, significant activities related to providing training and technical assistance to hospitals;
3. Describe relevant experience, and duration of that experience, in delivering the services or partnering with others to deliver the services proposed under this RFA. Specify experience with large, urban hospitals and naloxone or other behavioral health-related workflows;
4. Describe the staff who will work on this initiative, including anyone that would be hired to run or provide oversight of the initiative;
5. Describe any potential challenges and contingency plans for addressing concerns related to circumstances that may arise; and,
6. Describe the organization's plan to be fully operational within thirty (30) calendar days of the new grant agreement.

B. **Project Need**

Applicants should describe the unmet need for hospital-based naloxone in the District.

C. **Project Description (align to Work Plan, Attachment D)**

Applicants should describe:

1. Clearly defined measurable goals, objectives, and anticipated outcomes;
2. Existing relationships with the eight (8) hospitals in the District and a plan to build support for this initiative, if needed (NOTE: letters of commitment are required from all key partners and these commitment letters will not count towards page limitations);
3. A timeline for implementation that clearly defines milestones, inclusive of start-up;
4. A plan to develop and administer a needs assessment that identifies barriers to hospital-based naloxone distribution;
5. A plan to use the results of the needs assessment to develop training and technical assistance for each of the eight (8) hospitals that includes policy and procedure development and workflow changes;
6. A plan to provide ongoing training and technical assistance to each hospital as needed and develop a sustainability plan; and,
7. Describe any potential challenges, if known, and contingency plans for addressing concerns related to circumstances that may arise.

D. **Project Evaluation**

The applicant must include clear, quantitative goals and objectives for the grant period and present a sound and feasible evaluation plan that meets the goals in this application.

The section should describe the applicant's plan to evaluate the initiative. The description should include the proposed targets for the following key grant outcomes:

1. The number of patients seen or admitted with OUD by department;
2. The number of patients seen or admitted after an overdose;

3. The percentage of individuals with OUD who are discharged from the hospital with naloxone;
4. The amount of naloxone distributed at each hospital by department; and,
5. The number of hospital staff engaged in training/technical assistance at each hospital and each staff member's title.

The grantee may propose additional outcome measures specific to the initiative, subject to DBH approval.

Project Attachments

Some of the attachments for this application include required templates that the applicants must use, as indicated below.

A. Project Abstract (1 page)

A one-page project abstract is required (**see Attachment C**). Please provide a one-page abstract that is clear, accurate, concise, and without reference to other parts of the Project Narrative. The project abstract must be typed on 8 ½ by 11-inch paper, 1.0 spaced, Arial or Times New Roman font using 12-point type (10-point font for tables and figures) with a minimum of one-inch margins, **limited to one page in length**, and include the following sections (*no template provided*):

1. **Project Description:** Briefly outline how the organization will implement the initiative in service of the goal and objectives.
2. **Performance Metrics:** Outline the key outcome and process metrics and associated targets that will be used to assess grantee performance.

B. Work Plan (not counted in page limit)

The work plan template (**see Attachment D**) provided by DBH is required. The work plan describes key activities and tasks to successfully deliver the Peer Recovery Housing scope of services and aligns with the Project Description narrative under Application Requirements. The activities and tasks should be organized chronologically, and each should have an identified responsible staff, target completion date, and associated output.

C. Staffing Plan (not counted in page limit)

The applicant's staff plan template (**see Attachment E**) provided by DBH is required. The staffing plan should describe staff duties, qualifications, and the percent of time to be spent on project activities, and whether the time will be charged to the grant. The plan should clearly indicate which staff positions will need to be hired. Staff CVs, resumes, and position descriptions shall be submitted and will not count towards the page limit. Staffing should include, at a minimum, the program director responsible for the oversight and day-to-day management of the proposed program; staff responsible for service delivery; staff responsible for monitoring programmatic activities and use of funds; and staff responsible for data collection, quality, and reporting. The individual who will be responsible for Government Performance and Results Acts (GPRA) data collection should be specified.

D. Project Budget and Justification (not counted in page limit)

The application should include a project budget (**see Attachment F**) with justification using the provided template. The project budget and budget justification should be directly aligned with the work plan and project description. All expenses should relate directly to achieving the key grant outcomes, including the following activities:

1. Conducting a needs assessment around hospital-based naloxone;
2. Developing and delivering training and technical assistance to the eight (8) hospitals in the District, so that they can develop policies and procedures and a workflow to consistently distribute naloxone to patients who need it upon release from the hospital.

The budget should reflect a six (6) month period. Personnel charges must be based on actual, not budgeted labor. Salaries and other expenditures budgeted for in the grant must be for services that will occur during the six (6) month grant period.

The following categories and descriptions should be covered in the Budget/Justification:

1. **Personnel:** Include the title of the position, name (or indicate vacancy), annual salary (cannot exceed \$197,300) and level of effort (percentage of time) dedicated to this project.
2. **Fringe:** Provide the position, name (or indicate vacancy), total fringe benefit rate used.
3. **Travel:** Only local travel related to the (insert name of project/effort) and for the project staff will be approved in the grant budget. Provide purpose, destination, and type of travel.
4. **Equipment:** Provide the item, quantity, amount, and percent charged to the grant.
5. **Supplies:** Include the items being requested and rate. Description should also include how the supplies directly support the project.
6. **Contractual:** Provide the name of entity and identify whether it's a sub-recipient, contractor, consultant, or service. Also provide the entity's rate. Any vendors selected under this RFA will be required to provide a breakdown of its personnel costs for each person performing services under the contract. This breakdown shall include: the actual salary paid, the actual fringe rate applied to the salary, any overhead applied and the profit amount.
7. **Other Direct Costs:** List any costs not included in any of the other cost categories.
8. **Indirect Costs:** Indirect costs should not exceed 10% of direct costs unless the organization has a negotiated indirect cost rate agreement. Please reference 45 CFR §75.414.
9. **Program Income:** If the possibility of generating program income as a result of DBH funding exists, list source and amount as budget line items.

E. **Advances (not counted in page limit)**

An applicant seeking an advance, must submit a completed Advance Payment Request form (**Attachment G**) signed by the organization's Chair of the Board of Directors and Executive Director, or equivalent positions. Applicants must detail the amount requested per budget category in the budget and justification (**see Attachment F**). **No advance payment will be provided without prior official request and approval.**

F. **Letters of Agreement (not counted in page limit)**

Applicant should submit all letters of agreement, from other agencies and organizations that will be actively engaged in the proposed project (*no template provided*).

G. **Business License (not counted in page limit)**

The applicant must submit a current business license and Certificate of Occupancy issued by the District of Columbia Department of Consumer and Regulatory Affairs. If the applicant does not have a current license, a copy of the business license application and receipt filed no later than the due date of the grant application may be submitted.

H. **Clean Hands Certification (not counted in page limit)**

Each applicant must submit a current Clean Hands Certification from the District of Columbia Office of Tax and Revenue (OTR). DBH requires that the submitted Clean Hands Certification reflect a date within a six-month period immediately preceding the application's submission. Self-Certification is not acceptable.

I. **501(c)(3) Letter (not counted in page limit)**

The applicant must submit the organization's determination or affirmation letter approving and/or confirming the tax-exempt status.

J. Articles of Incorporation & Bylaws (not counted in page limit)

The applicant must submit certification of current/active Articles of Incorporation from the DC Department of Consumer and Regulatory Affairs. Also, the current/active Bylaws must also be submitted.

K. IRS W-9 Tax Form (not counted in page limit)

The applicant must submit a current completed W-9 form prepared for the U.S. Internal Revenue Service (IRS). DBH defines "current" to mean the document was completed within the same calendar year as that of the application date.

L. IRS Tax Exemption Affirmation Letter (not counted in page limit)

The tax exemption affirmation letter is the IRS's determination letter of non-profit status. If this letter is not available, then the applicant should provide its most recent IRS Form 990 tax return if one was submitted. If no return has yet been filed, the organization can submit its application for tax-exempt status. If the group has a supporting organization with an IRS tax-exempt status determination, then that organization's tax exemption affirmation letter should also be submitted.

If there is no IRS tax exemption letter because the organization is a religious organization, then the applicant may submit the best evidence it can of its status. Examples of potential best evidence for this purpose include, but are not limited to (i) a letter from the leader of the organization verifying that the organization is a religious group; (ii) a letter from the group's board chair or similar official, verifying that the organization is a religious group; (iii) the applicant's most recently submitted state sales or other tax exemption form, if it exists (Form 164 in the District of Columbia); or (iv) the state's issued tax exemption certificate or card, if it exists. (See IRS publication no. 1828, *Tax Guide for Churches and Religious Organizations*).

M. Current Fiscal Year Budget (not counted in page limit)

The applicant must submit its full budget, including a projected income, for the current fiscal year and comparison of budgeted versus actual income and expenses of the fiscal year to date.

N. Financial Statements (not counted in page limit)

If the applicant has undergone an audit or financial review, it must provide the most recent audited financial statements or reviews. If audited financial statements or reviews are not available, the applicant must provide its most recent complete year's unaudited financial statements.

O. Separation of Duties Policy (not counted in page limit)

The applicant must state how the organization separates financial transactions and duties among people within the organization to prevent fraud or waste. This may be a statement that already exists as a formal policy of the organization, or the applicant may create the statement for purposes of the application. The applicant should state which of these situations apply.

This statement should:

1. Describe how financial transactions are handled and recorded;
2. Provide the names and titles of personnel involved in handling money;
3. Identify how many signatures the financial institution(s) require on the organization's checks and withdrawal slips; and,
4. Address other limits on staff and board members' handling of the organization's money.

P. Board of Directors (not counted in page limit)

The applicant must submit an official list of the current board of directors on letterhead to include: names and board titles of officers, mailing and e-mail addresses, and phone numbers. The document must be signed by the authorized executive of the applicant organization.

Q. System for Award Management (SAM) Registration

If a project within this RFA is funded wholly or partially by federal funding sources, applicants must be registered in the System of Award Management at www.sam.gov and provide evidence of this registration as part of the application package.

R. Partner Documents (not counted in page limit)

If applicable, the applicant must submit the partnering organization's Clean Hands Certificate (from the Office of Tax and Revenue) and documentation of the partner's tax -exempt status.

S. Proof of Insurance for: Commercial, General Liability, Professional Liability, Comprehensive Automobile and Worker's Compensation (not counted in page limit)

The applicant must provide in writing the name of all its insurance carriers and type of insurance provided (e.g., its general liability insurance carrier and automobile insurance carrier, worker's compensation insurance carrier), fidelity bond holder (if applicable), and before execution of the grant award, a copy of the binder or cover sheet of the current policy for any policy that covers activities that might be undertaken in connection with performance of the grant award, showing the limits of coverage and endorsements.

All policies, except the Worker's Compensation, Errors and Omissions, and Professional Liability policies that cover activities that might be undertaken in connection with the performance of the grant award shall contain additional endorsements naming the Government of the District of Columbia and its officers, employees, agents and volunteers as additional named insured with respect to liability abilities arising out of the performance of services under the grant award. The applicant shall require their insurance carrier of the required coverage to waive all rights of subrogation against the District, its officers, employees, agents, volunteers, contractors, and subcontractors.

EVALUATION CRITERIA

Indicators have been developed for each review criterion to assist the applicant in presenting pertinent information and to provide the reviewer with a standard for evaluation. The five review criteria are outlined below with specific detail and scoring points. These criteria are the basis upon which the reviewers will evaluate the application. The entire proposal will be considered during objective review.

Criterion 1: Capacity (Corresponds to Organizational Capacity Section) – 30 points

Applicants should:

1. Describe their experience and capacity to meet the scope of services outlined in this RFA **(5 points)**;
2. Have among its organizational purposes significant activities related to providing training and technical assistance to hospitals **(5 points)**;

3. Describe relevant experience, and duration of that experience, in delivering the services or partnering with others to deliver the services proposed under this RFA. Specify experience with large, urban hospitals and naloxone or other behavioral health-related workflows **(5 points)**;
4. Describe the staff who will work on this initiative, including anyone that would be hired to run or provide oversight of the initiative **(5 points)**;
5. Describe any potential challenges and contingency plans for addressing concerns related to circumstances that may arise **(5 points)**; and,
6. Describe the organization's plan to be fully operational within thirty (30) calendar days of the new grant agreement **(5 points)**.

Criterion 2: Need (Corresponds to Project Need Section) – 10 points

Applicants should describe the unmet need for hospital-based naloxone distribution in the District. **(10 points)**

Criterion 3: Strategic Approach (Corresponds to Project Description Section) – 45 points

Applicants should describe:

1. Clearly defined measurable goals, objectives, and anticipated outcomes **(5 points)**;
2. Existing relationships with the eight (8) hospitals in the District and a plan to build support for this initiative, if needed (NOTE: letters of commitment are required from all key partners and these commitment letters will not count towards page limitations) **(5 points)**;
3. A timeline for implementation that clearly defines milestones, inclusive of start-up **(5 points)**;
4. A plan to develop and administer a needs assessment that identifies barriers to hospital-based naloxone distribution **(10 points)**;
5. A plan to use the results of the needs assessment to develop training and technical assistance that includes policy and procedure development and workflow changes for each of the eight (8) hospitals **(10 points)**;
6. A plan to provide ongoing training and technical assistance to each hospital as needed and develop a sustainability plan **(5 points)**; and,
7. Describe any potential challenges, if known, and contingency plans for addressing concerns related to circumstances that may arise **(5 points)**.

Criterion 4: Evaluation (Corresponds to Project Evaluation Section) – 10 points

Applicants should describe the plan to evaluate the initiative, including how the organization will track work plan progress, to ensure deliverables are achieved by September 29, 2021 and reported on no later than October 15, 2021 **(5 points)**.

The description should include the proposed targets for the following key grant outcomes **(5 points)**:

1. The number of patients seen or admitted with OUD by department;
2. The number of patients seen or admitted after an overdose;
3. The percentage of individuals with OUD who are discharged from the hospital with naloxone;
4. The amount of naloxone distributed at each hospital by department; and,
5. The number of hospital staff engaged in training/technical assistance at each hospital and each staff member's title.

Criterion 5: Project Budget and Justification – 5 points

The applicant provided a budget and budget narrative justification of the items included in their proposed budget **(5 points)**.

**COMPETITION 5:
COMPREHENSIVE CARE MANAGEMENT**

Background

The goal of this initiative is to help the District's most vulnerable residents successfully navigate the physical and behavioral health care systems. Comprehensive care management can be implemented to both improve outcomes for clients with complex needs and reduce costs by reducing emergency department visits and proactively manage chronic conditions. For this initiative, the Department of Behavioral Health (DBH) aims to partner with grantee(s) who can provide comprehensive care management services to DBH's most complex and at-risk clients who are diagnosed with opioid use disorder (OUD) or stimulant use disorder (STUD). The grantee will identify the number of clients to be served based on their experience with clients with complex needs (e.g., lengthy behavioral health treatment history, hospitalizations, interactions with the criminal justice system, history of non-fatal overdoses) and how they will connect with these individuals. The grantee(s) will be responsible for working with those individuals to manage their care in a way that improves positive outcomes (e.g., retention in behavioral health treatment and improved physical health) and reduces negative outcomes (e.g., overdoses and emergency department visits). Ideally, this initiative will serve as a model for other care management-related efforts in the District that are ongoing as part of the transition to a managed care payment system. The grantee will also propose an outcomes-based payment system that uses grant funds to pay the grantee for care management services using a flat rate per client plus an incentive payment based on mutually agreed upon metrics with DBH.

The purpose of this grant funding is to support initiative start-up costs and other services that are not Medicaid-billable. This funding cannot be used to support any service provision that can be paid for by Medicaid.

This competition will support the District to address LIVE.LONG.DC Goal 5, Strategy 5.5, "Incorporate emphasis on physical health (including intensive health screenings) and mental well-being in substance use disorder treatment and programming." This competition will be funded by the DCOR 2 grant.

Pre-Application Meeting

A Pre-Application Meeting will be held on January 29, 2021. The meeting will be held virtually at the time below:

Competition 5: January 29, 2021 from 3:00-3:45pm

Meeting link:

<https://dcnet.webex.com/dcnet/j.php?MTID=mee6af41359d359a8e2800ffad3a1d1ba>

Meeting number: 180 723 5787

Password: i6Fe4YTBH3

More ways to join

Join by video system: Dial 1807235787@dcnet.webex.com

You can also dial 173.243.2.68 and enter your meeting number.

Join by phone: +1-202-860-2110 United States Toll (Washington D.C.)

1-650-479-3208 Call-in toll number (US/Canada)

Access code: 180 723 5787

The meeting will provide an overview of the RFA requirements and address specific issues and concerns about the RFA. DBH will not accept any applications at this conference. Applicants shall not submit drafts, outlines, or summaries to DBH for review, comment, or technical assistance.

Performance Requirements

Eligibility Criteria

1. At least two (2) years' experience providing care management to individuals with complex physical and behavioral health needs (applicants must specify in their application what model of care management they use and how the components of that model lead to improved outcomes);
2. Demonstrated knowledge of the District's publicly-funded behavioral health system, including regulations and financing; and,
3. Demonstrated ability to start work within thirty (30) calendar days of award.

Additional Experience Requirements

1. A functioning accounting system that is operated in accordance with generally accepted accounting principles; and,
2. A connection to health information exchange with ability to achieve Level 3 or 4 bidirectional exchange connectivity to DC's designated HIE, CRISP, by end of performance period (DHCF in-kind assistance is available to facilitate connection and to provide technical assistance).

Target Population

The target population is individuals in the District of Columbia with OUD/STUD and other complex, co-occurring health and behavioral health conditions who do not have private insurance. The specific population will be identified as high-utilizers of health and behavioral health care services by their history with behavioral health treatment, physical health conditions, interactions with the criminal justice system, and history of non-fatal overdose.

Location of Services

Services associated with this grant must take place in the District of Columbia.

Scope of Services

Services to be provided under the Comprehensive Care Management initiative shall include the following:

1. Propose the number of individuals to be served who have complex needs (e.g., lengthy treatment history, physical health conditions, interactions with the justice system, history of overdose).
2. Provide individualized, comprehensive care management to the individuals identified above. The exact services provided will vary based on individual needs, but some services may include:
 - a. Arranging transportation to and from treatment and other services;
 - b. Making and keeping track of appointments;
 - c. Interfacing with different service providers to ensure that the client is receiving the most effective level of care;
 - d. Coordinating medications and treatment plans between different physical and behavioral health providers; and,
 - e. Helping the client acquire housing, food assistance, legal assistance, employment training, and other services as needed.
3. Propose performance-based milestones and incentives to be approved by DBH.
4. Develop individualized goals and care plans for each individual served.
5. Re-engage individuals who have stopped receiving services through proactive outreach.

6. Identify additional individuals who may benefit from this initiative that were not initially identified by DBH. Populations of special interest are:
 - a. Pregnant and/or parenting individuals;
 - b. Individuals with HIV and/or HCV;
 - c. Individuals who have been recently incarcerated;
 - d. Individuals who inject drugs; and,
 - e. Individuals over the age of 50.
7. Develop a sustainability plan that includes a description of how these grant funds will support start-up costs and facilitate the provision of Medicaid-billable services.

Data Collection and Reporting

In addition to collecting GPRA data, grantees will be required to collect, track, and report information on services provided and individuals served, including:

1. The number of individuals actively receiving care management services at any given time; and
2. For each individual:
 - Behavioral and physical health diagnoses
 - Behavioral health treatment services received (including receipt of methadone, buprenorphine, or naltrexone)
 - Physical health services received
 - Recovery support service received
 - Number of hospitalizations (and reason for hospitalizations)
 - Number of overdoses
 - Number of interactions with the justice system (arrests and incarcerations)
 - Housing status
 - Employment status
 - Number of referrals successfully completed and service received
 - Number of referrals not successfully completed and reason for failure.
 - Any other measures that are part of the pay for performance milestones.

Data Collection and Tracking

1. Grantees will identify a point of contact for all data matters pertaining to the initiative.
2. Grantees will be responsible for ensuring that all individuals received services under this funding opportunity will be included in the grant data collection and submit monthly data report, by the 10th day of each month.
3. Grantees will be responsible for tracking and evaluating grant activities.
4. Grantees will submit monthly progress reports that detail strides toward meeting the deliverables as outlined in the DBH approved Scope of Work.

APPLICATION REQUIREMENTS

Project Narrative – up to ten (10) pages

E. Organizational Capacity

Applicants should include the following information to highlight their experience and capacity to provide comprehensive care management in the District:

1. Have among its organizational purposes significant activities related to providing complex comprehensive care management;
2. Describe relevant experience, and duration of that experience, in delivering the services or partnering with others to deliver the services proposed under this RFA. Specify experience managing care for individuals with multiple physical and behavioral health conditions and with the behavioral health system in the District of

- Columbia;
3. Describe relevant experience, and duration of that experience, in identifying and tracking behavioral health and physical health-related outcomes for complex clients;
 4. Describe the staff who will work on this initiative, including anyone that would be hired to run or provide oversight of the initiative;
 5. Describe any potential challenges and contingency plans for addressing concerns related to circumstances that may arise; and,
 6. Describe the organization's plan to be fully operational within thirty (30) calendar days of the new grant agreement.

F. Project Need

Applicants should describe the unmet need for comprehensive care management in the District for individuals with OUD/STUD.

G. Project Description (align to Work Plan, Attachment III)

Applicants should describe:

1. Clearly defined measurable goals, objectives, and anticipated outcomes;
2. Existing relationships with any partners that will help deliver the services outlined in this RFA (NOTE: letters of commitment are required from all key partners and these commitment letters will not count towards page limitations);
3. A timeline for implementation that clearly defines milestones, inclusive of startup;
4. A plan for the number of clients to be served in the District of Columbia with OUD/STUD who could benefit from comprehensive case management and how they will access those clients;
5. A plan to provide comprehensive care management to clients with complex health, behavioral health, and other needs;
6. A plan to develop individualized goals with each client and objectively track and report on their progress;
7. A plan to re-engage clients who have stopped receiving services through proactive outreach;
8. A proposed pay for performance plan based on milestones;
9. A sustainability plan that explains how these services will be funded beyond the conclusion of the grant term; and,
10. Any potential challenges, if known, and contingency plans for addressing concerns related to circumstances that may arise.

H. Project Evaluation

The applicant must include clear, quantitative goals and objectives for the grant period and present a sound and feasible evaluation plan that meets the goals in this application.

The section should describe the applicant's plan to evaluate the initiative. The description should include the proposed targets for the following key grant outcomes:

1. The total number of individuals receiving care management services.
2. For each individual:
 - Behavioral health treatment services received
 - Physical health services received
 - Recovery support service received
 - Number of hospitalizations (and reason for hospitalizations)
 - Number of overdoses
 - Number of interactions with the justice system (arrests and incarcerations)
 - Housing status
 - Employment status

- Number of referrals successfully completed and service received
 - Number of referrals not successfully completed and reason for failure.
 - Any other measures that are part of the pay for performance milestones.
3. The percent of individuals who are on track to meet their specified goals.

For this initiative, the GPRA mandates increased accountability and performance-based management by federal grants and contracts must be used. This has resulted in greater focus on results or outcomes in evaluating the effectiveness of federal activities, and in measuring progress toward achieving goals and objectives. The grantee should also briefly describe the infrastructure that will support evaluation activities and the collection of GPRA data.

The grantee may propose additional outcome measures specific to the initiative, subject to DBH approval.

Project Attachments

Some of the attachments for this application include required templates that the applicants must use, as indicated below.

A. **Project Abstract (1 page)**

A one-page project abstract is required (see **Attachment C**). Please provide a one-page abstract that is clear, accurate, concise, and without reference to other parts of the Project Narrative. The project abstract must be typed on 8 ½ by 11-inch paper, 1.0 spaced, Arial or Times New Roman font using 12-point type (10-point font for tables and figures) with a minimum of one-inch margins, **limited to one page in length**, and include the following sections (*no template provided*):

1. **Project Description:** Briefly outline how the organization will implement the initiative in service of the goal and objectives.
2. **Performance Metrics:** Outline the key outcome and process metrics and associated targets that will be used to assess grantee performance.

B. **Work Plan (not counted in page limit)**

The work plan template (see **Attachment D**) provided by DBH is required. The work plan describes key activities and tasks to successfully deliver the Peer Recovery Housing scope of services and aligns with the Project Description narrative under Application Requirements. The activities and tasks should be organized chronologically, and each should have an identified responsible staff, target completion date, and associated output.

C. **Staffing Plan (not counted in page limit)**

The applicant's staff plan template (see **Attachment E**) provided by DBH is required. The staffing plan should describe staff duties, qualifications, and the percent of time to be spent on project activities, and whether the time will be charged to the grant. The plan should clearly indicate which staff positions will need to be hired. Staff CVs, resumes, and position descriptions shall be submitted and will not count towards the page limit. Staffing should include, at a minimum, the program director responsible for the oversight and day-to-day management of the proposed program; staff responsible for service delivery; staff responsible for monitoring programmatic activities and use of funds; and staff responsible for data collection, quality, and reporting. The individual who will be responsible for GPRA data collection should be specified.

D. **Project Budget and Justification (not counted in page limit)**

The application should include a project budget (see **Attachment F**) with justification using the provided template. The project budget and budget justification should be directly aligned with the work plan and project description. All expenses should relate directly to achieving the key grant outcomes, including the following activities:

1. Providing comprehensive care management to clients with OUD/STUD who have complex behavioral and physical health care needs.

The budget should reflect a six (6) month period. Personnel charges must be based on actual, not budgeted labor. Salaries and other expenditures budgeted for in the grant must be for services that will occur during the six (6) month grant period. Applicants must describe how they are going to bill Medicaid for services, if possible, and provide a sustainability plan as part of the Project Description. **The applicant must confirm that these funds are not being spent on Medicaid-billable services, specify how start-up activities will facilitate the provision of Medicaid-billable services, and provide a timeline for achieving sustainability.**

The following categories and descriptions should be covered in the Budget/Justification:

1. **Personnel:** Include the title of the position, name (or indicate vacancy), annual salary (cannot exceed \$197,300) and level of effort (percentage of time) dedicated to this project.
2. **Fringe:** Provide the position, name (or indicate vacancy), total fringe benefit rate used.
3. **Travel:** Only local travel related to the (insert name of project/effort) and for the project staff will be approved in the grant budget. Provide purpose, destination, and type of travel.
4. **Equipment:** Provide the item, quantity, amount, and percent charged to the grant.
5. **Supplies:** Include the items being requested and rate. Description should also include how the supplies directly support the project.
6. **Contractual:** Provide the name of entity and identify whether it's a sub-recipient, contractor, consultant, or service. Also provide the entity's rate. Any vendors selected under this RFA will be required to provide a breakdown of its personnel costs for each person performing services under the contract. This breakdown shall include: the actual salary paid, the actual fringe rate applied to the salary, any overhead applied and the profit amount.
7. **Other Direct Costs:** List any costs not included in any of the other cost categories.
8. **Indirect Costs:** Indirect costs should not exceed 10% of direct costs unless the organization has a negotiated indirect cost rate agreement. Please reference 45 CFR §75.414.
9. **Program Income:** If the possibility of generating program income as a result of DBH funding exists, list source and amount as budget line items.

E. **Advances (not counted in page limit)**

An applicant seeking an advance, must submit a completed Advance Payment Request form (**Attachment G**) signed by the organization's Chair of the Board of Directors and Executive Director, or equivalent positions. Applicants must detail the amount requested per budget category in the budget and justification (see **Attachment F**). **No advance payment will be provided without prior official request and approval.**

F. **Letters of Agreement (not counted in page limit)**

Applicant should submit all letters of agreement, from other agencies and organizations that will be actively engaged in the proposed project (*no template provided*).

G. **Business License (not counted in page limit)**

The applicant must submit a current business license and Certificate of Occupancy issued by the District of Columbia Department of Consumer and Regulatory Affairs. If the applicant does not have a current license, a copy of the business license application and receipt filed no later than the due date of the grant application may be submitted.

H. **Clean Hands Certification (not counted in page limit)**

Each applicant must submit a current Clean Hands Certification from the District of Columbia Office of Tax and Revenue (OTR). DBH requires that the submitted Clean Hands Certification reflect a date within a six-month period immediately preceding the application's submission. Self-Certification is not acceptable.

I. **501(c)(3) Letter (not counted in page limit)**

The applicant must submit the organization's determination or affirmation letter approving and/or confirming the tax-exempt status.

J. **Articles of Incorporation & Bylaws (not counted in page limit)**

The applicant must submit certification of current/active Articles of Incorporation from the DC Department of Consumer and Regulatory Affairs. Also, the current/active Bylaws must also be submitted.

K. **IRS W-9 Tax Form (not counted in page limit)**

The applicant must submit a current completed W-9 form prepared for the U.S. Internal Revenue Service (IRS). DBH defines "current" to mean the document was completed within the same calendar year as that of the application date.

L. **IRS Tax Exemption Affirmation Letter (not counted in page limit)**

The tax exemption affirmation letter is the IRS's determination letter of non-profit status. If this letter is not available, then the applicant should provide its most recent IRS Form 990 tax return if one was submitted. If no return has yet been filed, the organization can submit its application for tax-exempt status. If the group has a supporting organization with an IRS tax-exempt status determination, then that organization's tax exemption affirmation letter should also be submitted.

If there is no IRS tax exemption letter because the organization is a religious organization, then the applicant may submit the best evidence it can of its status. Examples of potential best evidence for this purpose include, but are not limited to (i) a letter from the leader of the organization verifying that the organization is a religious group; (ii) a letter from the group's board chair or similar official, verifying that the organization is a religious group; (iii) the applicant's most recently submitted state sales or other tax exemption form, if it exists (Form 164 in the District of Columbia); or (iv) the state's issued tax exemption certificate or card, if it exists. (See IRS publication no. 1828, *Tax Guide for Churches and Religious Organizations*).

M. **Current Fiscal Year Budget (not counted in page limit)**

The applicant must submit its full budget, including a projected income, for the current fiscal year and comparison of budgeted versus actual income and expenses of the fiscal year to date.

N. **Financial Statements (not counted in page limit)**

If the applicant has undergone an audit or financial review, it must provide the most recent audited financial statements or reviews. If audited financial statements or reviews are not available, the applicant must provide its most recent complete year's unaudited financial statements.

O. **Separation of Duties Policy (not counted in page limit)**

The applicant must state how the organization separates financial transactions and duties among people within the organization to prevent fraud or waste. This may be a statement that already exists as a formal policy of the organization, or the applicant may create the statement for purposes of the application. The applicant should state which of these situations apply.

This statement should:

1. Describe how financial transactions are handled and recorded;
2. Provide the names and titles of personnel involved in handling money;
3. Identify how many signatures the financial institution(s) require on the organization's checks and withdrawal slips; and
4. Address other limits on staff and board members' handling of the organization's money.

P. **Board of Directors (not counted in page limit)**

The applicant must submit an official list of the current board of directors on letterhead to include: names and board titles of officers, mailing and e-mail addresses, and phone numbers. The document must be signed by the authorized executive of the applicant organization.

Q. **System for Award Management (SAM) Registration**

If a project within this RFA is funded wholly or partially by federal funding sources, applicants must be registered in the System of Award Management at www.sam.gov and provide evidence of this registration as part of the application package.

R. **Partner Documents (not counted in page limit)**

If applicable, the applicant must submit the partnering organization's Clean Hands Certificate (from the Office of Tax and Revenue) and documentation of the partner's tax-exempt status.

S. **Proof of Insurance for: Commercial, General Liability, Professional Liability, Comprehensive Automobile and Worker's Compensation (not counted in page limit)**

The applicant must provide in writing the name of all its insurance carriers and type of insurance provided (e.g., its general liability insurance carrier and automobile insurance carrier, worker's compensation insurance carrier), fidelity bond holder (if applicable), and before execution of the grant award, a copy of the binder or cover sheet of the current policy for any policy that covers activities that might be undertaken in connection with performance of the grant award, showing the limits of coverage and endorsements.

All policies, except the Worker's Compensation, Errors and Omissions, and Professional Liability policies that cover activities that might be undertaken in connection with the performance of the grant award shall contain additional endorsements naming the Government of the District of Columbia and its officers, employees, agents, and volunteers as additional named insured with respect to liability abilities arising out of the performance of services under the grant award. The applicant shall require their insurance carrier of the required coverage to waive all rights of subrogation against the District, its officers, employees, agents, volunteers, contractors, and subcontractors.

EVALUATION CRITERIA

Indicators have been developed for each review criterion to assist the applicant in presenting pertinent information and to provide the reviewer with a standard for evaluation. The five review criteria are outlined below with specific detail and scoring points. These criteria are the basis upon which the reviewers will evaluate the application. The entire proposal will be considered during objective review.

Criterion 1: Capacity (Corresponds to Organizational Capacity Section) – 30 points

Applicants should:

1. Have among its organizational purposes significant activities related to providing complex comprehensive care management **(5 points)**;
2. Describe relevant experience, and duration of that experience, in delivering the services or partnering with others to deliver the services proposed under this RFA. Specify experience managing care for individuals with multiple physical and behavioral health conditions and with the behavioral health system in the District of Columbia **(5 points)**;
3. Describe relevant experience, and duration of that experience, in identifying and tracking behavioral health and physical health-related outcomes for complex clients **(5 points)**;
4. Describe the staff who will work on this initiative, including anyone that would be hired to run or provide oversight of the initiative **(5 points)**;
5. Describe any potential challenges and contingency plans for addressing concerns related to circumstances that may arise **(5 points)**; and,
6. Describe the organization's plan to be fully operational within thirty (30) calendar days of the new grant agreement **(5 points)**.

Criterion 2: Need (Corresponds to Project Need Section) – 10 points

Applicants should describe the unmet need for comprehensive care management in the District. **(10 points)**

Criterion 3: Strategic Approach (Corresponds to Project Description Section) – 50 points

Applicants should describe:

1. Clearly defined measurable goals, objectives, and anticipated outcomes **(5 points)**;
2. Existing relationships with any partners that will help deliver the services outlined in this RFA (NOTE: letters of commitment are required from all key partners and these commitment letters will not count towards page limitations) **(5 points)**;
3. A timeline for implementation that clearly defines milestones, inclusive of start-up **(5 points)**;
4. A plan to develop criteria to identify clients in the District of Columbia with OUD/STUD who could benefit from comprehensive case management **(5 points)**;
5. A plan to provide comprehensive case management to clients with complex health, behavioral health, and other needs **(10 points)**;
6. A plan to develop individualized goals with each client and objectively track and report on their progress **(5 points)**;
7. A plan to re-engage clients who have stopped receiving services through proactive outreach **(5 points)**;
8. A sustainability plan that explains how these services will be funded beyond the conclusion of the grant term **(5 points)**; and,
9. Any potential challenges, if known, and contingency plans for addressing concerns related to circumstances that may arise **(5 points)**.

Criterion 4: Evaluation (Corresponds to Project Evaluation Section) – 10 points

Applicants should describe the plan to evaluate the initiative, including how the organization will track work plan progress to ensure deliverables are achieved by September 29, 2021 and reported on no later than October 15, 2021. Applicants should also describe their plan to collect GPRA data. **(5 points)**

The description should include the proposed targets for the following key grant outcomes **(5 points)**:

1. The total number of individuals receiving care management services.
2. For each individual:
 - Behavioral health treatment services received
 - Physical health services received
 - Recovery support service received
 - Number of hospitalizations (and reason for hospitalizations)
 - Number of overdoses
 - Number of interactions with the justice system (arrests and incarcerations)
 - Housing status
 - Employment status
 - Number of referrals successfully completed and service received
 - Number of referrals not successfully completed and reason for failure
 - Any other measures that are part of the pay for performance milestones
3. The percent of individuals who are on track to meet their specified goals.

Criterion 5: Project Budget and Justification – 5 points

The applicant provided a budget and budget narrative justification of the items included in their proposed budget **(5 points)**.

REVIEW AND SCORING OF APPLICATION

Pre-Screening Technical Review

All applications will be reviewed initially for completeness, formatting, and eligibility requirements by DBH personnel prior to being forwarded to the review panel. Incomplete applications and applications that do not meet the eligibility criteria will not advance to be reviewed. DBH will only notify applicants that their application did not meet the noted requirements.

Review Panel

The review panel will be composed of neutral, qualified, professional individuals who have been selected for their unique experiences in adult substance use and opioid use disorders, behavioral health and administrative requirements mandated by the source of funds, as applicable. The panel will review, score, and rank each applicant's proposal based on criteria outlined in the RFA. Reviewers are required to provide a summary of strengths and weaknesses found in the application.

Internal Review Panel

DBH program managers will evaluate the individual and summary recommendations of the review panel. Program Managers will weigh the results of the review panel against other factors such as, but not limited to; a past performance review, risk assessment and eligibility assessment, including a review of assurances and certification, and business documents submitted by the applicant, as required in the RFA in making the final decision.

In this phase of the review process, **DBH reserves the right to request clarifying supplemental information from applicants and request pre-decisional on-site reviews for those applicants being considered for award.** Any request for supplemental information or on-site visits is not a commitment by DBH to fund the applicant.

The internal review panel will prepare and submit a formal recommendation of prospective awardees, funding levels and service/activities to the DBH Director for signature. The DBH Grants Management Office is responsible for certifying that all District rules and standards were followed for the RFA process.

APPLICATION PREPARATION & SUBMISSION

Multiple competitions are included in this RFA to allow multiple submissions per competition by one organization. An application package consists of an Application Profile and Table of Contents, Project Narrative, Project Budget/Budget Justification, and other related Attachments.

Application Package

The following attachments **are not** included in the 11 page limit:

- A. Notice of Eligibility and Experience Requirements (**Attachment A**)
- B. Intent to Apply Notification (**Attachment B**)
- C. DBH Application Profile (**Attachment C**)
- D. Table of Contents – Lists major sections of the application with quick reference page indexing. Failure to include an accurate Table of Contents may result in the application not being reviewed fully or completely.
- E. Work Plan (**Attachment D**)
- F. Staffing Plan (**Attachment E**)
- G. Budget and Budget Justification (**Attachment F**)
- H. Advance Payment Request Form (**Attachment G**)
- I. Letters of Agreement

- J. Business License & Certificate of Occupancy
- K. Clean Hands Certification
- L. 501(c)(3) Letter
- M. Articles of Incorporation & Bylaws
- N. IRS W-9 Form
- O. IRS Tax Exemption Letter
- P. Current Fiscal Year Budget
- Q. Financial Statements
- R. Separation of Duties Policy
- S. Board of Directors
- T. System of Award Management Registration
- U. General Terms and Conditions (**Attachment 1**)
- V. Assurances, Certifications & Disclosure (**Attachment 2**)
- W. Financial Disclosure (**Attachment 3**)
- X. DC Contribution and Solicitation Certification (**Attachment 4**)
- Y. DBH Federal Assurances and Certifications (**Attachment 5**)
- Z. Special Terms of State Opioid Response (SOR) Award Funding (**Attachment 6**)
- AA. Special Terms of Award Funding (**Attachment 7**)
- BB. Tax Certification (**Attachment 8**)
- CC. Sub-Grantee Single Audit Certification (**Attachment 9**)
- DD. DBH Grant Terms and Conditions (**Attachment 10**)

The following attachments **are** included in the **11** page limit:

- A. Project Abstract – **1 page** (found in **Attachment C**)
- B. Project Narrative – **10 pages**

Note: Failure to submit ALL of the above attachments and appendices will result in a rejection of the application from the review process. The application will not qualify for review.

Submission

Applications are due to be submitted electronically **February 22, 2021, no later than 12:00 p.m., Eastern Time (ET)**, to DBH. **No applications will be accepted by fax, on-site and/or in-person.** Applications are to be emailed to DBH.Grants@dc.gov. Each email must be clearly labeled in the “Subject” with the **organization’s name, DBH RFA number, project name, and selected geographic designation.**

To ensure receipt, we ask that you attach all documents as a PDF and split documents as such:

- File #1 – Applicant Profile (incl. Abstract), Table of Contents, Project Narrative.
- File #2 – Notice of Eligibility and Experience Requirements, Work Plan, Staffing Plan, Budget and Budget Justification, and Advance Payment Request Form (if applicable).
- File #3 – Letters of Agreement, Business License, Certificate of Occupancy, Clean Hands Certification.
- File #4 – 501(c)(3) Letter, Articles of Incorporation & Bylaws, IRS W-9 Form, IRS Tax Exemption Letter, Current Fiscal Year Budget, Financial Statements, and Separation of Duties Policy.
- File #5 – Board of Directors, SAM Registration, Attachment 2*, Attachment 3*, Attachment 4*, Attachment 5*, Attachment 6*, Attachment 7*, Attachment 8*, Attachment 9*, and Attachment 10*. (***Please only include the signature page**)

Please note: You do not have to provide Attachment 1 – Terms and Conditions

Complete submissions will be date and time stamped upon receipt in the Grants inbox. An automated message will be sent to each applicant upon receipt of their complete application prior to the stated due date and time.

Applications received at or after February 22, 2021, 12:01 p.m. ET, will not be forwarded to the Review Panel for funding consideration. Any additions or deletions to an application will not be accepted after the deadline of 12:00 p.m., ET. **If you are able to email documents in fewer files, please feel free. If you need to send multiple emails, that is acceptable.** Application must be labeled and completely packaged for receipt by DBH. **Unidentified emails and files of applications will not be accepted.**

ADDITIONAL INFORMATION

Applicants who wish to receive updates and/or addenda to this RFA shall provide the information listed below to the District of Columbia, Department of Behavioral Health, Adult Services Administration by contacting Julie.Wiegandt@dc.gov. Please be sure to put "RFA Contact Information" in the subject box and in the body of the email include:

1. Name of Organization
2. Key Contact Mailing Address
3. Telephone Number, Second Contact Email Address

GRANTEE REQUIREMENTS

If the applicant is considered for funding based on the results of the competition, the following requirements are in effect:

Grant Terms & Conditions

All grants awarded under this program will be subject to the DBH Standard Terms and Conditions for all DBH – issued grants. The Terms and Conditions are located in the Appendix A for signature and acceptance.

Grant Uses

The grant awarded under this RFA shall be used exclusively to pay costs associated with the implementation of the grant. Payment requests will be monitored by DBH to ensure compliance with the approved budget and work plan. The Department of Behavioral Health requires sub-grantees to identify and document program income that is directly generated by a supported activity or earned as a result of the federal award during the period of performance. The award package will provide more information on how to report program income on a monthly, no less than quarterly, basis.

Conditions of Award

As a condition of the award, a successful applicant who receives a Notice of Grant Award (NOGA) will be required to:

1. Meet Pre-Award requirements, including submission and approval of required assurances and certification documents, documentation of non-disbarment or suspension (current or pending) of eligibility to receive local or federal funds.
2. Adhere to mutually agreed upon terms and conditions of a grant award issued by the Department of Behavioral Health and accepted by the grantee organization. The grant award shall outline the scope of work, standards, reporting requirements, fund distribution terms and any special provisions required by federal agreements.
3. Utilize Performance Monitoring & Reporting tools developed and/or approved by DBH.

Indirect Cost

Indirect costs are costs that are not readily identifiable with a particular project or activity but are required for operating the organization and conducting the grant-related activities it performs. Indirect costs encompass expenditures for operation and maintenance of building and equipment, depreciation, administrative salaries, general telephone services and general travel and supplies. Pursuant to 45 CFR 75.414 and 75.352, subgrant recipients who are funded under federal awards will be reimbursed for indirect costs under one of three methods, according to an existing federally approved negotiated rate, a new negotiated rate or a default *de minimis* rate of 10% of the modified total direct costs.

Insurance

During the term of the grant, all organizations will be required to obtain and keep in force insurance coverage as detailed in the grant award and must provide in writing the name of all its insurance carriers and the type of insurance provided.

Audits

At any time or times before final payment and three (3) years thereafter, the District may have the applicant's expenditure statements and source documentation audited. Grantees subject to A-133 rules must have documentation available, and submit as requested, the most recent audit reports when requested by DBH personnel.

Nondiscrimination in the Delivery of Services

In accordance with Title VI of the Civil Rights Act of 1964 (Public Law 88-352), as amended, no person shall, on the grounds of race, color, religion, nationality, sex, or political opinion, be denied the benefits of, or be subjected to discrimination under, any program activity receiving funds under this RFA.

Quality Assurance

DBH will utilize a risk-based management and monitoring assessment to establish a monitoring plan for the grantee. Grantees will submit interim and final reports on progress, successes, and barriers.

Funding is contingent upon the Grantee's compliance with terms of the agreement and progress in meeting milestones and targets outlined in the approved work plan and evaluation plan. All programs shall be monitored and assessed by assigned project and grants management personnel. The Grantee will receive a performance rating and subject to review at any time during the budget period.

A final performance report shall be completed by the Department of Behavioral Health and provided and held for record and use by DBH in making additional funding or future funding available to the applicant. All performance reports are subject to review and oversight by the DBH Grants Office.

AGENCY CONTACT INFORMATION

Program Manager (main point of contact for this funding effort)

Julie Wiegandt at julie.wiegandt@dc.gov

Fiscal Management Office (inquiries regarding financial process)

Jennifer Mumford at jennifer.mumford@dc.gov

Grants Management Office (inquiries regarding grant process)

Renee Evans Jackman at renee.evans@dc.gov



**District of Columbia Opioid Response (DCOR) Grant Opportunities
RFA # RMO DOR012221**

Notice of Eligibility and Experience Requirements for Competition 1: Faith-Based Prevention, Outreach, and Recovery

Eligibility Requirements

Applicants must meet the stated eligibility and performance requirements in the RFA. Please describe your organization's eligibility in the applicable box below. You may include supporting documents.

1. Eligible entities who can apply for grant funds under this RFA are/have:

Able to enter into an agreement with DBH requiring compliance with all governing federal and District of Columbia laws and regulations, including Substance Use Disorders and Mental Health Grants (22-A DCMR Chapter 44).

Justification:

Faith-based organizations located in the District of Columbia.

Justification:

501(c)(3) non-profit status, or have the ability to enlist the services of a fiscal agent that meets this criteria to apply for the funding on behalf of the applicant organization.

Justification:

Active Charitable Solicitation license from DC Department of Consumer and Regulatory Affairs (DCRA).

Justification:

Experience Requirements

2. Eligible entities who can apply for grant funds under this RFA should have the following experience:

Demonstrated ability to start work within seven (7) days of award.

Justification:

If a current or former DBH grantee, the ability to prove compliance with all past or ongoing grant requirements (e.g., proof that all milestones have been met, data reports submitted, etc.).

Justification:



**District of Columbia Opioid Response (DCOR) Grant Opportunities
RFA # RMO DOR012221**

**Notice of Eligibility and Experience Requirements for Competition 2: Pregnant and Parenting
Individuals: Screening for Substance Use Disorders**

Eligibility Requirements

Applicants must meet the stated eligibility and performance requirements in the RFA. Please describe your organization’s eligibility in the applicable box below. You may include supporting documents.

1. Eligible entities who can apply for grant funds under this RFA are:

Able to enter into an agreement with DBH requiring compliance with all governing federal and District of Columbia laws and regulations, including Substance Use Disorders and Mental Health Grants (22-A DCMR Chapter 44).

Justification:

Demonstrated knowledge of pre and post-natal care in the District or demonstrated knowledge of effective SUD screening.

Justification:

Experience Requirements

2. Eligible entities who can apply for grant funds under this RFA should have the following experience:

Experience with managing grants or contracts greater than \$100,000.00.

Justification:

Demonstrated ability to start work within thirty (30) calendar days of award.

Justification:

Experience managing local (District of Columbia) or federal grants.

Justification:

A functioning accounting system that is operated in accordance with generally accepted accounting principles.

Justification:



**District of Columbia Opioid Response (DCOR) Grant Opportunities
RFA # RMO DOR012221**

**Notice of Eligibility and Experience Requirements for Competition 3: Pregnant and Parenting
Individuals: Treatment for Substance Use Disorders**

Eligibility Requirements

Applicants must meet the stated eligibility and performance requirements in the RFA. Please describe your organization’s eligibility in the applicable box below. You may include supporting documents.

1. Eligible entities who can apply for grant funds under this RFA have/are:

Able to enter into an agreement with DBH requiring compliance with all governing federal and District of Columbia laws and regulations, including Substance Use Disorders and Mental Health Grants (22-A DCMR Chapter 44).

Justification:

Be a certified substance use treatment or recovery provider pursuant to 22-A DCMR Chapter 63 and/or a licensed physician or clinic-based medical care provider (e.g., licensed clinic, office, federally qualified health center, or individual group practice).

Justification:

Experience Requirements

2. Eligible entities who can apply for grant funds under this RFA should have the following experience:

Experience managing local (District of Columbia) or federal grants.

Justification:

Demonstrated ability to start work within thirty (30) calendar days of award.

Justification:

A functioning accounting system that is operated in accordance with generally accepted accounting principles.

Justification:



District of Columbia Opioid Response (DCOR) Grant Opportunities
RFA # RMO DOR012221

Notice of Eligibility and Experience Requirements for Competition 4: Hospital-Based Naloxone Training and Technical Assistance

Eligibility Requirements

Applicants must meet the stated eligibility and performance requirements in the RFA. Please describe your organization’s eligibility in the applicable box below. You may include supporting documents.

1. Eligible entities who can apply for grant funds under this RFA have/are:

Able to enter into an agreement with DBH requiring compliance with all governing federal and District of Columbia laws and regulations, including Substance Use Disorders and Mental Health Grants (22-A DCMR Chapter 44).

Justification:

At least two (2) years’ experience providing training and/or technical assistance to large, urban hospitals.

Justification:

Demonstrated knowledge of the financial, legal, and regulatory landscape surrounding naloxone.

Justification:

Experience Requirements

2. Eligible entities who can apply for grant funds under this RFA should have the following experience:

Experience managing local (District of Columbia) or federal grants.

Justification:

Demonstrated ability to start work within thirty (30) calendar days of award.

Justification:

A functioning accounting system that is operated in accordance with generally accepted accounting principles.

Justification:



**District of Columbia Opioid Response (DCOR) Grant Opportunities
RFA # RMO DOR012221**

Notice of Eligibility and Experience Requirements for Competition 5: Comprehensive Care Management for Individuals with Opioid and Stimulant Use Disorder

Eligibility Requirements

Applicants must meet the stated eligibility and performance requirements in the RFA. Please describe your organization’s eligibility in the applicable box below. You may include supporting documents.

- 1. Eligible entities who can apply for grant funds under this RFA have/are:

Able to enter into an agreement with DBH requiring compliance with all governing federal and District of Columbia laws and regulations, including Substance Use Disorders and Mental Health Grants (22-A DCMR Chapter 44).

Justification:

At least two (2) years’ experience providing care management to individuals with complex physical and behavioral health needs (applicants must specify in their application what model of care management they use and how the components of that model lead to improved outcomes).

Justification:

Demonstrated knowledge of the District’s publicly-funded behavioral health system.

Justification:

Experience Requirements

- 2. Eligible entities who can apply for grant funds under this RFA should have the following experience:

Demonstrated ability to start work within thirty (30) calendar days of award.

Justification:

A connection to health information exchange with ability to achieve Level 3 or 4 bidirectional exchange connectivity to DC's designated HIE, CRISP, by end of performance period (Department of Health Care Finance in-kind assistance is available to facilitate connection and to provide technical assistance, if needed).

Justification:

A functioning accounting system that is operated in accordance with generally accepted accounting principles.

Justification:



District of Columbia Opioid Response (DCOR) Grant Opportunities
RFA # RMO DOR012221

Intent to Apply Notification
Due Date: Tuesday, January 26, 2021

TO: Department of Behavioral Health, Grants Management Office
www.dbh.grants@dc.gov

FROM: _____
Name of Organization

RE: Intent to Apply for District of Columbia Opioid Response (DCOR) Grant Opportunities

Please select all applicable competitions applied for:

- Competition 1: Faith-Based Prevention Yes No
- Competition 2: Pregnant/SUD Screening Yes No
- Competition 3: Pregnant/SUD Treatment Yes No
- Competition 4: Hospital Based Naloxone Training Yes No
- Competition 5: Comprehensive Case Management Yes No

Organization Address: _____
 Contact Person/Title: _____
 Contact Person Telephone Number: _____
 Contact Person Email: _____

This notification serves as intent to apply for the abovementioned Request for Application. The notification is due **Tuesday, January 26, 2021** to dbh.grants@dc.gov. Notifications are to be sent to this email address only and will not be received via telephone, fax, email (other than address noted) or in-person.

I am also confirming attendance at the mandatory pre-application conference being held January 29, 2021.

#Attendees: _____

Webinar: Yes No

Print Name

Date

Signature



Government of the District of Columbia
Department of Behavioral Health (DBH)

District of Columbia Opioid Response (DCOR) Grant Opportunities
RFA# RMO DOR012221

Please check the Competition applied for:

- Competition 1: Faith-Based Prevention Yes No
- Competition 2: Pregnant/SUD Screening Yes No
- Competition 3: Pregnant/SUD Treatment Yes No
- Competition 4: Hospital Based Naloxone Training Yes No
- Competition 5: Comprehensive Case Management Yes No

Applicant Profile

APPLICANT NAME: _____

TYPE OF ORGANIZATION: ___ Non-Profit Org. ___ Commercial (For-Profit) Org.

EIN/Federal Tax ID No.: _____

DUNS No.: _____

Primary Contact Person/Title: _____

Second Contact Person/Title: _____

Street Address: _____

City, State ZIP: _____

Telephone: _____

Fax: _____

Email: _____

Ward: _____

Organization Website: _____

Name of Authorized Representative
(Official Signatory): _____

Title: _____

Email Address: _____

Phone Number: _____

Signature of Authorized Representative

Please complete RFA Abstract on next page.

RFA Abstract (Required, Limit 200 words)

WORK PLAN

Objective(s)	Actions/Activities	Results	Person(s) Responsible	Duration	Fiscal Year XX											
					OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	
Goal 1: Directions: State clearly the goal your program/project will pursue to address the issues identified.																
Objective 1: <i>Directions: Provide key activity which will directly contribute to the project goal.</i>	<i>Directions: Name the key actions to be implemented to achieve this objective.</i>	<i>Directions: List the results you expect to achieve which directly contribute to the objective for the goal identified.</i>	<i>Directions: Indicate the staff member, group, or other person responsible for overseeing the activity.</i>	<i>Directions: Indicate the duration of the activity (for example, 2 weeks, 3 months, etc.). Next, put an 'X' in the corresponding month(s) this activity will occur.</i>												
Objective 2:																
Objective(s)	Actions/Activities	Results	Person(s) Responsible	Duration	Fiscal Year XX											
					OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	
Goal 2:																

STAFFING PLAN

Attachment E

The staffing plan provides a presentation and justification of all staff required to implement the project. The staffing plan needs to identify the total personnel who will be supported under grant funding and include resumes or curriculum vitae. Include the following elements in the staffing plan:

1. Position Title (e.g., Chief Executive Officer)
2. Staff Name (Note: If the individual has not been identified to occupy this position, please indicate "To Be Determined")
3. Education/Experience Qualifications
4. General Responsibilities
5. Annual Salary
6. Percentage of Full Time Equivalent (FTE) for staff involvement
7. Amount Requested (list the DBH grant funds requested for each position)

Position Title	Staff Name	Education / Experience Qualifications	Resume or CV Included	General Responsibilities	Annual Salary	Percent FTE	Amount Requested
<i>Example: Project Director</i>	<i>Janet Doe</i>	<i>PMP Certification, 2019</i>	<i>Yes</i>	<i>Overseeing all operations of the project.</i>	<i>\$64,890</i>	<i>10%</i>	<i>\$6,489</i>

BUDGET AND BUDGET NARRATIVE

A. PERSONNEL						
REQUEST - Personnel Narrative						
Position (1)	Name (2)	Key Staff (3)	Annual Salary/Rate (4)	Level of Effort (5)	Total Salary Charged to Award (6)	Requested Advance
(1) Project Director	Alice Doe	Yes	\$ 64,890	10%	\$ 6,489	\$ 1,200
(2) Program Coordinator	Vacant to be hired within 60 days of anticipated award date	No	\$ 46,276	100%	\$ 46,276	\$ 15,000
(3) Clinical Director	Jane Doe	No	In-kind cost	20%	\$ -	\$ -
					\$ 52,765	\$ 16,200

REQUEST - Justification for Personnel
1. The Project Director will provide oversight of the grant. This position is responsible for overseeing the implementation of the project activities, internal and external coordination, developing materials, and conducting meetings.
2. The Program Coordinator will coordinate project service and activities, including training, communication, and information dissemination.

B. FRINGE BENEFITS					
REQUEST - Fringe Benefits Narrative					
Position (1)	Name (2)	Rate (3)	Total Salary Charged to Award (4)	Total Fringe Charged to Award (5)	Requested Advance
Project Director	Alice Doe	29.65%	\$ 6,489	\$ 1,924	\$ 356
Program Coordinator	Vacant, to be hired within 60 days of anticipated award date.	29.65%	\$ 46,276	\$ 13,721	\$ 4,448
				\$ 15,645	\$ 4,804

REQUEST - Justification for Fringe Benefits
Fringe benefits are comprised of:

Fringe Category	Rate - %
Retirement	
FICA	
Insurance	
Social Security	
Total	0%

C. TRAVEL

REQUEST - Travel Narrative					
Position (1)	Destination (2)	Item (3)	Calculation (4)	Total Travel Charged to the Award (5)	Requested Advance
Mandatory Recipient Conference	Chicago, IL to Washington, DC	Airfare	\$200/flight x 2	\$ 400	\$ -
		Hotel	\$180/night x 2 persons x 2 nights	\$ 720	\$ -
		Per Diem (meals and incidentals)	\$46/day x 2 persons x 2 days	\$ 184	\$ -
Local Travel		Mileage	3,000 miles @ .38/mile	\$ 1,140	\$ -
				\$ 2,444	\$ -

FEDERAL REQUEST - Justification for Travel
1. Two staff (Project Director and Evaluator) to attend mandatory recipient meeting in Washington, DC.
2. Local travel is needed to attend local meetings, project activities, and training events. Local travel rate is based on organization's policies/procedures for privately owned vehicle reimbursement rate.

D. EQUIPMENT

REQUEST - Equipment Narrative					
Item (1)	Quantity (2)	Amount (3)	% Charge to the Award (4)	Total Cost Charged to the Award (5)	Requested Advance
					\$ -
					\$ -

					\$
				\$	\$

E. SUPPLIES

REQUEST - Supplies Narrative			
Item(s)	Rate	Cost	Requested Advance
General Office Supplies	\$50/mo. X 12 mo.	\$ 600	\$ 100
Postage	\$37/mo. X 8 mo.	\$ 296	\$ 74
Laptop Computer	1 x \$900	\$ 900	\$ -
Printer	1 x \$300	\$ 300	\$ -
Projector	1 x \$900	\$ 900	\$ -
Copies	8000 copies x .10/copy	\$ 800	\$ -
		\$ 3,796	\$ 174

Request - Justification for Supplies

- Office supplies, copies and postage are needed for general operation of the project.
- The laptop computer and printer are needed for both project work and presentations for Project Director.
- The projector is needed for presentations and workshops. All costs were based on retail values at the time the application was written.

F. CONTRACT

REQUEST - Contracts Narrative					
Name (1)	Service (2)	Rate (3)	Other	Cost (4)	Requested Advance
(1) State Department of Human Services	Training	\$250/individual x 3	5 days	\$750	\$ 750
(2) Treatment Services	1040 Clients	\$27/client per year		\$28,080	\$ 8,100
(3) John Smith (Case Manager)	Treatment Client Services	1FTE @ \$27,000 + Fringe Benefits of \$6,750 = \$33,750	*Travel at 3,126 @ .50 per mile = \$1,563 Training course \$175 *Supplies @ \$47.54 x 12 months or \$570	\$46,168	\$ 11,745

			*Telephone @ \$60 x 12 months = \$720 *Indirect costs = \$9,390 (negotiated with contractor)		
(4) Jane Smith	Evaluator	\$40 per hour x 225 hours	12-month period	\$9,000	\$ -
(5) To Be Announced	Marketing Coordinator	Annual salary of \$30,000 x 10% level of effort		\$3,000	\$ -
				\$86,998	\$ 20,595
*Represents separate/distinct requested funds by cost category					

Request - Justification for Contracts
1. Certified trainers are necessary to carry out the purpose of the statewide Consumer Network by providing recovery and wellness training, preparing consumer leaders statewide, and educating the public on mental health recovery.
2. Client treatment services to be provided are based on organizational history of expenses.
3. The Case Manager is vital to providing client services related to the program and leading to success outcomes.
4. The Evaluator is an experienced individual (Ph.D. level) with expertise in substance abuse research and evaluation, is knowledgeable about the population of focus, and will be responsible for all data collection and reporting.
5. The Marketing Coordinator will develop a plan for public education and outreach efforts to engage clients in the community about recipient activities; and provide presentations at public meetings and community events to stakeholders, community civic organizations, churches, agencies, family groups and schools.

G. CONSTRUCTION

Construction or major alternation and renovation are not authorized under this program.

H. OTHER

REQUEST - Narrative for Other			
Item	Rate	Cost	Requested Advance
(1) Rent *	\$15/sq. ft. x 700 sq. feet	\$10,500	\$ 3,000

(2) Telephone	\$100/mo. X 12 mo.	\$1,200	\$ 300
(3) Client Incentives	\$10/client follow-up x 278 clients	\$2,780	\$ 500
(4) Brochures	.89/brochure x 1500 brochures	\$1,335	\$ 512
		\$15,815	\$ 4,312

Request - Justification for Other
<p>1. Costs related to office space are typically included in the indirect cost rate agreement. However, if other rental costs for service site(s) are necessary for the project, they may be requested as a direct charge. The rent is calculated by square footage of FTE and reflects DBH's fair share of the space. *If rent is requested (direct or indirect), provide the name of the owner(s) of the space/facility. Additionally, the lease and floor plan (including common areas are required for all projects allocating rent costs.</p> <p>2. The monthly telephone costs reflect the percent of effort for the personnel listed in this application for the DBH project only.</p> <p>3. The \$10 incentive is needed to meet program goals to encourage attendance and follow-up with 278 clients.</p> <p>4. Brochures will be used at various community functions, such as health fairs and exhibits.</p>

I. INDIRECT COST RATE	
Indirect Cost Rate	
Calculation (1)	Indirect Cost Charged to the Award (2)
Organization's Indirect Cost Rate of 10% (10% of personnel & fringe - .10 x \$68,409)	\$6,841
	\$6,841

J. PROGRAM INCOME	
If the possibility of generating Program Income as a result of DBH funding exists, list source and amount as budget line items.	
SOURCE	AMOUNT

BUDGET SUMMARY (should include future years and projected total)					
Category	Yr. 1	Yr. 2	Yr. 3	Yr. 4	Yr. 5
Personnel	\$ 52,765	\$ -	\$ -	\$ -	\$ -
Fringe	\$ 15,645	\$ -	\$ -	\$ -	\$ -
Travel	\$ 2,444	\$ -	\$ -	\$ -	\$ -
Equipment	\$ -	\$ -	\$ -	\$ -	\$ -

Supplies	\$ 3,796	\$ -	\$ -	\$ -	\$ -
Contractual	\$ 86,998	\$ -	\$ -	\$ -	\$ -
Other	\$ 15,815	\$ -	\$ -	\$ -	\$ -
Total Direct Charges	\$ 177,463	\$ -	\$ -	\$ -	\$ -
Indirect Charges	\$ 6,841	\$ -	\$ -	\$ -	\$ -
Total Project Costs	\$ 184,304	\$ -	\$ -	\$ -	\$ -
REQUESTED ADVANCE	\$ 46,084.55				

Attachment G

Department of Behavioral Health ADVANCE PAYMENT REQUEST FORM

I. GRANTEE AND GRANT IDENTIFICATION		
Organization/Applicant Name:		
RFA No.:		
RFA Title:		
II. FUNDING AWARD & ADVANCE		
Total Award: \$	Advance Requested: \$ <small>(Amount allowed is the lesser of the first 30 days or 25% of the award)</small>	Percent of Total Award: ()%
<p>1. An applicant responding to a RFA shall identify in the application the need for an advance payment and acknowledge that, if selected, provide the information requested as part of the advance payment request.</p> <p>2. The advanced funds shall be spent by the awarded grantee within the same DC Government fiscal year during which the advance is made.</p> <p>3. Only one advance payment can be made per grant each fiscal year. If the awarded requests a second advance for a subsequent fiscal year, each advance shall be reviewed for approval.</p> <p>4. The use of an advance payment shall be consistent with all terms and conditions of the grant.</p>		
III. ADVANCE PAYMENT SPENDING PLAN/TIMELINE NARRATIVE If attached separately, it must be signed by the representatives identified in section V of this form.		
IV. TERMS AND CONDITIONS		
The applicant must submit a statement of need for the specified amount of advance payment (please attach and sign).		
The applicant must submit documentation of the use of advanced funds (invoices, receipts, payroll documentation, etc.) to the DBH grant project director and/or fiscal monitor before the end of the grant performance period, or sooner, if explicitly requested by the DBH grant project director. The approved awardee must use the advanced funds in accordance with all the terms and conditions of the grant award.		
Identify the type of documentation that will be submitted to verify the use of the advance funds, as required by the RFA:		
<input type="checkbox"/> Receipts <input type="checkbox"/> Paid invoices <input type="checkbox"/> General ledger accounts <input type="checkbox"/> Cancelled checks <input type="checkbox"/> Other _____		
The DBH grant project director will withhold the final reimbursement payment equal to the amount advanced or up to 25% of the grant award (whichever is higher) until documentation supporting use of the advance payment is received from the grantee.		
V. SIGNATURES OF AUTHORITY		
I certify that I am the <u>Executive Director</u> of the applicant organization and am authorized to submit this Advance Payment Request on behalf of the applicant.		
Signature:	Date:	
Print Name:	Title:	
I certify that I am the <u>Chairperson of the Board of Directors</u> of the applicant organization and am authorized to submit this Advance Payment Request on behalf of the applicant.		
Signature:	Date:	
Print Name:	Title:	
VI. THIS SECTION IS FOR DBH APPROVAL ONLY		
Notification of need for the advance payment was included in the original application <input type="checkbox"/> Yes <input type="checkbox"/> No		
Approved Advanced Amount: \$		
Project Director Approval Signature:	Print Name:	Date:
Chief Operating Officer Approval Signature:	Print Name:	Date:
Initial the checkbox below to acknowledge advanced payment approval.		
<input type="checkbox"/> Grants Management Division	Print Name:	Date:
<input type="checkbox"/> Administrative Services Manager	Print Name:	Date:
<input type="checkbox"/> Office of the Chief Financial Officer	Print Name:	Date:



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This Document

This document outlines standard terms and conditions for any award issued by the District of Columbia Department of Behavioral Health (“DBH”) as a grant, sub-grant or sub-award whose fund source and authorization requires the Grantor (DBH) and the Recipient to be in compliance with local and federal terms of Agreement and statutes for issuing and administering a sub-award. The terms and conditions apply to both competitive and non-competitive awards in new or continuation status. Administrative units within DBH may apply additional terms and conditions of award based on the requirements of the funding, funding authorization or regulations required by federal or local statute for specific programs or types of services. **Any reference herein to “this Agreement” or “the Agreement” applies to a fully executed Notice of Grant Award (NOGA) and Grant Agreement issued by DBH to a Grantee organization. The NOGA is the official, legally binding document, signed by the Director/designee of DBH.** It notifies the grant recipient of the award of a grant; contains or references all the terms and conditions of the grant and funding (federal/local) limits and obligations; and provides the documentary basis for recording the financial and programmatic obligations.

The grant award for is subject to and must comply with applicable general terms and conditions outlined below, and in Attachment 1 - General Terms and Conditions (GT&C). These terms and conditions are in addition to any terms, conditions, or restrictions in the NOGA.

Each entity applying for the grant (Applicant) advertised in the Request for Applications (RFA), the successful Applicant (Grantee), and a sub-recipient of funds under the grant provided in response to applications under the RFA (the Grant), is subject to and must comply with applicable general terms and conditions outlined below, and in Appendix A - General Terms and Conditions (GT&C). These terms and conditions are in addition to any the terms, conditions, or restrictions in the NOGA.

Order of Precedence

In the event of inconsistency among the provisions of the grant, the inconsistency shall be resolved by giving precedence in the following manner:

1. 2 CFR 200, *Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards*;
2. 45 CFR 75, *Uniform Administrative Requirements, Cost Principles and Audit Requirements for HHS Awards*;
3. District of Columbia Budget Support Act for the most current fiscal year;
4. Department of Behavioral Health Establishment Act (D.C. Code §§ 7-1141.01, *et seq.*);
5. Title 22-A, D.C. Municipal Regulations, Chapter 44, *Mental Health Grants*;
6. District of Columbia City-Wide Grants Manual;
7. Substance Abuse Mental Health Services Administration (SAMHSA) Award Standard Terms (for SAMHSA-funded grants);
8. United States Department of Health and Human Services Grants Policy Statement;
9. DBH Grant Terms and Conditions Appendices and Attachments;
10. The Grantee’s budget and any amendment approved by DBH;
11. District of Columbia Grant Administration Act of 2015; and
12. Grantee submissions that present as appendices and attachments to the application or award as follows:
 - a) Approved Work Plan;

- b) Approved Budget and Narrative Justifications, including standard DBH forms for budgets, cost allocation, source of fund/use match;
- c) Staffing Plan;
- d) Fund Disbursement Plan and Schedule;
- e) Reporting Requirements and
- f) Special Program Provisions.

Documents Incorporated by Reference

The following documents are hereby incorporated by reference and made part of the DBH Grant Terms and Conditions:

1. The Notice of Grant Award (NOGA) and all subsequent amendments and addenda issued by the authorizing entity;
2. All submissions, including all standard forms, assurances and certifications, and other supporting documents contained in the application;
3. The Grantee's work plan and any amendments approved by DBH;
4. The Grantee's budget and any amendments approved by DBH;
5. 2 CFR 200 *Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards*;
6. 45 CFR 75, *Uniform Administrative Requirements, Cost Principles and Audit Requirements for HHS Awards*;
7. District of Columbia Grant Administration Act of 2015;
8. Mayor's Order 2017-313, *Sexual Harassment Policy, Guidance and Procedures*
9. The District of Columbia City-Wide Grants Manual and Sourcebook;
10. Substance Abuse Mental Health Services Administration (SAMHSA) Award Standard Terms (for SAMHSA-funded grants);
11. United States Department of Health and Human Services Grants Policy Statement; and
12. Grantee submissions that present as appendices or attachments to the application or award as follows:
 - a. Scope of Work, including a schedule of deliverables, narrative descriptions of services and targets;
 - b. Approved Work Plans, Performance Plan, Quality Management/Quality Improvement Plans;
 - c. Approved Budget Tables and Narrative Justifications, including standard DBH forms for Budget, Cost Allocation, Source of Fund/Use and Match;
 - d. Staffing Plan;
 - e. Fund disbursement plans and schedules;
 - f. Reporting schedules; and
 - g. Special program provisions.

Award Authorization

1. The Grantee shall not start any activity, expend funds, or request reimbursement for expenditures unless there is a fully executed Agreement and purchase order issued by DBH to the Grantee.
2. The start and end dates for the award shall be the project period indicated on the fully executed NOGA, unless amended by the Department of Behavioral Health. The project period is the total time DBH has programmatically approved a project (federal/local) for support.
3. The budget period is usually 12 months long. However shorter or longer budget periods may be established for programmatic or administrative reasons. The budget period will be indicated on the NOGA and will show the total approved budget for the applicable budget period.
4. The Grantee shall provide services and conduct activities for the purpose established by the terms of the Agreement and the authorizing fund source, which is located on the NOGA and purchase order assigned to the award.
5. DBH shall issue a NOGA for each budget period, subject to satisfactory performance of the Grantee, Grantee eligibility and the availability of funding.
6. The project period, budget period and allocations of funding in each period shall be outlined in the NOGA. The fund source (e.g., federal or local funds administered by DBH) will also be stated in the NOGA. The total obligation by DBH under the grant shall not exceed the amount stated as maximum amount for the planned project period. The total award amount shall be apportioned by budget period outlined on the NOGA. The Grantee shall not exceed the amount of the total award that is apportioned to the budget period. The Grantee's spending plan must reflect the funding obligations and approved apportionments for the budget period, unless Grantee submits a written request for a deviation from the spending plan and such request has received approval from the assigned Project Director/delegate. Option years beyond the planned project period shall be considered for this award based only on the availability of source funding, additional funding and the satisfactory performance of the Grantee.
7. The Grantee shall submit an overall budget, including a detailed line item budget for each service area and shall operate programs in accordance with the budget approved by the project director/delegate prior to the issuance of a NOGA.
8. The Grant Agreement shall be subject to the availability of funding and an appropriation for the program or grant funding that is the subject of the grant. The Grant Agreement shall be subject to termination at any time, in whole or in part, if: (1) adequate funds are not made available to DBH or appropriated by DBH for the program in question; or (2) for the convenience of the government should DBH determine that such termination is in the best interest of the public or the government.
9. The Grantee must be eligible for funding at the time the award is issued and maintain eligibility as established by the terms of this Agreement, the Request for Applications and statutory and/or regulatory requirements (local and/or federal).
10. The Grantee must supplement, not replace, deliberately reduce or reallocate (supplant) non-grant funds due to the existence of funding available for this award. Grantees must ensure that funds do not supplant resources that have been budgeted for the same purpose through other sources. Applicants or award recipients may be required to demonstrate and document that a reduction in resources for programs occurred for reasons other than the receipt of grant funds.
11. The Grantee shall establish a system of accounting that ensures that funds awarded under the NOGA are not commingled with other funding sources (i.e., same funding source as

another NOGA, similar service area). Where the Grantee's accounting system cannot comply with this requirement, the Grantee shall establish a system to provide adequate funding accountability for the program.

12. The Grantee shall establish a system of accounting that tracks program income generated through the grant award. All Grantees that generate program income must comply with 45 CFR §§ 216, 307 (as applicable) and report any program income to DBH on all invoices submitted.

Substance Abuse and Mental Health Services Administration (SAMHSA) Grant Award Standard Terms and the United States Department of Health and Human Services (HHS) Grants Policy Statement

Grantees awarded sub-grants funded in whole or part by SAMHSA must comply with the SAMHSA Award Standard Terms for the current fiscal year (<https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions>). Further, Grantees awarded sub-grants funded in whole or part by SAMHSA are subject to the requirements of the HHS Grants Policy Statement that are applicable based on the recipient type and purpose of award (<https://www.samhsa.gov/grants/grants-management/policies-regulations/hhs-grants-policy-statement>). To the extent these conflict with the DBH Grant Terms and Conditions, the SAMHSA Award Standard Terms and the HHS Grants Policy Statement control.

Communications with DBH

1. Communications shall be directed to DBH offices or DBH staff as the Grant requires.
2. Reports and other submissions shall be directed to the Project Director.
3. The Grantee shall maintain electronic mail ("e-mail") capabilities for communication with DBH. Each Grantee shall provide a valid e-mail address and consent to receive official correspondence at the e-mail address.
4. A notice shall be deemed timely delivered to DBH only when written confirmation of receipt is provided by DBH.

Communication of a Material Change

The Applicant and the Grantee shall advise DBH immediately orally and thereafter in writing when a material condition of the Application or performance of the grant has changed. Examples of material changes in condition may include, but are not limited to, the following:

1. The loss of a staff member proposed as a principal;
2. The lack of funds to pay bills incurred for the grant's activities;
3. The expenditure of granted funds for non-granted activities, materials, or supplies;
4. Change in the Applicant's governance;
5. The Grantee's insurance coverage has been reduced; or
6. The Grantee has been notified of a cancellation in whole or in part of its insurance.

Compliance as a Continuing Condition of Eligibility

The Applicant must continue to comply with these terms of eligibility as noted in the NOGA during the project period if awarded a grant. If as the Grantee, the Applicant fails to comply with the terms and conditions of this award, DBH may suspend, terminate, take other corrective action

(including, but not limited to, recovery of funds provided under the Grant), or initiate dispute resolution.

Grant Award Contingent on Available Funding

The grant award and DBH's distribution of funds pursuant to the grant award are subject to the availability of funding from the sources identified in the NOGA for the particular grant opportunity or project.

DBH's ability to provide funds is, and shall remain subject to, the provisions of:

1. The Federal Anti-Deficiency Act, 31 U.S.C. §§ 1341, 1342, 1349, 1351;
2. The District Anti-Deficiency Act, D.C. Official Code § 47-355.01-355.08; and
3. Any amendments to these statutes.

This grant shall be subject to termination at any time, in whole or in part, if adequate funds are not made available or appropriated for the program in question.

Grant Match: Projection and Documentation

When documentation of a grant match is required:

1. In support of an application, the applicant must provide a line item budget and budget narrative including the match for the proposed project; and
2. In support of an award, the Grantee must provide the following, which must be acceptable to DBH, unless DBH revises or waives the requirement in writing:
 - a. Documentation of in-kind match, including, for example, services of an employee. These services must be valued at the employee's regular rate of pay plus an amount of fringe benefits that is reasonable, necessary, allocable, and otherwise allowable. The value of donated space must not exceed the fair rental value of comparable space as established by an independent appraisal of comparable space and facilities in a privately owned building in the same locality.

Bonding Requirements

A bond is not required of the Grantee unless DBH states the requirement in writing. If DBH does require a bond, the Grantee before accepting the grant must secure the bond in an amount no less than the total amount of the funds awarded, against losses of money and other property:

1. Caused by fraudulent or dishonest act, and
2. Committed by an employee, board member, officer, partner, shareholder, or trainee.

Payment

1. The Grantee will be compensated for work performed and expenses incurred of a sum not to exceed the total amount contained in the NOGA or any official revision to it.
2. DBH will not reimburse the Grantee for grant-related expenditures made before the begin date.
3. The Grantee may submit its invoices for grant-related reimbursement according to the fund disbursement schedule as stated in the NOGA. Invoices must be sent through the appropriate portal as stated in the NOGA and the related District "Purchase Order."
4. The Grantee's accounting practices must be consistent with 45 CFR Subpart E, Cost Principles and support the accrual of cost as required by the cost principles and must provide for adequate documentation to support cost charged to the grant award.
5. The Grantee's payment request must include a signed invoice on organization letterhead with federal tax identification number and supporting documentation. The submittal to DBH must include:
 - a. For employee labor: For the relevant billing period, a payroll report, with information drawn from an official book of record, like a payroll register, official time sheet or time card(s) approved by appropriate Grantee representative.
 - b. For other expenditures: Expenditures must be supported by invoices or receipts.
6. The Grantee must keep backup documentation, to show:
 - a. For Grantee AND any Grantee or sub-grantee:
 - i. For labor: the official books and records information showing employee name, title, hours worked that are charged to the grant, and pay rate for the period (typically like a payroll register, official time sheet or time card(s)); and,
 - ii. For non-labor: invoices and receipts that identify or describe the invoiced item, showing quantity, rate or price, and for procured items including contractor and sub-grantee invoices, proof of payment.
7. In most circumstances, DBH will require documents supporting an accounting entry before releasing payment. Such information may include:
 - a. General ledger screen shots or excerpts, showing paid bills or expenditures;
 - b. Copies of cancelled checks or bank statements of electronic transfers;
 - c. Statements from contractor, subcontractor and vendors that their bills have been paid; or
 - d. Reports of on-site inspections or audits.
8. In certain circumstances, and at DBH's sole discretion according to its policy, DBH may provide a portion of grant funds for the Grantee's start-up costs as an advance payment.
9. Notwithstanding the above, DBH at its sole discretion may withhold payment if DBH determines that the Grantees failed to comply with term[s] of the grant award.

Fund Disbursement

1. DBH reserves the right to withhold any payment if the Grantee is found in non-compliance with the DBH Notice of Grant Award or the Grant Agreement, and fails to correct any deficiencies within a reasonable time frame as determined by DBH. DBH shall determine the extent of the payment to be withheld under this provision.
2. Deposit and Security of Funds - The Grantee shall account for and reimburse the District Government any interest earned on advance grant award payments no later than twenty (20) business days from the end of each DC Government Fiscal Year (September 30) and no later than thirty (30) business days after the expiration of the Grant Agreement. All payments

shall be made by check or money order made payable to the “D.C. Treasurer” and mailed to Office of Finance & Treasury, 1101 4th Street, SW, Suite 850W, Washington, DC 20024.

3. The Grantee shall submit expenditure reports and requests for payment in accordance with the terms and options outlined in the Fund Disbursement Schedule and Terms.

Unethical Conduct

1. The Applicant/Grantee shall avoid all unethical conduct with respect to securing and administering granted funds, with ethical conduct to be measured generally, but not wholly, against the provisions of the District Ethics Manual (most recent edition as of the time the grant is awarded), found at www.bega.dc.gov, under the heading for documents.
2. Though not an exhaustive list, the Grantee shall avoid the following:
 - a. Apparent and actual conflicts of interest;
 - b. Contributing to a violation of the District’s restrictions on gifts to District personnel;
 - c. Contributing to a violation of the two-year ban on District personnel taking certain actions regarding a “particular matter” described in the District Ethics Manual;
 - d. No Applicant/Grantee shall employ or retain a person or selling agency to solicit or secure this grant, a payment under it, or an amendment, upon an agreement or understanding for a commission, percentage, brokerage, or contingent fee. Except, an applicant or grantee may condition its compensation for a bona fide employee on grant-related job performance, and may retain an attorney for compensation permitted by the District’s Rules of Professional Conduct; and
 - e. With respect to grant funds, the Grantee and Grantee’s employees, officers, or agents shall not solicit or accept a gift, gratuity, favor, or anything of monetary value from a contractor, subcontractor, vendor, party to a related agreement, or a beneficiary of this grant except as may be allowed under the District Ethics Manual for items that are unsolicited and of nominal value.

Contracts, Subcontracts, or Sub-Grants

1. **Nothing in the Grant award shall be construed to create a contractual relationship between DBH and Grantee’s contractor, subcontractor, sub-grantee, or vendor.**
2. Any grant-related work and/or activity that is contracted, subcontracted, or sub-granted is subject to applicable District and federal law and DBH review and approval. The Grantee shall give DBH advance notice of contracts, subcontracts, and sub-grants sufficient to allow DBH to determine whether its approval is needed, and if so, whether approval must come before Grantee’s execution of the contract or sub-grant.
3. The Grantee’s contract or sub-grant shall specify that the contractor or sub-grantee, and its contractors, subcontractors, or sub-grantees, shall be subject to the conditions and prohibitions of the Grant Award.
4. Warranties for labor and materials shall be obtained for purchases of materials and labor having an aggregate value of over \$5,000. These warranties shall be valid for at least two (2) years. DBH may waive this requirement in writing for demonstration of good cause or research grants.
5. If the Grantee, its contractors, subcontractors, or sub-grantees disturbs work guaranteed under another District contract or grant, the Grantee shall be responsible to restore the disturbed work to a condition comparable to its original condition and warranty such restored work, or alternatively pay the District for the damage.
6. No grantee shall use grant funds to procure services or materials from a vendor, contractor, or subcontractor that is suspended or debarred by the District or the federal government as may

be found here: <https://ocp.dc.gov/page/excluded-parties-list> (DC), and here: <https://www.sam.gov/SAM/> (Federal).

Establishing and Managing Sub-Awards

If the Grant authorizes or provides for sub-awards, as a pass-through entity, the Grantee must:

1. Be responsible for selecting sub-awardees and as appropriate conducting sub-award competitions. When using DBH or federal pass-through funds, the Grantee will establish a fair, open, transparent competitive process for the awarding of funds either through a contract, cooperative Agreement or grant instruments. A competition is a process that provides for the following:
 - a. Notice of Funding has been publicized;
 - b. Applications are easily available to all prospective applicants;
 - c. Applications are reviewed in an objective manner against an established public scoring criteria; and
 - d. Reviewers have no conflict of interest with any of the submitting applicant organizations.
2. Funds disbursed in a non-competitive manner may be disallowed and appropriate grant management sanctions issued.
3. The Grantee will submit for approval any Requests for Proposal or Requests for Applications before released.
4. The Grantee will submit for approval the unsolicited grant submission process before it is announced.
5. The Grantee shall ensure that all sub-award agreements are in writing, meet all legal and regulatory requirements and address all of the elements for sub-award agreements identified in the NOGA.
6. The Grantee shall establish and follow a system for monitoring sub-awardee performance that includes elements required by the grant award, the SAMHSA grant award (if applicable) and this Appendix, and report the results of the monitoring in performance reports required by this document and/or the grant award.
7. The Grantee shall establish and maintain an accounting system that ensures compliance with the maximum funding limitation established in the grant award, the SAMHSA grant award (if applicable) and with the requirements for payment of costs under the grant. This includes establishment of written procedures for determining that sub-award costs are allowable under the terms and conditions of the grant award and this Appendix, and may provide for determinations on a pre-award basis, through ongoing monitoring of costs that sub-grantees incur, or a combination of both approaches, provided the Grantee documents its determinations.

Modifications of the Grant, including Extensions and Increases

The terms and conditions of the grant may be modified only upon DBH's prior written approval. The modification shall take the form of an amendment to the NOGA.

1. Through an amendment, DBH may, *inter alia*, increase or reduce the grant amount and/or extend or reduce the project period.
2. If DBH notifies the Grantee that a funding increase or an extension of the project period is available, the Grantee must apply for the increase or extension in writing according to the terms of the DBH notification.
3. All grantees must apply for no-cost extensions sixty (60) calendar days in advance of the grant's then-current end date. The application must justify the amendment, and include a description of proposed changes to scope, performance schedule, description of proposed outcomes, and budget.

Staffing Plan, Work Plan, Budgets and Organizational/Personnel Requirements

Upon signing the Grant Agreement, the Grantee shall have and maintain on file with DBH an approved staffing plan, work plan and budget. The Grantee must implement the funded program in accordance with requirements outlined in approved staffing plan, budgets and work plans. Any revision or alteration of these plans must have prior approval by the Project Director or his/her designee. Further:

1. The Grantee shall maintain a current organizational chart, which displays organizational relationships and demonstrates who has responsibility for administrative oversight and supervision over each priority service activity.
2. The Grantee shall ensure that adequate, competent and trained personnel are provided to oversee the implementation of the activities supported by the grant.
3. The Grantee shall ensure that personnel records, background checks (if applicable under the governing statutes or regulations), job descriptions, application for employment, licensing or certification criteria, descriptions of duties, hours of work, salary range and performance evaluation criteria are maintained in individual personnel records for staff assigned to the funded project.
4. The Grantee must maintain record of personnel actions, including time records, documentation of all training received, notation of any allegations of professional or other misconduct including a detailed description of the allegations, and if terminated, the date and reason for the termination from employment. All these personnel materials shall be made available to the Project Director upon request.
5. The Grantee shall provide orientation session for staff members that addresses the Health Information Portability and Accountability Act (HIPAA), the D.C. Mental Health Information Act (D.C. Code § 7-1201.01 *et seq.*), 42 CFR Part 2 (if applicable), administrative procedures, program goals, cultural sensitivity, language access, conflict of interest, workplace sexual harassment policies and procedures to be adhered to under the terms of the grant Agreement.
6. The Grantee must notify the Project Director if there is a change in staffing or operations management of the organization that impacts the project funded under the Agreement.
7. The Grantee shall seek approval of any changes in staffing plans or job descriptions for staff assigned to the grant.

Profit and Program Income Requirements for Commercial Organization Grantees

All commercial organizations awarded DBH sub-grants funded in whole or part by the United States Department of Health and Human Services (HHS) shall comply with 45 CFR § 75.216 and any other applicable federal or District law or regulation governing profit and program income. Specifically, with the exceptions of grant awards made under the Small Business Innovation Research (SBIR) and Small Business Technology Transfer (STTR) programs, no HHS funds may be paid as profit to any for[-profit] commercial organization even if the grantee is a commercial organization. Profit is any amount in excess of allowable direct and indirect costs.

Except for grants for research, program income earned by a commercial organization may not be used to further eligible project or program objectives except in the SBIR or STTR programs.

Commercial organizations that receive awards (including for-profit hospitals) have two options regarding audits:

- (a) A financial related audit of a particular award in accordance with Generally Accepted Government Auditing Standards issued by the Comptroller General of the United States, in those cases where the commercial organization receives awards under only one HHS program; or if awards are received under multiple HHS programs, a financial audit of all awards in accordance with Generally Accepted Government Auditing Standards issues by the Comptroller General of the United States; or
- (b) An audit that meets the requirements of 45 CFR Subpart F.

Commercial organizations that receive annual awards totaling less than the audit requirements of 45 CFR Subpart F are exempt from the audit requirements for that year. However, records must be available for review by appropriate officials of federal agencies or the Government Accountability Office.

Profit and Program Income Requirements for Non-Federal Entities

Pursuant to 45 CFR §§ 75.2, 75.307, a non-federal entity (a state, Local government, Indian tribe, institution of higher education (IHE) or nonprofit organization that carries out a federal reward as a recipient or a sub-recipient) is encouraged to earn income to defray program costs where appropriate. All non-federal entities in receipt of sub-grants funded in whole or part by HHS must adhere to the requirements of 45 CFR §§ 75.307, 75.407 concerning program income.

Indirect Cost

Facilities and Administration Classification. For major IHEs and major nonprofit organizations, indirect (F&A) costs must be classified within two broad categories: “Facilities” and “Administration.” “Facilities” is defined as depreciation on buildings, equipment and capital improvement, interest on debt associated with certain buildings, equipment and capital improvements, and operations and maintenance expenses. “Administration” is defined as general administration and general expenses such as the director’s office, accounting, personnel and all other types of expenditures not listed specifically under one of the subcategories of “Facilities” (including cross allocations from other pools, where applicable).

Identification with a Federal award rather than the nature of the goods and services involved is the determining factor in distinguishing direct from indirect (F&A) costs of Federal awards.

However, typical examples of indirect (F&A) cost for many nonprofit organizations may include depreciation on buildings and equipment, the costs of operating and maintaining facilities, and general administration and general expenses, such as the salaries and expenses of executive officers, personnel administration, and accounting.

Any non-Federal entity that has never received a negotiated indirect cost rate, may elect to charge a de minimis rate of 10% of modified total direct costs (MTDC) which may be used indefinitely. As described in 45 CFR§ 75.403, costs must be consistently charged as either indirect or direct costs, but may not be double charged or inconsistently charged as both. 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, which the non-Federal entity may apply to do at any time.

Any non-Federal entity that has a current federally negotiated indirect cost rate may apply for a one-time extension of the rates in that agreement for a period of up to four years. This extension will be subject to the review and approval of the cognizant agency for indirect costs. If an extension is granted the non-Federal entity may not request a rate review until the extension period ends. At the end of the 4-year extension, the non-Federal entity must re-apply to negotiate a rate. Subsequent one-time extensions (up to four years) are permitted if a renegotiation is completed between each extension request.

Client Records (if there are no client services provided, this term is not applicable)

1. The Grantee shall establish and maintain a protocol for maintaining and storing client records that is compliant with the HIPAA security and privacy rules, the Mental Health Information Act (D.C. Code § 7-1201.01 *et seq.*) and 42 CFR Part 2 (as applicable). This protocol shall be available to the project director on request.
2. The Grantee shall provide the Project Director, and other authorized representatives of the DBH access to program evaluators, quality assurance specialists, data management analysts and clinical records as may be necessary for monitoring purposes.
3. The Grantee shall retain all records for at least three (3) years following closeout of the grant.
4. The Grantee will ensure that information in client files is current. Client files will be considered inactive if not updated within a 6-month period.
5. DBH reserves the right to remove client records from the Grantee's location or property to review and /or copy records.

Facilities Controlled By the Grantee

1. The Grantee's facilities used during the performance of this agreement shall meet all applicable federal, state, and local regulations for their intended use throughout the duration of this agreement. The Grantee shall maintain current all required permits and licenses for the facilities. The Grantee's failure to do so shall constitute a failure to perform the agreement and shall be a basis for termination of the agreement for default.
2. The Grantee shall identify an emergency site facility to finish the grant activities in the event that the primary facility becomes unavailable for use due to a catastrophic event.
3. Each facility controlled by the Grantee that is used for activities under the grant shall be accessible to mobility-limited persons consistent with the Rehabilitation Act of 1973 as amended, 29 U.S.C. §§ 701 *et seq.*, and the Americans with Disabilities Act, 42 U.S.C. §§ 12101 *et seq.*

4. All supplies and services routinely needed for maintenance and operation of the facility, including but not limited to, security, janitorial services, and trash pick-up, shall be provided by the Grantee.

Entry onto a Project Site and to Records

The Grantee shall provide DBH and its designee with access to books and records for the funded project. The Grantee also shall secure from the relevant property owners permission in writing for DBH and its designee to access a project site(s) at reasonable times to inspect the work performed by the Grantee, its contractor, subcontractor, sub-grantee, or vendor. The Grantee shall obtain the written consent in advance of performing the work.

Grant Purchases, including Equipment, exceeding \$5,000 per unit, if applicable

1. The Grantee shall not purchase with grant funds equipment or supplies exceeding \$5,000 per unit cost ("Big Grant Purchase") without DBH's prior written agreement.
2. For each Big Grant Purchase, the Grantee shall give advance written notice to DBH to allow DBH to approve or disallow the purchase.
3. Identification of a Big Grant Purchase in DBH-approved proposal constitutes approval of the Big Grant Purchase. If a Big Grant Purchase is not identified in a DBH-approved proposal, advance notice shall be given four (4) weeks in advance of the commitment to purchase. DBH may waive this time period in writing for good cause.
4. Within sixty (60) calendar days of execution of the award, the Grantee must provide the Project Director with an inventory of all equipment and supplies with a purchase price not exceeding \$5,000 (per item) purchased with grant funds.
5. For all Big Grant Purchases, the Grantee shall maintain an inventory record ("Big Grant Purchase Inventory") showing:
 - a. Purchase price;
 - b. Grant number;
 - c. Name of item;
 - d. Manufacturer's name;
 - e. Serial number (if applicable);
 - f. Acquisition history (purchase order, invoice, packing slip);
 - g. Guarantee or warranty lapse date;
 - h. Storage location;
 - i. Unit price; and
 - j. Additional costs, if any, for transportation, installation, and taxes, each as a separate item.
6. The Big Grant Purchase Inventory shall be updated annually, or at the expiration of the budget period, whichever occurs first.
7. All equipment and products purchased above \$5,000 with grant funds should be American-made when possible.
8. DBH may inspect and reclaim all or part of the inventoried equipment within 12 weeks after the expiration of the grant.

Major and Unusual Incident (MUI/UI) Reporting

The Grantee shall adhere to the DBH Policy 480.1A, Reporting a Major Unusual Incident and an Unusual Incident, and any succeeding policy, for reporting major unusual incidents and unusual incidents to DBH. Specifically, the Grantee shall report by telephone or email each unusual incident

or major unusual incident involving or affecting the Grantee's performance of the Grant award to the person identified as the Project Director within twenty-four (24) hours of the incident or learning of the incident. The initial report may be oral or by e-mail. The Grantee shall also communicate a full description of the unusual incident or major unusual incident in writing within five calendar (5) days after the initial report pursuant to the requirements of DBH Policy 480.1A. The Grantee shall not send any communication to DBH regarding an unusual incident or major unusual incident by fax.

An unusual incident is an event that is significantly different from the regular routine or established procedure that does not rise to the level of a major unusual incident (MUI). Examples include, but are not limited to, an injury, a traffic accident, a theft, of the firing or resignation of a principal staff member or contractor identified in the Application.

A major unusual incident (MUI) is an adverse event that can compromise the health, safety or welfare of persons; employee misconduct; fraud; and actions that are volatile of law or policy. Examples include, but are not limited to: unusual injury or death; unexplained absence of a client from a residence or program; physical, sexual, or verbal abuse of a client by staff or other clients; fire, theft, destruction of property, or sudden serious problems in the physical plant; complaints from families or visitors of clients; requests for information from the press, attorneys, or government officials outside of DBH; client behavior(s) requiring attention of staff not usually involved in their care; and/or any other unusual events that may require Project Director intervention.

Termination

The Grant, and the offer of the Grant, shall be subject to termination by DBH:

1. At any time, in whole or in part, for the convenience of the Government should DBH determine that such termination is in the best interest of the public or the Government;
2. Immediately for:
 - a. Lack of funding;
 - b. Failure of Grantee to follow District or applicable federal law, including statutes, rules, and regulations;
 - c. Failure of the Grantee to carry out DBH's ordered grant corrective action plan;
 - d. An ethics violation involving the grant, pursuant to ethical standards in the most recent version of the Districts Ethics Manual, published by the District's Board of Ethics and Accountability (bega.dc.gov), as of the date that the Grant Award Notice was sent, or violation of any ethics law or regulation; or
 - e. Fraud, waste or abuse by the Grantee.

Termination for Force Majeure or Cause

1. For *force majeure* DBH may terminate the grant and Grantee may seek certain reimbursement, as described in this section.
2. For cause DBH may terminate the grant, but the Grantee may not receive the reimbursement allowed for termination on the basis of *force majeure*.
3. Cause and *force majeure* defined:
 - a. Cause is a basis for DBH's termination of the grant, when DBH determines that the Grantee has:
 - i. Failed to achieved the intended outputs within the time frame that has been approved;
 - ii. Performed incompetently; or
 - iii. Performed recklessly.
 - b. *Force majeure* is a condition or occurrence which provides a valid excuse for failure to perform within the time frame of the grant, an unexpected and disruptive event which DBH determines could not have reasonably been anticipated or controlled, and includes:
 - i. Timely applying for a government permit or approval but not timely receiving same from the government agency;
 - ii. A change in applicable law;
 - iii. An unforeseen weather event;
 - iv. Organized labor strike or slowdown; and
 - v. Refusal of a necessary third party to approve, agree or participate following the Grantee's reasonable attempts to secure the same.
4. The Grantee may not invoke *force majeure* as an excuse for poor planning, failure to accommodate foreseeable delays by suppliers, or the Grantee's failure to manage its own resources.
5. For *force majeure*, the Grantee may seek reimbursement for otherwise-reimbursable expenditures incurred up to the date of termination, as well as reasonable costs incurred for demobilization.

Transition Plan for Continuity of Services

It is essential that continuity of services be maintained under this grant for the residents of the District of Columbia and applicable jurisdictions. Therefore, if the awarded grant expires or is terminated:

1. The Grantee shall cooperate with both the Project Director, and any successor Grantee to enable an efficient transition from one Grantee to another.
2. If the Grantee should cease services for any reason, the Grantee is required to develop a transition plan to ensure the appropriate referral of clients to other providers. A transitional plan must be developed and available for review by DBH within ten (10) business days upon determination that services will cease. Failure to provide this contingency plan will be deemed as non-compliance and could result in the termination of this grant, or other appropriate action.
3. DBH reserves the right to assume responsibility for services supported by the grant.
4. An acceptable transition plan will include, but not be limited to, the following:
 - a. Identify providers and/or resources to ensure continued care for clients who receive services funded by this grant. These resources will be programs that are DBH and/or Medicaid approved;
 - b. Develop a contingency plan with entities specifically stating what services will be provided;

- c. Develop procedure for transfer to include:
 - i. Notification to the client;
 - ii. Name, address, and phone number of the receiving provider organization to which the client is being transferred;
 - iii. Date the transfer will be effective;
 - iv. Case summary reports to receiving provider organization;
 - v. Method to ensure that clients who take medications have a sufficient supply to sustain them through the transfer period; and
 - vi. Transfer of client files in accordance with Federal and District of Columbia laws and regulations, including but not limited to Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Mental Health Information Act (D.C. Code § 7-1201.01 *et seq.*).

Unspent Funds

Funds provided under this Grant, but not spent to fulfill the terms of the Grant, shall be returned immediately to DBH either upon completion or termination of the Grant, or at the end of the Term of the Grant.

Accounting and Audits

1. The Grantee shall maintain an accounting system which conforms to generally-accepted accounting principles permitting an audit of all income and expenditures received or disbursed by the Grantee in the provision of services under the grant. Accounting records shall be supported by source documentation such as canceled checks, paid bills and payrolls.
2. The Grantee shall make provisions upon request, for inspection of financial records, including audited financial statements and tax returns, by DBH and/or its representative(s).
3. The Grantee shall assist, and shall require that its contractors, subcontractors, and sub-grantees assist, upon request, in the inspection and provision of financial records relevant to the Grant, including financial statements and tax returns. The Grantee shall seek such assistance from each vendor of a Big Grant Purchase.
4. At any time before final payment on this Grant, or the end of the District fiscal year in which the Grant ends, whichever is later, and for three (3) years thereafter, the District may audit the Grantee, its contractors, subcontractors, or sub-grantees. The District may, during this period, seek to audit vendors of Big Grant Purchases. If federal funds have been granted or sub-granted, a federal agency may undertake such audits. The Grantee shall assist the District in obtaining the cooperation of its contractors, subcontractors and vendors in such audits.
 - i. If federal funds have been included in a DBH sub-grant, the Grantee is subject to the audit requirements of 45 CFR Subpart F.
5. If a federal agency undertakes an audit of the Grantee in connection with the Grant, the Grantee shall make available to DBH all information that the audit requires, including information from its contractors, subcontractors, vendors, and sub-grantees.
6. The Grantee shall reimburse DBH for any cost or expenditure disallowed as a result of an audit, in accord with federal and District Law, including Title 22-A, D.C. Municipal Regulations, Chapter 44, Mental Health Grants
7. Financial records, supporting documents, statistical records, and all other records pertinent to a [grant award](#) must be retained for a period of three (3) years from the date of submission of the final [expenditure report](#). Upon DBH's request, the Grantee must be able to produce for review the documentation, including for DBH audit or, if applicable, federal audit.

8. DBH, SAMHSA, the Inspectors General, the Comptroller General of the United States or any of their authorized representatives, must have the right of access to any documents, papers, or other records which are pertinent to the [grant award](#) in order to make audits, examinations, excerpts, and transcripts. The right also includes timely and reasonable access to the [non-Federal entity](#)'s personnel for the purpose of interview and discussion related to such documents.
9. If a claim, litigation, or audit is filed or commenced before the expiration of the three-year period, the documentation retention period shall be tolled and documentation must be preserved until the claim, litigation, or audit has been finally resolved.
10. The Grantee shall secure the agreement to the provisions of this section in writing from a person subject to an audit requirement.

Reporting Requirements

1. The Grantee shall comply with the plan and schedule for the provision of data collection, narrative and statistical reporting for activities funded under the terms of the NOGA. Additional requirements for data collection, narrative reporting, performance specific to a given service program may be provided by the Project Director.
2. Required reports which discuss grant activities for the preceding quarter will be due on each of the following dates:
 - a. Quarter 1 (October – December): January 30
 - b. Quarter 2 (January – March): April 30
 - c. Quarter 3 (April – June): July 30
 - d. Quarter 4 (July – September): October 30

In the event a due date falls on a weekend or District holiday, the report will be due on the next business day.

3. Data Collection – The Grantee shall obtain and maintain all hardware, software and training necessary to collect and report all required client, service and program data. Data shall be collected and submitted in formats and timelines provided by or approved by the Project Director/delegates.
4. Narrative Report – The Grantee will provide a brief narrative report for each service program supported under this agreement using formats and timelines provided by or approved by the Project Director or agents in accordance with the following terms:
 - a. The narrative programmatic report must include a work plan status, indicating the extent to which established milestones have been accomplished during the reporting month, and identifying proposed revisions to the work plan to address problem areas.
 - b. The narrative report will include:
 - i. Implementation progress to date;
 - ii. Discussion of any challenges to service delivery, including plans for addressing them;
 - iii. Any change in personnel supported by the grant in this service program;
 - iv. A thorough description of any waitlist for the service program, including the number of clients on the wait list, the average length of time for clients on the wait list and the longest period for any client currently on the wait list;
 - v. A discussion of the reasons for any significant under- or over-expenditure of funds budget relative to expected expenditure to date for any line item in the budget, along with a plan to address the under- or over-expenditure;
 - vi. Progress towards implementation of any corrective action plan that is open;

- vii. A summary of quality assurance measures conducted on the delivery of services;
- viii. Current contact information for each staff person supported by this agreement, including name, title, mailing address, email address and telephone number; and
- ix. Request for technical assistance, if any.

Performance Monitoring and Corrective Action Plan

To ensure responsible oversight of the funded project and its implementation by the Grantee, and to provide cooperative technical support for the Grantee, DBH shall:

1. Monitor the performance of the Grantee in the implementation of the funded program in accordance with the terms of the NOGA and the approved monitoring plan.
2. Assign a staff person to monitor the project. The Project Director or designee shall review all written policies and procedures applicable to the project, review all monthly reports, conduct site inspections, and hold periodic conferences with the Grantee to assess the Grantee's performance in meeting the requirements of the Grantee agreement.
3. Assess the Grantee's performance with respect to the number of people receiving services, quality of services delivered, and the Grantee's ability to deliver services according to the deadlines established in the NOGA.
4. Monitor performance by identifying the any instance where the Grantee falls 25% behind (during any one month) in client or service units which they were to provide under the grant.
5. Once the deficiency is identified, DBH will develop, in collaboration with the Grantee, a corrective action plan (CAP) to remedy the program deficiencies. If the Grantee fails to correct the deficiencies in the time prescribed by the DBH-approved CAP, DBH shall take appropriate action, including termination of the grant.
6. Conduct an evaluation of program effectiveness for each service-area based on criteria approved by the Project Director or his/her designee.

Fiscal Performance and Corrective Action Plan

By the end of Quarter 2, but certainly no later than Q3 of the signing of the NOGA, all new and continuing Grantees receive a risk assessment. The results of this review shall be shared by the Fiscal Monitor or designee. This will be repeated at the end of Q4 for grants that are ending (closeout). DBH may perform a complete grant fiscal compliance review to determine patterns and rates of expenditures.

If DBH identifies deficiencies, DBH may require that the Grantee undertake a CAP to improve and correct fiscal problems. If the Grantee fails to correct the deficiencies in the time prescribed by the DBH-approved CAP, DBH shall take appropriate action, including termination of the grant.

Program Close-Out

1. Within ninety (90) days of termination or expiration of the Grant, the Grantee shall submit to the Project Director a final Programmatic Report and a final Expenditure Report, providing a year-end accounting of expenditures for the grant. The final Expenditure Report shall include:
 - a. All costs paid by the Grantee in support of the activities of the grant.

- b. A summary of the cumulative obligation and disbursement of funds to sub-contractors.
 - c. A financial statement from each sub-contractor identifying funds received and expended for each category of service.
2. The Grantee shall immediately any balance of unobligated cash advance that is not authorized to be retained for use on other grants.

Public Notification of Funding

When issuing statements, press releases, and request for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, all Grantees shall clearly state the following:

1. The percentage of the total costs of the program or project which will be financed with federal funds;
2. The dollar amount of federal funds for the project or program; and
3. The percentage and dollar amount of the total costs of the project or program that will be financed by non-government sources.

Attribution Policy

All Grantees are required to identify their affiliation with DBH in all programs and services funded by DBH and administered by the DBH Administrative Unit. The usage includes, but is not limited to:

1. The incorporation of the current approved DBH logo/symbol with attribution statement on letterhead, newsletters, brochures, public service announcements, media publications, and all other forms of advertisement.
2. The clearly visible display of the DBH logo/symbol transparency at each Grantee's office, on their doors, or, near the entrances to all business offices, or and in reception areas, or other places of public business.
3. The clearly visible DBH logo/symbol with attribution statement at all functions and events sponsored by the Grantee.



“This program is funded wholly, or in part, by the Government of the District of Columbia, Department of Behavioral Health, INSERT ADMINISTRATION.”

4. Neither DBH nor Grantee will use the name of the other, or its employees, staff or students, either expressly or by implication, in any news, publicity release, or other fashion without the express written approval of the other party to this Agreement.
5. The Grantee is required to submit to the Project Director for review and approval prior to production all print and electronic media developed in conjunction with the grant and paid for directly from funding sources received from DBH. This includes: camera-ready copy for fliers, posters, brochures, newsletters, and other printed media; story boards and/or scripts for paid and public service advertising (radio or TV); videotapes, audiocassettes, DVDs, CDs, flash drives, questionnaires, and surveys. DBH reserves the right to disallow all payments relative to these materials if the Grantee is found in non-compliance with these guidelines.

Rights in Data and Other Information

1. If applicable, for the type of services provided under the Agreement, DBH retains ownership of all information produced pursuant to this Grant, including data regarding persons surveyed, interviewed, and/or counted, and any information regarding to whom services or things were provided.
2. To ensure the protection of persons' confidentiality and compliance with District law and policies regarding confidentiality, the Grantee shall not publish scientific or technical articles based on these data and/or information without DBH's prior written consent.
3. DBH will not unreasonably withhold consent to a request by Grantee for a nonexclusive license to use aggregated, non-confidential data, including for publication in professional and scientific journals and meetings.
4. Any research activity conducted under this Grant Agreement by the Grantee must have the prior approval and written consent of the Project Director. Applicable U.S. Department of Health and Human Services policies and federal regulations shall govern any research involving the use of human subjects. The Grantee shall review any research activities involving human subjects by designated Institutional Review Board (IRB) and to continue annual monitoring to assure compliance with requirements for the protections of human subjects. At such time, a copy of HHS Form 596, "Protection of Human Subjects Assurances, Certification, Declaration," must be submitted to the Project Director.
5. The documents for this grant are public documents and may be disclosed under the District's Freedom of Information Act, D.C. Official Code §2-531-40. DBH shall have the right to disclose to a third party the identity of a person providing a service or good under this Grant and the terms of insurance obtained pursuant to this Grant.

Indemnification

The Grantee shall indemnify and hold harmless the District of Columbia and all of its officers, agents and servants against any and all claims of liability or lawsuits arising from or based on, or as a consequence of or result of, any act, omission or default of the Grantee, its employees or its subcontractors, in the performance of the Grant.

Waiver/Exception Requests

Requests for consideration of a special provision, waiver or exception to any term or condition can be sent to DBH Grants Management Office at dbh.grants@dc.gov; Subject Line: "Waiver Request". There is no guarantee that the final review and disposition by DBH would result in an exception or revision to the terms stated herein.

Insurance

Unless DBH waives insurance requirements in writing, the following are conditions in receipt of funds under the Grant:

1. During the term of the grant, all organizations will be required to obtain and keep in force insurance coverage as listed below and must provide in writing the name of all its insurance carriers and the type of insurance provided:
 - a. Commercial General Liability Insurance: one million dollars (\$1,000,000) limit per occurrence, and two million dollars (\$2,000,000) aggregate, with the District added as additional insured;
 - b. Automobile Liability Insurance: one million dollars (\$1,000,000) per occurrence combined single unit;
 - c. Workers' Compensation Insurance according to the statutes of the District of Columbia, including Employer's Liability of at least:
 - i. One hundred thousand dollars (\$100,000) per accident for injury;
 - ii. Five hundred thousand dollars (\$500,000) per employee for disease; and
 - iii. Five hundred thousand dollars (\$500,000) policy limit for disease.
 - d. Umbrella/Excess Liability Insurance: two million dollars (\$2,000,000) limit per occurrence);
 - e. Professional Liability Insurance: two million dollars (\$2,000,000) limit per claim;
 - f. When District property is used or a District facility is used, crime insurance (third party indemnity) to cover the dishonest acts of employees of the Grantee, its contractors, and sub-grantees that result in loss to the District; and,
 - g. Sexual/Physical Abuse and Molestation insurance if minors are involved in the services provided, and no other policy covers the matter, in the amount of one million dollars (\$1,000,000) per occurrence and two million dollars (\$2,000,000) aggregate, with the District as an additional insured.
2. For each project conducted on federal property, in addition to the coverages, in paragraph "a." of this section:
 - a. The Grantee and its sub-grantees must procure public and employee liability insurance from responsible companies with a minimum limitation to be the greater of:
 - i. One million dollars (\$1,000,000) per person for any one claim, and an aggregate limit of three million dollars (\$3,000,000) for any number of claims arising from any one incident; or
 - ii. The minimum required by law, if any.
 - b. The United States of America must be named as an additional insured on each such policy;
 - c. Each such policy shall specify that the insured shall have no right of subrogation against the United States for payments of any premiums or deductibles thereunder; and
 - d. Each such policy shall be obtained by the insured, be for the account of the insured, and be at the insured's sole risk.

3. The insurance policies obtained by the Grantee shall:
 - a. Be written with a company licensed: (a) by the state in which the Grantee's principal offices are located and qualified to write insurance policies in the District of Columbia; or (b) by the District of Columbia;
 - b. Provide for at least thirty (30) days' written notice to DBH prior to their termination or material alteration; and
 - c. Be financially responsible, with either an A.M. Best Company financial strength and financial size category rating of A-VIII or higher, a Standard & Poor's rating of AA or higher, or a Moody's rating of Aa2 or higher.
4. The Grantee shall require each Grant-related subcontractor or sub-grantee to carry the insurance required herein, or the Grantee may, at its option, provide the coverage for a subcontractor or sub-grantee.
5. Unless otherwise prohibited by law, each policy (excluding Workers' Compensation and Professional Liability, if applicable) shall:
 - a. Name the District as an additional insured with respect to work or services performed under the grant or sub-grant;
 - b. Provide that the insurance coverage provided thereunder will be primary and noncontributory with any other applicable insurance; and
 - c. Contain a waiver of subrogation in favor of the District of Columbia
6. The Grantee may submit a Certificate of Insurance giving evidence of the required coverage either before or after the date of the NOGA, but DBH must receive it before DBH makes a payment of Grant funds.
7. The requirements of this section shall not apply to an agency that provides one of the following:
 - a. For an agency of the District of Columbia, a written statement that agency complies with the intent of the paragraph by requiring insurance for all activities not carried out by District employees; and
 - b. For a non-District government agency, a written statement (a) that the agency is self-insured, (b) that the self-insurance is primary and non-contributory with any other insurance maintained by the District of Columbia, and (c) identifying the self-insurance fund.

Requests for Reconsideration of Certain DBH Decisions

In certain limited circumstances DBH provides the following procedure for an applicant to seek review or reconsideration of a grant-making decision:

0. The Request for Reconsideration

- a. When DBH decides to award a grant to a successful applicant, it will notify by e-mail each applicant whose application was not selected for award. At DBH's discretion this notification may include a statement regarding eligibility, a reviewer's evaluation and comments, or a summary. DBH will not identify the reviewer. If an unsuccessful applicant wishes to better understand the decision, the applicant may ask DBH's Grants Management Office for further information. DBH may meet with the applicant, explain the decision, and may provide reviewer evaluation, comment, or a summary.
- b. An unsuccessful applicant may only ask DBH to reconsider its decision based on a material error in the determination of eligibility.
- c. If an unsuccessful applicant wishes DBH to reconsider the decision, the applicant must file a "Request for Reconsideration" in writing within seven (7) business days of the

date of DBH's e-mail notification that an applicant did not receive an award. The filing should be addressed to the Department Director.

- d. A written Request for Reconsideration may be made by e-mail to the published e-mail address for the grant competition. A Request for Reconsideration must include a concise statement of the reason(s) for the request, and all documentation and other evidence supporting the request.

1. Department Response

- a. A change to the award decision will be made only because of a material error in the determination of eligibility.
- b. The Department Director, or designee, will consider the Request for Reconsideration and the evidence provided.
- c. Ordinarily a decision will be issued within seven business (7) days of receipt of the Request for Reconsideration. The Director may extend that time to respond for good cause. Any such extensions will be communicated to the requester by e-mail at the address included on the Grant Application.
- d. The Director may halt the award of the grant while the Request for Reconsideration is pending.
- e. After reconsideration, the Director will inform the requestor in writing of the determination.
- f. If the Director determines that a valid basis for a change to the award exists, the Director may:
 - i. Reopen the grant application process, in whole or in part;
 - ii. Revise or revoke an award; or
 - iii. Take other appropriate action to address an error.

2. Effect of the award

Unless DBH states otherwise in writing, either (i) seven (7) business days after a grant award's announcement, or (ii) upon affirmation of a grant award after considering a Request for Reconsideration, a grant award shall be considered final action by DBH.



ATTACHMENT 2 - ASSURANCES, CERTIFICATIONS AND DISCLOSURES

This section includes certifications, assurances and disclosures made by the authorized representative of the Applicant/Grantee organization. These assurances and certifications reflect requirements for recipients of local and pass-through federal funding. By signing below, the Applicant/Grantee certifies that the information provided is accurate, and that the organization will adhere to the following terms and conditions, statutes and regulations in their entirety:

A. Applicant/Grantee Representations

- The Applicant/Grantee has provided the individuals, by name, title, address, email, and phone number who are authorized to negotiate with the Department of Behavioral Health on behalf of the organization;
- The Applicant/Grantee is able to maintain adequate files and records and will meet all reporting requirements as stated in the grant documentation;
- All fiscal records are kept in accordance with Generally Accepted Accounting Principles (GAAP) and account for all funds, tangible assets, revenue, and expenditures whatsoever; all fiscal records are accurate, complete and current at all times; and these records will be made available for audit and inspection as required by the grant documentation and all applicable District of Columbia and Federal laws and regulations;
- The Applicant/Grantee is current on payment of all federal and District taxes, including Unemployment Insurance taxes and Workers' Compensation premiums. This statement of certification shall be accompanied by a certificate from the District of Columbia OTR stating that the entity has complied with the filing requirements of District of Columbia tax laws and is current on all payment obligations to the District of Columbia, or is in compliance with any payment agreement with the Office of Tax and Revenue; (attach)
- The Applicant/Grantee has the administrative and financial capability to provide and manage the proposed services and ensure an adequate administrative, performance and audit trail;
- If required by DBH, the Applicant/Grantee is able to secure a bond, in an amount not less than the total amount of the funds awarded, against losses of money and other property caused by a fraudulent or dishonest act committed by Applicant/Grantee or any of its employees, board members, officers, partners, shareholders, or trainees; and,
- The Applicant/Grantee is not proposed for debarment or presently debarred, suspended, or declared ineligible, as required by Executive Order 12549, "Debarment and Suspension," and implemented by 2 CFR 180, for prospective participants in primary covered transactions and is not proposed for debarment or presently debarred as a result of any actions by the District of Columbia Contract Appeals Board, the Office of Contracting and Procurement, or any other District contract regulating Agency;
- The Applicant/Grantee has the resources and expertise necessary to perform the grant, or, has the ability to obtain such through submitted and approved sub-grants;
- The Applicant/Grantee has the ability to comply with the required or proposed delivery or performance schedule, taking into consideration all existing and reasonably expected commercial and governmental business commitments;

- The Applicant/Grantee has a satisfactory record of performing similar activities as detailed in the award or, if the grant award is intended to encourage the development and support of organizations without significant previous experience, has otherwise established that it has the skills and resources necessary to perform the services required by this Grant;
- The Applicant/Grantee has a satisfactory record of integrity and business ethics;
- The Applicant/Grantee either has the necessary organization, experience, accounting and operational controls, and technical skills to implement the grant, or the ability to obtain them;
- The Applicant/Grantee is in compliance with the applicable District licensing and tax laws and regulations;
- The Applicant/Grantee is in compliance with the Drug-Free Workplace Act and any regulations promulgated thereunder;
- The Applicant/Grantee meets all other qualifications and eligibility criteria necessary to receive an award;
- The Applicant/Grantee agrees to indemnify, defend and hold harmless the Government of the District of Columbia and its authorized officers, employees, agents and volunteers from any and all claims, actions, losses, damages, and/or liability arising out of or related to this grant including the acts, errors or omissions of any person and for any costs or expenses incurred by the District on account of any claim therefrom, except where such indemnification is prohibited by law;
- Consistent with 45 C.F.R. 75.113, the Applicant/Grantee must disclose in a timely manner, in writing to the SAMHSA, and the United States Department of Health and Human Services (HHS) Office of Inspector General (OIG) all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to SAMHSA and to the HHS OIG at the following addresses:

SAMHSA
 Attention: Office of Financial Advisory Services
 560 Fishers Lane
 Rockville, MD 20857

AND

U.S. Department of Health and Human Services
 Office of Inspector General
 ATTN: Mandatory Grant Disclosures, Intake Coordinator
 Independence Avenue, SW, Cohen Building
 Room 5527
 Washington, DC 20201

Fax: (202) 205-0604 (Include "Mandatory Grant Disclosures" in subject line) or email:
MandatoryGranteeDisclosures@oig.hhs.gov

3. Failure to make required disclosures can result in any of the remedies described in 45 CFR § 75.371, "Remedies for Noncompliance" including suspension and disbarment (See 2 CFR Parts 180 and 376 and 31 U.S.C. 3321).

- The Applicant/Grantee certifies that it will comply with the non-procurement and disbarment regulations implementing Executive Orders 12549 and 12689, 2 CFR parts 376, and 45 CFR § 75.213. These regulations restrict awards, sub-awards and contracts with parties that are debarred suspended or otherwise excluded from or ineligible from participation in federal assistance programs or activities. A list of federally excluded health care programs can be found at: (<http://exclusions.oig.hhs.gov/>). The D.C. Excluded Parties List can be found at (<https://ocp.dc.gov/page/excluded-parties-list>).
- The Applicant/Grantee certifies that it will comply with drug free workplace requirements in Subpart B (or Subpart C of the recipient is an individual) of part 382, which adopts the Government wide implementation (2 CFR part 182) of section 5152-5158 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title .S.C. 701-V, Subtitle D; 41 U.S.C. 701-707);
- The Applicant/Grantee certifies that it will comply with all federal and District whistleblower statutes and regulations, including but not limited to 10 U.S.C. §§ 2324, 2409, and 41 U.S.C. §§ 4304, 4310, 4712; and
- In accordance with the United States Supreme Court decisions in *United States v. Windsor* and in *Obergefell v. Hodges*, the Applicant/Grantee must treat as valid the marriages of same-sex couples.

B. Statutory and Regulatory Assurances and Certifications

The Applicant/Grantee shall comply with all applicable District and federal statutes and regulations, including, but not limited to, the following:

- The Americans with Disabilities Act of 1990, Pub. L. 101-336, July 26, 1990; 104 Stat. 327 (42 U.S.C. 12101 *et seq.*);
- Rehabilitation Act of 1973, Pub. L. 93-112, Sept. 26, 1973; 87 Stat. 355 (29 U.S.C.701 *et seq.*);
- The Hatch Act, Ch. 314, 24 Stat. 440 (5 U.S.C. 1501; 7321 *et seq.*); D.C. Law 20-4, D.C. Official Code § 1-1171 *et seq.*; D.C. Law 19-124; D.C. Official Code § 1-1161.01;
- The Fair Labor Standards Act, Ch. 676, 52 Stat. 1060 (29 U.S.C. 201 *et seq.*);
- The Clean Air Act Pub. L. 108-201, February 24, 2004; 42 USC 85 *et seq.*);
- The Occupational Safety and Health Act of 1970, Pub. L. 91-596, Dec. 29, 1970; 84 Stat. 1590 (29 U.S.C. 651 *et seq.*);
- The Hobbs Act (Anti-Corruption), ch. 537, 60 Stat. 420 (18 U.S.C. § 1951);
- Equal Pay Act of 1963, Pub. L. 88-38, June 10, 1963; 77 Stat. 56 (29 U.S.C. 201);
- Age Discrimination Act of 1975, Pub. L. 94-135, Nov. 28, 1975; 89 Stat. 728 (42 U.S.C. 6101 *et. seq.*);
- Age Discrimination in Employment Act, Pub. L. 90-202 § 2, Dec. 15, 1967; 81 Stat. 602 (29 U.S.C. 621 *et seq.*);
- Military Selective Service Act of 1973, Pub. L. 92-129, July 1, 1973, 85 Stat. 358 (50 U.S.C. 460);

- Title IX of the Education Amendments of 1972, Pub. L. 92-318, June 23, 1972; 86 Stat. 235, (20 U.S.C. 1001);
- Immigration Reform and Control Act of 1986, Pub. L. 99-603, Nov 6, 1986; 100 Stat. 3359, (8 U.S.C. 1101);
- Executive Order 12459 (Debarment, Suspension and Exclusion);
- Medical Leave Act of 1993, Pub. L. 103-3, Feb. 5, 1993, 107 Stat. 6 (5 U.S.C. 6381 et seq.);
- District of Columbia Human Rights Act of 1977 (D.C. Official Code § 2-1401.01 et seq.);
- District of Columbia Language Access Act of 2004, DC Law 15 - 414 (D.C. Official Code § 2-1931 et seq.), including the prohibition against sexual harassment found in 4 DCMR § 100 et seq.;
- Child and Youth, Safety and Health Omnibus Amendment Act of 2004, D.C. Law §15-353; D.C. Official Code § 4-1501.01 et seq..

C. Mandatory Disclosures

The Applicant/Grantee certifies that the information disclosed in the table below is true at the time of submission of the application for funding and at the time of award if funded. If the information changes, the Grantee shall notify the Project Director within 24 hours of the change in status. A duly authorized representative must sign the disclosure certification.

<p>Covered Entity Disclosure: During the two-year period preceding the execution of the attached Agreement, were any key personnel or agents of the Applicant/Grantee/Recipient organization, a candidate for public office, or, a contributor to a campaign of a person who is a candidate for public office as defined in Section 1092(3) of the “Grant Administration Amendment Act of 2015,” effective October 22, 2015 (D.C. Law 21-36; D.C Official Code 1-328.11(3))?</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<p>Are any of the aforementioned personnel presently or anticipate becoming a candidate for public office, or a contributor to a campaign of a person who is a candidate for public office, as defined in Section 1092(3) of the “Grant Administration Amendment Act of 2015,” effective October 22, 2015 (D.C. Law 21-36; D.C Official Code 1-328.11(3))?</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<p>The Applicant/Grantee Organization must report the names and total compensation of its five (5) most highly compensated officers during the preceding fiscal year if it:</p> <ol style="list-style-type: none"> 1) Received eighty (80) percent or more of its annual gross revenues in federal grants, sub-awards, contracts and subcontracts; and 2) Received \$25,000.00 or more in annual gross revenues from federal grants, sub-awards, contracts and subcontracts; and 3) Had gross income, from all sources, of \$300,000.00 or more; and 4) The public does not have access to this information through periodic reports filed 	<input type="checkbox"/> YES <input type="checkbox"/> NO

<p>under Section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. §§78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986.</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>The Applicant/Grantee organization has a federally-negotiated Indirect Cost Rate Agreement. If yes, insert issue date for the IDCR: _____</p> <p>If yes, insert the name of the cognizant federal agency? _____</p>	<p><input type="checkbox"/> YES</p> <p><input type="checkbox"/> NO</p>
<p>No key personnel or agent of the Applicant/Grantee organization who will participate directly, extensively and substantially in the request for funding (i.e., application), pre-award negotiation or the administration or management of the funding is currently in violation of federal and local criminal laws involving fraud, bribery or gratuity violations potentially affecting the DBH award.</p>	<p><input type="checkbox"/> YES</p> <p><input type="checkbox"/> NO</p>

Signature

Name and Title

Date



ATTACHMENT 3 – PROGRAM INCOME AND FINANCIAL DISCLOSURE

What is Program Income?

Program income means gross income earned by the non-Federal entity that is directly generated by a supported activity earned as a result of the Federal award during the period of performance. Program income includes but is not limited to income from fees for services performed, the use or rental of real or personal property acquired under Federal awards, the sale of commodities or items fabricated under a Federal award, license fees and royalties on patents and copyrights, and principal and interest on loans made with Federal award funds. Interest earned on advances of Federal funds is not program income.

The Department of Behavioral Health (DBH) requires sub-grantees to identify and document program income on projects/services. The nature of this income must be appropriately documented and the resulting revenue properly recorded. All sub-grantees should be aware of how program income will be used and reported due to a possible impact on the scope of work of the award.

Program income must be utilized in a manner that is allocable, allowable, and reasonable to the project. Expenses that are unallowable on the main project are also unallowable on the program income account.

The DBH Fiscal Monitor will review all budgets and budget modifications and flag any activity/service that has a potential to generate income with the Project Director and sub-grantee. Any flagged activity/service will be reviewed by the fiscal monitor and project director monthly, no less than quarterly with the sub-grantee.

Procedure for Monitoring Program Income:

- Sub-grantee identifies program income activity/service.
- Program income account is established by the sub-grantee.
- Revenue is received and deposited into the program income account.
- The sub-grantee certifies receipt of program income to Fiscal Monitor and Project Director through DBH Program Income Reporting Worksheet monthly, no less than quarterly.
- Fiscal monitor reviews the Income Reporting Worksheet and supporting documentation with the Project Director. A reconciliation is performed with supporting documentation and DBH data systems such as, DATA WITS.
- DBH reports to applicable Federal agency a summary of all sub-grantees that accrued program income and the amount.



ATTACHMENT 3 – PROGRAM INCOME AND FINANCIAL DISCLOSURE

I _____, am an authorized representative of _____, an organization in receipt of a sub-grant from the Department of Behavioral Health (DBH) funded in whole or part by the Substance Abuse and Mental Health Services Administration (SAMHSA).

Pursuant to 45 CFR § 75.2, the organization in receipt of the sub-grant is (please select one):

_____ **A non-profit organization.** A non-profit organization is any corporation, trust association, cooperative or other organization, not including an Institution of Higher Learning (IHE) that: (1) is operated primarily for scientific, educational, service, charitable or similar purposes in the public interest; (2) is not organized primarily for profit; and (3) uses net proceeds to maintain, improve or expand the operations of the organization. I certify that the organization will comply with all statutes and regulations related to program income, including but not limited to 45 CFR § 75.307. I further certify that I will any program income earned as a result of this grant on all invoices submitted to DBH.

_____ **A commercial organization.** A commercial organization is an institution, cooperation, or other legal entity, including but not limited to partnerships, sole proprietorships, and limited liability companies, that is organized or operated for the profit or benefit of its shareholders or other owners. I certify that the organization will comply with all statutes and regulations related to program income, including but not limited to 45 CFR § 75.216. I further certify that I will report any program income earned as a result of this grant on all invoices submitted to DBH.

The person whose signature appears below is authorized to sign this assurance and commit the Applicant/Grantee to the above provisions.

Signature

Name and Title

Date



**ATTACHMENT 4 - DISTRICT OF COLUMBIA CONTRIBUTION AND SOLICITATION
CERTIFICATION**

I _____, am an authorized representative of _____, an organization in receipt of a sub-grant from the Department of Behavioral Health valued at \$100,000.00 or more (“the organization”). Pursuant to D.C. Code § 1-328.15, I hereby certify under penalty of perjury to the best of my knowledge after due diligence that:

1. The organization has not made a contribution or solicitation for contribution to any of the following within one (1) year beginning on the date the contribution or solicitation for contribution was made and continuing for one (1) year after the general election for which the contribution or solicitation for contribution was made, whether or not the contribution was made before the primary election:
 - a. An elected District official who is or could be involved in influencing or approving the award of a grant;
 - b. A candidate for elective District office who is or could be involved in influencing or approving the award; or
 - c. A political committee affiliated with a District candidate or elected District official described in subparagraphs (a) or (b).

2. The organization has not made a contribution to any of the following within eighteen (18) months beginning on the date the contribution or solicitation for contribution was made and continuing for eighteen (18) months after that date:
 - a. A constituent-service program or fund, or substantially similar entity, controlled, operated or managed by:
 - i. An elected District official who is or could be involved in influencing or approving the award of a grant;
 - ii. A person under the supervision, direction or control of an elected District official who is or could be involved in influencing or approving the award of a grant.
 - b. A political party; or
 - c. An entity or organization:
 - i. That a candidate or elected District official described in section 1(a), (b) or a member of his or her immediate family controls; or
 - ii. In which a candidate or elected District official described in section 1(a), (b) has an ownership interest of 10% or more.

Please check if this is not applicable to your organization.

Signature

Name and Title

Date



ATTACHMENT 5 - FEDERAL ASSURANCES AND CERTIFICATIONS

ASSURANCE OF COMPLIANCE WITH TITLE VI OF THE CIVIL RIGHTS ACT OF 1964, SECTION 504 OF THE REHABILITATION ACT OF 1973, TITLE IX OF THE EDUCATION AMENDMENTS OF 1972, THE AGE DISCRIMINATION ACT OF 1975, AND SECTION 1557 OF THE AFFORDABLE CARE ACT.

The Applicant/Grantee provides this assurance in consideration of and for the purpose of obtaining a sub-grant funded in whole or part by U.S. Department of Health and Human Services (HHS).

THE APPLICANT/GRANTEE HEREBY AGREES THAT IT WILL COMPLY WITH:

1. Title VI of the Civil Rights Act of 1964 (Pub. L. 88—352), as amended, and all requirements imposed by or pursuant to HHS Regulation (45 C.F.R. Part 80), to the end that, accordance with Title VI of that Act and the Regulation, no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Applicant/Grantee receives a sub-grant funded in whole or part by HHS.
2. Section 504 of the Rehabilitation Act of 1973 (Pub. L. 93-112), as amended, and all requirements imposed by or pursuant to HHS Regulation (45 C.F.R. Part 84), to the end that, in accordance with Section 504 of that Act and the Regulation, no otherwise qualified individual with a disability in the United States shall, solely by reason of her or his disability, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity for which the Applicant/Grantee receives a sub-grant funded in whole or part by HHS.
3. Title IX of the Education Amendments of 1972 (Pub. L. 92.18), as amended, and all requirements imposed by or pursuant to HHS Regulation (45 C.F.R. Part 86), to the end that in accordance with Title IX and the Regulation, no person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any education program or activity for which the Applicant/Grantee receives a sub-grant funded in whole or part by HHS.
4. The Age Discrimination Act of 1975 (Pub. L. 94-1350), as amended, and all requirements imposed by or pursuant to HHS Regulation (45 C.R.F. Part 91), to the end that, in accordance with the Act and Regulation, no person in the United States shall, on the basis of age, be denied the benefits of, be excluded from participation in, or be subjected to discrimination under any program or activity for which the Applicant/Grantee receives a sub-grant funded in whole or part by HHS.
5. Section 1557 of the Affordable Care Act (Pub. L. 111-148), as amended, and all requirements imposed by or pursuant to HHS Regulation (45 CFR Part 92), to the end that, in accordance with Section 1557 and the Regulation, no person in the United States shall, on the ground of race, color, national origin, sex, age, or disability be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any health program or

activity for which the Applicant/Grantee receives a sub-grant funded in whole or part by HHS.

The Applicant/Grantee agrees that compliance with this assurance constitutes a condition of continued receipt of a sub-grant funded in whole or part by HHS, and that is binding upon the Applicant/Grantee, its successors, transferees and assignees for the period during which the sub-grant is provided. If any real property or structure thereon is provided or improved with the aid of the HHS sub-grant provided to the Applicant/Grantee, this assurance shall obligate the Applicant/Grantee, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for the sub-grant is extended or for another purpose involving the provision of similar services for benefits. If any personal property is so provided, this assurance shall obligate for the period during which it retains ownership or possession of the property. The Applicant/Grantee further recognizes and agrees that the United States shall have the right to seek judicial enforcement of this assurance.

ASSURANCES – NON-CONSTRUCTION PROGRAMS

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for a grant and has the institutional, managerial and financial capability to ensure proper planning, management and completion of the project described in the application.
2. Will give DBH, the United States Department of Health and Human Services, the Comptroller General of the United States and any authorized representative access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable timeframe after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IC of the Educational Amendments of 1972, as amended (20 U.S.C. §§ 1681-1683, and 1685-1686), which

prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§ 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse and alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§ 290 dd-3 and 290 ww-3) as amended, relating to the confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§ 3601 *et seq.*), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which the sub-grant is funded; and (j) the requirements of any other non-discrimination statutes which may apply to the application.

7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply, as applicable with the provisions of the Hatch Act (5 U.S.C. §§ 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§ 276a to 276a-7), the Copeland Act (40 U.S.C. § 276c and 18 U.S.C. §874) and the Contract Work Hours and Safety Standard Act (40 U.S.C. §§327-333), regarding la or standards for federally-assisted construction sub-agreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard are to participate in the program and too purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following (a) institution of environmental quality control measures under the Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EP 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistence with the approved State management program developed under the Coastal Zone Management Act pf 1972 (16 U.S.C. §§ 1451 *et seq.*); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C §§ 7401 *et seq.*); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).

12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§ 1271 *et seq.*) related to protecting components or potential components of national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic preservation Act of 1974 (16 U.S.C. §§ 469a-1 *et seq.*).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development and related human activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 *et seq.*) pertaining to the care, handling and treatment of warm blooded animals held for research, teaching or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§ 4801 *et seq.*) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
18. Will comply with all applicable requirements of all other federal laws, executive orders, regulations and policies governing the program.
19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time the award is in effect or (3) Using forced labor in the performance of the award od sub-awards under the award.

LIST OF CERTIFICATIONS

I. CERTIFICATION REGARDING LOBBYING

Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non-appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs (45 CFR Part 93). By signing, the Applicant/Grantee is providing certification set out in Appendix A to 45 CFR Part 93.

2. CERTIFICATION REGARDING PROGAM FRAUD CIVIL REMEDIES ACT (PFFCRA)

The undersigned (authorized official signing for the Applicant/Grantee organization) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The undersigned agrees that the applicant organization will comply with the Department of Health and Human Services terms and conditions of award if a grant is awarded as a result of this application.

3. CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, also known as the Pro-Children act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, daycare, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children’s services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children’s services provided in private residence, portions of facilities used for inpatient drug or alcohol treatment, service providers whose sole source of applicable Federal funds is Medicare or Medicaid, or facilities where WIC coupons are redeemed.

Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

The authorized official signing for the Applicant/Grantee organization certifies that the Applicant/Grantee organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act. The applicant organization agrees that it will require that the language of this certification be included in any sub-awards which contain provisions for children’s services and that all sub-recipients shall certify accordingly.

HHS strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the HHS mission to protect and advance the physical and mental health of the American people.

The person whose signature appears below is authorized to sign this assurance and commit the Applicant/Grantee to the above provisions.

Signature

Name and Title

Date



ATTACHMENT 6 - SPECIAL TERMS OF STATE OPIOID RESPONSE (SOR) AWARD FUNDING

As a sub-recipient of State Opioid Response (SOR) Grant funds, I certify that my agency/organization will comply with the following terms:

Grant funds may not be used, directly or indirectly, to purchase, prescribe, or provide marijuana or treatment using marijuana. Treatment in this context includes the treatment of opioid use disorder. Grant funds also cannot be provided to any individual who or organization that provides or permits marijuana use for the purposes of treating substance use or mental disorders. See, e.g., 45 C.F.R. § 75.300(a) (requiring HHS to “ensure that federal funding is expended . . . in full accordance with U.S. statutory . . . requirements.”); 21 U.S.C. §§ 812(c)(10) and 841 (prohibiting the possession, manufacture, sale, purchase or distribution of marijuana). This prohibition does not apply to those providing such treatment in the context of clinical research permitted by the DEA and under an FDA-approved investigational new drug application where the article being evaluated is marijuana or a constituent thereof that is otherwise a banned controlled substance under federal law.

SOR funds shall be used to fund services and practices that have a demonstrated evidence-base, and that are appropriate for the population(s) of focus.

SOR funds shall not be utilized for services that can be supported through other accessible sources of funding such as other federal discretionary and formula grant funds, e.g., HHS (CDC, CMS, HRSA, and SAMHSA), DOJ (OJP/BJA) and non-federal funds, third party insurance, and sliding scale self-pay, among others.

SOR funds for treatment and recovery support services shall only be utilized to provide services to individuals with a diagnosis of an OUD or to individuals with a demonstrated history of opioid misuse, or to build the workforce to serve individuals with OUD.

Sub-grantees are expected to report data as required in the Funding Opportunity Announcement and to fully participate in any SAMHSA-sponsored evaluation of this program. All required data must be reported to SAMHSA's Performance Accountability and Reporting System (SPARS) system within SAMHSA-specified timelines. The submission of these data in the form required by SAMHSA is a requirement of funding.

Sub-grantees are required to work with the SAMHSA Opioid-STR TA grant awarded to American Academy of Addiction Psychiatry (AAAP) as the primary means of technical assistance (TA) provision.

Sub-grantees are required to track funding of activities by providers and be prepared to submit these data to DBH upon request.

The person whose signature appears below is authorized to sign this assurance and commit the Applicant/Grantee to the above provisions.

Signature

Name and Title

Date



ATTACHMENT 7 - SPECIAL TERMS OF AWARD FUNDING

As a sub-recipient of Substance Abuse and Mental Health Services Administration (SAMHSA) grant funds, I certify that my agency/organization will comply with the following terms:

Grant funds may not be used, directly or indirectly, to purchase, prescribe, or provide marijuana or treatment using marijuana. Treatment in this context includes the treatment of opioid use disorder. Grant funds also cannot be provided to any individual who or organization that provides or permits marijuana use for the purposes of treating substance use or mental disorders. See, e.g., 45 C.F.R. § 75.300(a) (requiring HHS to “ensure that Federal funding is expended . . . in full accordance with U.S. statutory . . . requirements.”); 21 U.S.C. §§ 812(c)(10) and 841 (prohibiting the possession, manufacture, sale, purchase or distribution of marijuana). This prohibition does not apply to those providing such treatment in the context of clinical research permitted by the DEA and under an FDA-approved investigational new drug application where the article being evaluated is marijuana or a constituent thereof that is otherwise a banned controlled substance under federal law.

The person whose signature appears below is authorized to sign this assurance and commit the Applicant/Grantee to the above provisions.

Signature

Name and Title

Date



ATTACHMENT 8 - TAX CERTIFICATION

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Office of the Chief Financial Officer
Office of Tax and Revenue



TAX CERTIFICATION AFFIDAVIT

THIS AFFIDAVIT IS TO BE COMPLETED ONLY BY THOSE WHO ARE REGISTERED TO CONDUCT BUSINESS IN THE DISTRICT OF COLUMBIA.

Date

Authorized Agent
Name of Organization/Entity
Business Address (include zip code)
Business Phone Number

Authorized Agent
Principal Officer Name and Title
Square and Lot Information
Federal Identification Number
Contract Number
Unemployment Insurance Account No.

I hereby authorize the District of Columbia, Office of the Chief Financial Officer, Office of Tax and Revenue to release my tax information to an authorized representative of the District of Columbia agency with which I am seeking to enter into a contractual relationship. I understand that the information released will be limited to whether or not I am in compliance with the District of Columbia tax laws and regulations solely for the purpose of determining my eligibility to enter into a contractual relationship with a District of Columbia agency. I further authorize that this consent be valid for one year from the date of this authorization.

I hereby certify that I am in compliance with the applicable tax filing and payment requirements of the District of Columbia. The Office of Tax and Revenue is hereby authorized to verify the above information with the appropriate government authorities.

Signature of Authorizing Agent

Title

The penalty for making false statement is a fine not to exceed \$5,000.00, imprisonment for not more than 180 days, or both, as prescribed by D.C. Official Code §47-4106.

Office of Tax and Revenue, PO Box 37559, Washington, DC 20013



ATTACHMENT 9 - SUB-GRANTEE SINGLE AUDIT CERTIFICATION

Title 2 Part 200 of the Code of Federal Regulations, Subpart F – Audit Requirements states that a non-federal entity that expends less than \$750,000 during the non-federal entity’s fiscal year in federal awards is exempt from federal audit requirements for that year. However, records must be available for review or audit by appropriate officials of the federal agency, pass-through entity (Department of Behavioral Health), and the Government Accountability Office (GAO). The sub-grantee hereby certifies that less than \$750,000 has been expended in federal awards from all sources during the specified audit period.

Check the applicable box and complete the information below:

- Yes, less than \$750,000 has been expended in federal awards from all sources during the specified audit period.
- No, more than \$750,000 has been expended in federal awards from all sources during the specified audit period.

Exemption certification for fiscal year ending: _____

NOTE: The audit period is the organization’s fiscal or calendar year to be audited. Please include the month, day and year for “beginning” and “ending” period (Example – beginning: January 1, 2018 and ending December 30, 2018).

Audit Period Beginning:

Ending:

Total Amount of Federal Funds Expended: \$

Sub recipient:

Organizational Representative Name:

Organization Address:

Email:

Telephone:

Authorized Representative Signature:

For non-profits and Community Based Organizations (CBOs), the certification must be signed by the Chairperson of the Board of Directors.



ATTACHMENT 10 - DBH GRANT TERMS AND CONDITIONS

_____, an Applicant/Grantee for a grant/sub-grant with the Department of Behavioral Health (DBH) acknowledges receipt of the DBH Grant Terms and Conditions. The Applicant/Grantee organization agrees to be bound by the DBH Grant Terms and Conditions in their entirety if selected for funding.

Applicants/Grantees of sub-grants funded in whole or part by the Substance Abuse and Mental Health Services Administration (SAMHSA) also agree to be bound by the SAMHSA Grant Award Standard Terms and the United States Department of Health and Human Services (HHS) Grants Policy Statement.

The person whose signature appears below is authorized to sign this assurance and commit the Applicant/Grantee to the above provisions.

Signature

Name and Title

Date

ATTACHMENT 11 - SAMPLE WORK PLAN FOR COMPETITION 1

PROPOSED BUDGET PERIOD 2 WORK PLAN

Agency Name: New Day Pentecostal Church
Project Title: Community Opioid Awareness 2020

Contact: xxxx
Total Award: \$20,000

RFA #

Goal 1: Inspire residents of Ward 1 to engage in creative educational opportunities around the risks of opioid use disorders and effective treatment and prevention options.

Measurable Objectives/Activities:

Process Objective #1: To create an educational and engaging public art installation at the Arts Center in Ward 8 focused on OUD that promotes awareness.

Key activities needed to meet this objective:	Start Date/s:	Completion Date/s:	Key Personnel (Title)
<ul style="list-style-type: none"> Window Mural and Poster/Postcard Design 	<ul style="list-style-type: none"> 10/05/2020 	<ul style="list-style-type: none"> 10/20/2020 	Tom Jones (Consultant); Lisa Evans (Events and Operations Manager); George Smith (Executive Director) Pastor Smith (New Day Pentecostal Church)
<ul style="list-style-type: none"> Window Mural Installation 	<ul style="list-style-type: none"> 10/26/2020 	<ul style="list-style-type: none"> 10/26/2020 	
<ul style="list-style-type: none"> Public Outreach & Communication 	<ul style="list-style-type: none"> 10/20/2020 	<ul style="list-style-type: none"> 10/30/2020 	

Outcome:
 Awareness of OUD will be heightened as this prominently displayed art, visible from the street, is viewed by 1,500+ monthly Arts Center patrons, the thousands of people who live in Ward 8, and the thousands of individuals and groups that follow the Arts Center on social media. In the process, these viewers will also be informed about upcoming opioid trainings and resources.

Process Objective #2: To launch a street art and public information campaign along Smith Street, related to the Arts Center window mural.

Key activities needed to meet this objective:	Start Date/s:	Completion Date/s:	Key Personnel (Title)
<ul style="list-style-type: none"> Poster and Postcard Distribution to Local Businesses 	<ul style="list-style-type: none"> 10/26/2020 	<ul style="list-style-type: none"> 11/6/2020 	Lisa Evans (Events and Operations Manager); George Smith (Executive Director) Pastor Smith (New Day Pentecostal Church)

Outcome:

The 1,500+ monthly Arts Center patrons, New Day Pentecostal Church members, the thousands of people who live in and visit Ward 8, and the individuals who live and spend time in our neighborhood's local parks are made aware of, warmly invited to, and excited to participate in the creative educational opportunities outlined in Goal 2.

Process Objective #3: To engage the Ward 8 x community and neighbors in a day of service by cleaning up nearby parks and distributing informational posters and postcards.

Key activities needed to meet this objective:	Start Date/s:	Completion Date/s:	Key Personnel (Title)
<ul style="list-style-type: none"> Park Cleanup Day 	<ul style="list-style-type: none"> 10/15/2020 	<ul style="list-style-type: none"> 11/1/2020 	Shemar Wheeler (Consultant); Talia Jaffe (Events and Operations Manager); Leigh Tivol (Executive Director) Pastor Smith (New Day Pentecostal Church)

Outcome #3:
Community members, New Day Pentecostal Church members, and volunteers will be engaged in a COVID-safe, participatory event that will educate and bring awareness to addressing OUD and supporting those impacted, while raising broader awareness of OUD and available resources for prevention, training, and treatment.

Goal 2: Community members are equipped to effectively communicate about and engage with those impacted by OUD, and to assist those in need of essential treatment and resources.

Measurable Objectives/Activities:

Process Objective #1: Produce and widely distribute a short, powerful documentary about DC's opioid epidemic, incorporating interviews, articles, reports, and monologues inspired by individuals in the DC area most impacted by OUD. In an effort to highlight and support local artists and creatives, the docudrama will utilize DC based talent and resources to execute the project.

Key activities needed to meet this objective:	Start Date/s:	Completion Date/s:	Key Personnel (Title)
<ul style="list-style-type: none"> Write, film, and produce short documentary Host virtual screening and discussion 	<ul style="list-style-type: none"> 10/5/2020 11/5/2020 	<ul style="list-style-type: none"> 11/20/2020 11/20/2020 	Tom Jones (Consultant); Lisa Evans (Events and Operations Manager); George Smith (Executive Director) Pastor Smith (New Day Pentecostal Church)

Outcome #1: A large, online audience is reached with an easily accessible, creative and moving narrative piece that centers the voices of those most impacted by OUD, and creates a vehicle for marketing trainings and events.

Process Objective #2: To host three event opportunities on OUD education and creative responses to recovery.

Key activities needed to meet this objective:	Start Date/s:	Completion Date/s:	Key Personnel (Title)
<ul style="list-style-type: none"> ● Design a one-hour training in collaboration with a DC Health Certified Trainer and Artistic Consultant (name) ● Facilitate two virtual trainings, including naloxone training provided by x consultant ● Host a recovery-themed Open Mic Night, with instruction and creative input from Artistic Consultant (name) 	<ul style="list-style-type: none"> ● 10/5/2020 ● 11/6/2020 ● 11/20/2020 	<ul style="list-style-type: none"> ● 11/6/2020 ● 11/20/2020 ● 11/20/2020 	<p>Tom Jones (Consultant); Lisa Evans (Events and Operations Manager); George Smith (Executive Director) Pastor Smith (New Day Pentecostal Church)</p>
<p>Outcome #2: Engaged participants are educated about OUD and receive information and tools needed to save someone experiencing an opioid overdose -- via training and education that includes creative outlets such as spoken word and theatre arts.</p>			