



**Department of  
Mental Health &  
Addiction Services**

**Bureau of Grants Administration Request for Applications (RFA)**

**Ohio’s State Opioid and Stimulant Response (SOS) 4.0 Grant  
“Umbrella RFA” Funding Opportunities for Ohio’s  
Alcohol, Drug Addiction, and Mental Health (ADAMH) Boards  
and  
Community Organizations**

**RFA #60, MHA-FY24–FY25-Bureau of Grants Administration-SOS 4.0  
“Umbrella RFA”**

**Year 1 Funding Period: 09/30/2024 - 09/29/2025**

**Request for Applications Posting Date: 08/23/2024**

**Request for Applications Due Date: 09/23/2024 by 3:00 p.m. EDT**

**Mike DeWine, Governor  
LeeAnne Cornyn, Director**

**Ohio’s State Opioid and Stimulant Response (SOS) 4.0 Grant Umbrella RFA**  
**Bureau of Grants Administration**  
**FFY2024 – 2025 "Umbrella RFA" Funding Opportunities for**  
**Ohio’s ADAMH Boards and Community Organizations**  
**RFA #: 60**

**Applications should be completed using the following information, guidance, and requirements:**

**SECTION I. GENERAL PURPOSE & APPLICANT INFORMATION**

**1.1 Purpose**

The Ohio Department of Mental Health and Addiction Services (OhioMHAS) is pleased to issue this “Umbrella” Request for Applications (RFA) for the purpose of soliciting applications from eligible Ohio Alcohol, Drug Addiction, and Mental Health (ADAMH) Board and non-profit community organizations who provide prevention, harm reduction, treatment, and recovery support services to apply for State Opioid and Stimulant Response (SOS) 4.0 Grant funding. The SOS 4.0 Grant is aimed to address the overdose crisis, driven primarily by illicitly manufactured fentanyl, by providing resources to increase access to U.S. Food and Drug Administration (FDA)-approved medications for the treatment of opioid use disorder (MOUD). The grant supports the continuum of prevention, harm reduction, treatment, and recovery support services for opioid use disorder (OUD), stimulant misuse and use disorders, and other concurrent substance use disorders as required by Substance Abuse and Mental Health Services Administration (SAMHSA).

The projects awarded under this funding opportunity will be viewed as one-time only, one year period of the SOS award. Applicants are advised that continuation of funding beyond the award period should not be assumed and is not guaranteed.

The responsibilities of the selected applicants of this RFA will include provision of evidence-based<sup>1</sup>, culturally adapted<sup>2</sup>, and community-defined<sup>3</sup> evidence practices in the care continuum

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<sup>1</sup> Per SAMHSA, “an evidence-based practice (EBP) is a practice that has been documented with research data to show its effectiveness.” Appendix A provides a list of recommended practices.

<sup>2</sup> Per SAMHSA, “a culturally adapted practice refers to the systematic modification of an EBP that considers language, culture, and context in a way that is compatible with the clients’ cultural patterns, meaning, and values. Appendix A provides a list of recommended practices.

<sup>3</sup> Per SAMHSA “community-defined evidence practices (CDEPs) are practices that communities have shown to yield positive results as determined by community consensus over time, and which may or may not have been measured empirically but have reached a level of acceptance by the community. Appendix A provides a list of recommended practices.

of prevention, harm reduction, treatment, and recovery support specifically aimed to address opioid use disorder, stimulant use disorder, and concurrent substance use disorders and aligned with Ohio's SOS 4.0 Grant goals, population of focus, and intended outcomes. OhioMHAS will award funding only to qualified Ohio ADAMH Boards and non-profit community organizations that provide prevention, harm reduction, treatment, and recovery support services and submit an application with all required materials outlined in this RFA. For the purpose of this RFA, the term “applicant” is defined as qualified Ohio ADAMH Boards and non-profit community organizations interested in this opportunity.

The terms “application” and “response” may be used interchangeably to indicate materials submitted to OhioMHAS by an applicant in order to be considered for award of a grant for services described in this RFA. The terms “grantee” and “selected applicant” may be used interchangeably in reference to an organization selected by OhioMHAS through this RFA for award.

## **1.2 Overview of the Project**

Ohio’s SOS 4.0 Grant aligns state level efforts to flatten Ohio’s death rate from opioid and other drug poisoning, increase access to harm reduction, emphasize peer recovery supports, expand evidence-based practices, and increase upstream prevention strategies to reach Ohio’s transitional aged youth and young adults (aged 16-25), adults, families, and communities. SOS 4.0 Grant will amplify Ohio’s community-driven system of care to promote lifelong recovery for all Ohioans and generations to come with intentional efforts to reach communities experiencing disproportionate implications of the overdose crisis. Embodying the OhioMHAS revitalized core values of the DeWine-Husted Administration, Ohio's SOS 4.0 Grant goals and objectives focus on service-oriented care, collaboration, value-driven services, innovative practices, and a strong sense of urgency to save lives and help Ohioans thrive. The grant will carry the momentum of historical State Opioid Response (SOR) cross-system collaborations to combat the overdose crisis and further accelerate progress in behavioral health equity.

The population of focus for this initiative includes transitional aged youth and young adults (ages 16-25), adults, families, and communities impacted by opioid use disorder, stimulant use disorder, and concurrent behavioral health conditions. Ohio’s SOS 4.0 Grant strategic investments prioritize evidence-based, culturally adapted, and community-defined evidence practices that foster social connectedness, recovery capital, and lasting wellness so that each Ohioan can reach their full potential. These investments will focus on populations experiencing high rates of opioid use disorder, stimulant use disorder, and overdose death, while prioritizing racial and ethnic minorities, pregnant women, youth and young adults, veterans and active-service military members, rural and Appalachian Ohioans, immigrants and non-English speakers, and members of the LGBTQIA+ community. These efforts will affirm an intersectionality

approach that addresses social vulnerability, behavioral health equity, and determinants of health affecting Ohioans across the lifespan.

Planned investments focus on the following service areas:

- **Treatment:** FDA-approved MOUD in Opioid Treatment Programs (OTPs), low-barrier settings, and criminal justice settings, in addition to other evidence-based practices
- **Community and Family Resiliency:** Evidence-based prevention to reach children, transitional aged youth, young adults, older adults, families, and special populations
- **Recovery Supports:** Recovery housing, peer support, and supported employment
- **Harm Reduction:** Medication safety, naloxone, and other FDA-approved overdose reversal medications through partnership with established Project DAWN sites

### 1.3 Issuing Bureau

OhioMHAS Bureau of Grants Administration

### 1.4 Background

OhioMHAS is the federally regulated single state authority (SSA) for behavioral health with extensive experience and demonstrated success in administering federal discretionary and formulary grants directly involving substance use disorder prevention, harm reduction, treatment, and recovery supports. OhioMHAS is a current recipient of SAMHSA's FY2022 State Opioid Response (SOR/SOS 3.0), which allowed the state to implement a laser-focused, data-driven approach to ensure Ohioans have immediate access to life saving drug reversal medications and drug testing tools. Ohio's SOS 3.0 grant investments are demonstrating impressive empirically validated results in all national outcome measures collected as part of the Government Performance and Results Act (GPRA) interviews.

OhioMHAS is a historical recipient of SAMHSA's FY2020 State Opioid Response SOR 2.0 and SAMHSA's FY2018 State Opioid Response SOR 1.0. These foundational efforts built an integrated community system of care that emphasized cross-collaboration between physical health, emergency health care, behavioral health care, criminal justice, and child welfare to address opioid use disorder throughout the state. FY2017 State Targeted Response to the Opioid Crisis Grant (Opioid STR) and FY2017 Targeted Capacity Expansion: Medication-Assisted Treatment – Prescription Drug and Opioid Addiction (MAT-PDOA) were foundational in introducing medication assisted treatment (MAT), medications for opioid use disorder treatment (MOUD), and Opioid Treatment Programs (OTPs) in Ohio's treatment landscape.

## 1.5 Scope of Work

The responsibilities of the selected applicants of this RFA will include provision of evidence-based, culturally adapted, and community-defined evidence practices in the care continuum of prevention, harm reduction, treatment, and recovery support specifically aimed to address opioid use disorder, stimulant use disorder, and concurrent substance use disorders and aligned with Ohio's SOS 4.0 Grant goals, population of focus, and intended outcomes.<sup>4</sup>

This “Umbrella” RFA has five content areas outlined below. Applicants are asked to apply to one or more content areas based upon capacity, interest, and experience. Applicants should address each proposed content area in the appropriate section of their application. There are multiple goals under each content area as described in Section 2.2; applicants should address one or more goal in each content area. Applicants responding to more than one content area shall submit a single application under this “Umbrella” RFA.

<b>(1) Evidence-Based Treatment and Harm Reduction</b>
<b>(2) Community and Family Resiliency (Prevention)</b>
<b>(3) Recovery Supports – Recovery Housing</b>
<b>(4) Recovery Supports – Peer Support and Services</b>
<b>(5) Recovery Supports – Supported Employment</b>

## 1.6 Eligible Applicants

OhioMHAS seeks applications from qualified Ohio ADAMH Boards and non-profit community organizations who meet the statutory requirements for licensed and/or certified community behavioral health services providers, private psychiatric hospitals, and residential Class 1, 2, and 3 facilities enacted into law through House Bill 33 (please visit OhioMHAS Licensure and Certification webpage for more information [here](#)). Only organizations that have the resources to complete the grant content areas described under “Scope of Work” should apply. Applicants must be a 501-C (3) or (4) non-profit or government entity.

All applicants and proposed sub-awardees or partners must have demonstrated a minimum of two years’ experience in delivering prevention, harm reduction, treatment, and recovery supports as required by SAMHSA.

Recovery housing applicants must support and/or provide participant access to evidence-based treatment including ALL forms of FDA-approved MOUD as required by SAMHSA

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<sup>4</sup> SAMHSA required and allowable activities are provided in Appendix B.

## 1.7 Award

OhioMHAS has released this “Umbrella” RFA with the intent of releasing awards which will support investments in evidence-based, culturally adapted, and community-defined evidence practices and programming aimed to address opioid use disorder, stimulant use disorder, and concurrent substance use disorders as outlined in the content areas. The number and amount of awards will be based on the availability of resources as well as the merits of the received proposals. Awards are anticipated to be announced for project implementation on or before 09/30/2024 and are contingent upon OhioMHAS receipt of an official Notice of Award (NOA) and budget approval from SAMHSA.

The projects awarded under this funding opportunity will be viewed as one-time only, for a one-year period of the SOS award. Applicants are advised that continuation funding beyond the award period should not be assumed and is not guaranteed.

Due to the one-time nature of these awards, applicants should prioritize projects that are one-time in nature (such as start-up costs or one-time purchases of equipment). For projects that will require ongoing support beyond the Year One Project Period, applicants should prioritize projects for which long-term funding sources can be identified to sustain operations. Please reference Section 1.10 Sustainability Plan.

All awarded projects are expected to satisfactory complete performance and implementation of deliverables, and complete accurate and timely submission of all reporting requirements set forth by OhioMHAS and SAMHSA for the following period:

+SOS Project Period Year One: September 30, 2024, to September 29, 2025

*+Year One performance period contingent upon OhioMHAS receipt of an official Notice of Award (NOA) and budget approval from SAMHSA. Subsequent funding will be based upon OhioMHAS priorities and/or levels of funding available, receipt of an official Notices of Award (NOA) and budget approval from SAMHSA.*

The actual dollar amounts awarded for selected applications will be based on the amount of state or federal funding made available to OhioMHAS, and the number of applications which are both qualified and selected for award. Applications are qualified if they are in accordance with the application submission requirements and earn at least the minimum score requirements for quality and completeness of applications, as specified in this RFA. Scoring and final selections will be completed by a team selected by OhioMHAS. To make its final selection of applications which will receive awards and to determine the size of those awards, OhioMHAS may, at its option, take into consideration application quality, reasonableness and appropriateness of the proposed budget, geographic diversity, local collaborations and funding available.

OhioMHAS may, at its option, make selections based in part on geographical and demographic criteria in order to provide a wide range of services around the state, and in both urban and rural areas. Applicants are encouraged to prepare and submit applications and budgets which are both practicable and capable of providing evidence-based, culturally adapted\*, and community-defined\* evidence practices in prevention, harm reduction, treatment, and recovery supports to address opioid use disorder, stimulant use disorder, and concurrent substance use disorders.

Applicants are to be aware that OhioMHAS may, at its sole discretion, negotiate with all technically qualifying applicants for a revised Project Budget, if the Project Budgets of all technically qualifying applicants are in excess of the available funding for this project.

### **1.8 Required Data Collection and Reporting**

All SOS 4.0 Grant award recipients must adhere to the required data collection, reporting, terms, and conditions set forth in by OhioMHAS and SAMHSA, in part to ensure SAMHSA can meet its obligations under the Government Performance and Results (GPRA) Modernization Act of 2010. Applicants must document their plan for data collection, monitoring, and reporting in each content area of their application which will be scored.

Award recipients delivering treatment and recovery support services will be required to collect GPRA interviews on the uniform data collection tool provided by SAMHSA. Recipients will collect GPRA interview with participants at intake of services, six-months following intake, and upon discharge from programming. GPRA service providers are expected to reach 100% intake rate compliance and at minimum 80% follow-up rate as required by SAMHSA.

Award recipients delivering prevention and harm reduction activities will be required to collect program-level data through the non-GPRA Reporting Tool and SOR-TOR Program Instrument quarterly. Both instruments capture numerical data on prevention programs, outreach activities to underserved populations, purchase, distribution, and use of allowable harm reduction supplies (naloxone, other opioid overdose reversal medications, and drug checking technologies as directed by SAMHSA), and education programs aimed to reach school-aged children, school administrators, first responders, and key community sectors on opioid and stimulant misuse.

Award recipients will be required to submit Programmatic Progress Reports (PPRs) at mid-year and end-of-year. The mid-year PPR will be due at the end of the second quarter and the end-of-year PPR will be due within 30 days of the end of the grant performance period.

The PPRs must include:

- Updates on budget or project changes (as applicable, prior approval required).
- Progress and outcome status achieving goals and objectives and implementing evaluation activities.
- Progress and outcome status implementing required activities, including accomplishments, challenges and barriers, and adjustments made or solutions implemented to address these challenges.
- Efforts to overcome problems encountered serving the population of focus.
- Progress and outcome status achieved in addressing the needs of underserved, diverse populations (e.g., racial and ethnic minorities, LGBTQIA+, older adults, etc.) and implementation of targeted interventions to promote behavioral health equity.
- Updates on fidelity monitoring plan (see Section 1.9).

Award recipients will be requested to document and share impact stories that capture individual successes and highlight key accomplishments of the grant at the individual and program level.

To support recipient data collection for award recipients, OhioMHAS partners with an external vendor with demonstrated experience in grant reporting and data collection.

## **1.9 Fidelity Monitoring Plan**

SAMHSA requires implementation of evidence-based, culturally adapted, and community-defined evidence practices. To ensure fidelity to these practices, OhioMHAS is requesting fidelity monitoring practices to aid programs to engage in ongoing quality improvement and understand the impact of the intervention(s) utilized. Applicants should document which evidence-based, culturally adapted, and/or community-defined evidence practice(s) they plan to utilize in each content area and describe how they will monitor fidelity throughout the performance period.

A list of recommended evidence-based practices is provided in Appendix A. Programmatic updates on the fidelity monitoring plan will be requested as part of the mid-year and end-of-year PPRs (see Section 1.8). Strongly recommended fidelity monitoring practices include facilitator fidelity logs, observations of program implementation, and observations of staff training on the curriculum and key program components. Data collection to calculate fidelity metrics are encouraged to promote ongoing implementation and impact evaluation. OhioMHAS will make available fidelity monitoring resources, consultation, and technical assistance at no-cost through the Ohio Substance Use Disorder Center of Excellence (SUD COE) and the Ohio Center of Excellence for Behavioral Health Prevention and Promotion (Prevention COE).



## **1.10            Sustainability Plan**

Sustainability refers to the organizational capacity to continue, maintain, and enhance programming, project goals, and objectives to reach the population of focus and achieve desired outcomes. Applicants should address the elements of sustainability they plan to implement throughout the project period to ensure programming can continue beyond Year One. Elements and activities of sustainability plan may include building ownership with stakeholders, establishing community partnerships, identifying program champions, reviewing and updating administrative policies and procedures, securing alternative funding, applying for future grant opportunities, etc. Applicants are asked to describe their sustainability plan in detail in each content area which will be scored.

## **1.11            Required Grantee Monitoring Activities**

All SOS 4.0 Grant award recipients are required to participate in OhioMHAS sponsored meetings throughout the grant project period, including but not limited to:

- Annual Start-Up Meeting
- Quarterly Regional Collaboration Monitoring Calls
- Monthly Contingency Management (CM) Monitoring Calls (award recipients using CM)
- Monthly MOMS Monitoring Calls (award recipients serving pregnant women and moms)
- Technical Assistance (TA) Calls and/or Monitoring Site Visits with OhioMHAS SOS 4.0 Grant staff

Additional information and a calendar of events will be shared with all SOS 4.0 Grant award recipients upon issuance of award.

## **SECTION II.    POSTING AND AWARD PROCESS INFORMATION**

### **2.1            Anticipated Timetable**

1. The RFA, accompanying documents, and all questions and answers will be posted on the OhioMHAS website at: <https://mha.ohio.gov/supporting-providers/apply-for-funding/funding-opportunities>
2. All questions must be submitted electronically no later than **09/16/2024 by 3:00 p.m. EDT** to the OhioMHAS RFA Frequently Asked Questions (FAQ) mailbox at: [SOS4@mha.ohio.gov](mailto:SOS4@mha.ohio.gov)
3. The FAQ mailbox above will close one week prior to the application due date (09/16/2024). No questions will be answered after the deadline. You may **NOT** contact any OhioMHAS staff member directly with questions regarding this RFA. Contacting staff

directly with questions could result in disqualification of an application.

4. Responses to all questions submitted to the FAQ mailbox will be posted to the OhioMHAS website at <https://mha.ohio.gov/supporting-providers/apply-for-funding/funding-opportunities> and will be updated as questions are received.
5. All applications must be submitted electronically to [SOS4@mha.ohio.gov](mailto:SOS4@mha.ohio.gov) by **09/23/2024 by 3:00 p.m. EDT**. Applicants are asked to apply to one or more content areas based upon capacity, interest, and experience. Applicants should address each proposed content area in the appropriate section of their application. There are multiple goals under each content area as described in Section 2.2; applicants should address one or more goal in each content area. Applicants responding to more than one content area shall submit a single application under this “Umbrella” RFA.
6. All applications will be evaluated according to the criteria set forth in the content area scoring section of this RFA. If entities submit applications for more than one content area, each content area will be scored separately.
7. Application grant notification letters will be sent approximately fourteen (14) days post grant application closure.
8. OhioMHAS agreements are not valid and effective until the issuance of an approved State of Ohio Notice of Sub-Award (NOSA). The NOSA will contain the start and end dates of the award.
9. The grantee(s) must be able to begin work no later than seven (7) working days after the time funds are encumbered and approved by the Office of Budget & Management. The grantee(s) will be notified by the OhioMHAS Agreement Manager when work may begin. Any work begun by the grantee prior to this notification may not be reimbursable by OhioMHAS.
10. All work must be completed and approved by the OhioMHAS Agreement Manager. All work must be completed by 3:00 p.m. of the last day of the programmatic period as it appears on the NOSA.

It is the responsibility of all applicants to check the webpage dedicated to this RFA on a regular basis for responses to all questions, as well as for any amendments, alerts, or other pertinent information regarding this RFA. OhioMHAS is not responsible for the accuracy of any information regarding this RFA that was obtained or gathered through a source different from the FAQ process described in this RFA. Should applicants experience technical difficulties accessing the OhioMHAS website where the RFA and its related documents are published, they may contact the OhioMHAS Helpdesk at [MHAHelpdesk@mha.ohio.gov](mailto:MHAHelpdesk@mha.ohio.gov) for guidance.

If an informational session is scheduled, the date, time, and meeting information will be posted as an accompanying document to this RFA for any organization interested in learning more about this funding opportunity.

**2.2 Grant Content Areas**

This “Umbrella” RFA has five content areas described in the following tables. Applicants are asked to apply to one or more content areas based upon capacity, interest, and experience. Applicants should address each proposed content area in the appropriate section of their application. There are multiple goals under each content area described below; applicants should address one or more goal in each content area. Applicants responding to more than one content area shall submit a single application under this “Umbrella” RFA.

All applications will be evaluated according to the criteria set forth in the content area scoring section of this RFA. Each content area will be scored separately. For each content area your entity is applying, please include the content area goal number and title in your application.

<b>(1) Evidence-Based Treatment and Harm Reduction</b>
<b>(2) Community and Family Resiliency (Prevention)</b>
<b>(3) Recovery Supports – Recovery Housing</b>
<b>(4) Recovery Supports – Peer Support and Services</b>
<b>(5) Recovery Supports – Supported Employment</b>

**(1) EVIDENCE-BASED TREATMENT & HARM REDUCTION CONTENT AREA**

**Improve local access to treatment for individuals in underserved communities at highest risk for overdose, opioid use disorder, stimulant use disorder, and concurrent substance use.**

<b>Goal 1.A</b>	<b>Increase access to all forms of FDA-approved MOUD statewide in Opioid Treatment Programs (OTPs) and other addiction specialty care settings.</b>
Objective	By September 29, 2025, Ohio will expand access to all forms of FDA-approved MOUD treatment. Settings include addiction specialty care facilities, outpatient, residential, low barrier, and primary care with a focus in rural, Appalachian, and other underserved communities.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Decreased number of Ohio’s overdose deaths</li> <li>• Increased access to SUD treatment and retention, improved recovery outcomes, and reduced emergency room visits due to opioid and stimulant use</li> </ul>

	<ul style="list-style-type: none"> <li>• Increased number of individuals successfully enrolled and completing treatment for substance use disorders</li> <li>• Decreased missed appointments by increasing participant transportation access</li> </ul>
Data Collection Requirement	Government Performance and Results Act (GPRA) Performance Progress Reports (PPR) Fidelity Monitoring

<b>Goal 1.B</b>	<b>Implement evidence-based treatment, culturally adapted, and community-defined evidence practices (CDEP) for individuals with OUD and stimulant use disorder.</b>
Objective	By September 29, 2025, OhioMHAS will partner to sustain and/or increase capacity for direct treatment.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Decreased number of Ohio’s overdose deaths</li> <li>• Increased numbers enrolled in evidence-based treatment</li> <li>• Decreased missed appointments by increasing participant transportation access</li> <li>• Increased participant retention</li> </ul>
Data Collection Requirement	Government Performance and Results Act (GPRA) Performance Progress Reports (PPR) Fidelity Monitoring

<b>Goal 1.C</b>	<b>Improve access to low barrier MOUD to reduce the risk of substance misuse and fatal overdose.</b>
Objective	By September 29, 2025, OhioMHAS will collaborate with emergency medical service (EMS) teams statewide to deploy buprenorphine and naloxone after a nonfatal overdose. Partners will implement low barrier models of care statewide.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Decreased number of Ohio’s overdose deaths</li> <li>• Increased linkages, referrals, and access to treatment</li> <li>• Expedited access to MOUD in low barrier settings</li> <li>• Improved recovery-based outcomes</li> </ul>
Data Collection Requirement	Government Performance and Results Act (GPRA) Performance Progress Reports (PPR) Fidelity Monitoring

<b>Goal 1.D</b>	<b>Increase medication storage safety for individuals enrolled in MOUD treatment to reduce risk of accidental poisoning.</b>
Objective	By September 29, 2025, partners will distribute at minimum 3,500 medication locking bags statewide to individuals enrolled in MOUD treatment when no other fund source is available.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Decreased number of accidental poisonings</li> <li>• Increased medication safety</li> </ul>
Data Collection Requirement	Non-GPRA Reporting Tool SOR-TOR Program Instrument Performance Progress Reports (PPR) Fidelity Monitoring

<b>Goal 1.E</b>	<b>Increase access to treatment for special populations (e.g., rural and Appalachian Ohioans, racial and ethnic minorities, youth and young adults, veterans and active service military members, immigrants and non-English speakers, and members of the LGBTQIA+ community).</b>
Objective	By September 29, 2025, OhioMHAS will partner to implement evidence-based treatment, culturally adapted, and community-defined evidence practices (CDEP) treatment programming for special populations, including connection and/or provision of psychosocial supports and peer recovery supports.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Decreased number of Ohio’s overdose deaths</li> <li>• Increased access to treatment</li> <li>• Increased participant retention</li> </ul>
Data Collection Requirement	Government Performance and Results Act (GPRA) Performance Progress Reports (PPR) Fidelity Monitoring

<b>Goal 1.F</b>	<b>Increase access to treatment for pregnant and post-partum women with Maternal Opiate Medical Supports (MOMS) programming to prevent maternal deaths during pregnancy and post-partum and promote recovery.</b>
Objective	By September 29, 2025, OhioMHAS will partner with community organizations to implement MOMS programming for pregnant and post-partum women and families impacted by opioid and stimulant use disorder.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Decreased number of maternal deaths</li> <li>• Reduced impacts of Neonatal Abstinence Syndrome (NAS)</li> <li>• Decreased number of Ohio’s overdose deaths</li> <li>• Increased engagement with women and families</li> <li>• Increased participant retention</li> </ul>
Data Collection Requirement	Government Performance and Results Act (GPRA) Performance Progress Reports (PPR) Fidelity Monitoring

**(2) COMMUNITY & FAMILY RESILIENCY (PREVENTION) CONTENT AREA**

**Evidence-based prevention, harm reduction, education, school-based programming, and strategic messaging aimed to reach children, transitional aged youth and young adults (ages 16-25), families, and special populations.**

<b>Goal 2.A</b>	<b>Expand evidence-based practice “PAX - The Good Behavior Game” (GBG) statewide with specialized focus on at-risk minority communities and underserved rural populations.</b>
Objective	By September 29, 2025, OhioMHAS will partner to expand PAX GBG into school districts with high rates of opioid and other drug overdose deaths.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Improved pro-social skills among children and youth</li> <li>• Decreased reports of child depression symptoms</li> <li>• Increased assessment scores of positive social and emotional developments for youth</li> <li>• Reduced substance use and suicidal ideation for youth</li> </ul>
Data Collection Requirement	Non-GPRA Reporting Tool SOR-TOR Program Instrument Performance Progress Reports (PPR) Fidelity Monitoring

<b>Goal 2.B</b>	<b>Increase psychosocial supports and protective factors and decrease substance use disorder among older adults.</b>
Objective	By September 29, 2025, OhioMHAS will partner to increase utilization of the following evidence-based programs for older adults: (1) Program to Encourage Active Rewarding Lives (PEARLS) with modifications focused on opioid and stimulant prevention, (2) Wellness Initiative for Senior Education (WISE), and (3) Screening, Brief Intervention and Referral to Treatment (SBIRT).
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Improved psychological well-being and social connectedness among older adults</li> <li>• Increased participant retention and engagement</li> <li>• Increased medication management and adherence</li> <li>• Decreased symptoms of co-occurring conditions</li> </ul>
Data Collection Requirement	Government Performance and Results Act (GPRA) Non-GPRA Reporting Tool SOR-TOR Program Instrument Performance Progress Reports (PPR) Fidelity Monitoring

<b>Goal 2.C</b>	<b>Increase certified family peer navigators to address social determinants of health among special populations (e.g., racial and ethnic minorities, youth and young adults, veterans and active service military members, rural and Appalachian Ohioans, immigrants and non-English speakers, and members of the LGBTQIA+ community).</b>
Objective	By September 29, 2025, OhioMHAS will partner to increase certified family peer navigators to engage special populations and address social determinants of health.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Increased access to the full continuum of care</li> <li>• Increased strategies to advance behavioral health equity</li> </ul>
Data Collection Requirement	Government Performance and Results Act (GPRA) Non-GPRA Reporting Tool SOR-TOR Program Instrument Performance Progress Reports (PPR) Fidelity Monitoring

<b>Goal 2.D</b>	<b>Engage at-risk children, transitional aged youth, and adults in underserved communities through early intervention efforts to reduce and eliminate risk factors and promote recovery among families.</b>
Objective	By September 29, 2025, OhioMHAS will partner to provide evidence-based prevention and early intervention efforts statewide to utilize Creating Lasting Families Connections (CLFC) curriculum with rural, Appalachian, and urban communities and other special populations.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Increased cross-agency coordination and implementation of CLFC curriculum</li> <li>• Expansion of CLFC curriculum in community-based and criminal justice settings</li> <li>• Improved access to evidence-based prevention and early intervention services for underserved communities, families, and special populations</li> <li>• Decreased substance use and improved knowledge of substance use disorder among participants of CLFC</li> <li>• Enhanced family connections</li> </ul>
Data Collection Requirement	Non-GPRA Reporting Tool SOR-TOR Program Instrument Performance Progress Reports (PPR) Fidelity Monitoring

<b>Goal 2.E</b>	<b>Increase awareness of treatment options and availability for transitional aged youth (ages 16-25) and young adults to reduce the risk of opioid and stimulant misuse.</b>
Objective	By September 29, 2025, OhioMHAS will partner to create and sustain social media and community education campaigns that provide opioid use disorder and stimulant use disorder prevention education and linkages to services, specifically aimed to reach transitional aged youth (ages 16-25) and young adults.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Increased youth education, awareness, and prevention of opioid and stimulant use disorder</li> <li>• Increased number of transitional aged youth linked to treatment</li> </ul>
Data Collection Requirement	Non-GPRA Reporting Tool SOR-TOR Program Instrument Performance Progress Reports (PPR) Fidelity Monitoring



<b>Goal 2.F</b>	<b>Increase awareness of the opioid crisis to reduce overdose deaths and opioid misuse statewide.</b>
Objective	By September 30, 2025, OhioMHAS will partner to cohost at least one Overdose Awareness Day Event in each of the ADAMH Board catchment areas.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Increased community-wide education about opioid and stimulant use disorders</li> <li>• Expanded provision of educational materials statewide</li> <li>• Improved linkages to treatment</li> <li>• Increased distribution of harm reduction supplies, including naloxone and other FDA-approved overdose reversal medications and fentanyl test strips</li> </ul>
Data Collection Requirement	Non-GPRA Reporting Tool SOR-TOR Program Instrument Performance Progress Reports (PPR) Fidelity Monitoring

### **(3) RECOVERY SUPPORTS – RECOVERY HOUSING CONTENT AREA**

**Evidence-based recovery support practices including linkage to resources, temporary housing supports, and certified Recovery Housing Residences.**

<b>Goal 3.A</b>	<b>Increase Recovery Housing Residences in Ohio achieving national body certification to increase the number, capacity, and quality of residences in the state.</b>
Objective	By September 29, 2025, OhioMHAS will partner to increase the quality and quantity of certified Recovery Housing Residences following national standards. <sup>5</sup>
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Increased number of housed individuals</li> <li>• Decreased illicit substance use among participants</li> <li>• Decreased recidivism rates and criminal activity</li> <li>• Increased employment for participants</li> </ul>
Data Collection Requirement	Government Performance and Results Act (GPRA) Performance Progress Reports (PPR) Fidelity Monitoring

<sup>5</sup>Recovery housing organizations that apply for SOS 4.0 Grant funding must support and/or provide participant access to evidence-based treatment including ALL forms of FDA-approved MOUD as required by SAMHSA.

<b>Goal 3.B</b>	<b>Utilizing SAMHSA Recovery Housing Best Practices, increase the number of individuals obtaining recovery housing, specifically young adults and adults with opioid use disorder, stimulant use disorder, and co-occurring behavioral health conditions.</b>
Objective	By September 29, 2025, OhioMHAS will partner to increase the capacity for recovery housing in Level 1 homes; increase the number of certified Recovery Housing Residences that serve racial and ethnic minorities, faith-based groups, LGBTQIA+ community, and pregnant women; increase the number of criminal justice navigators in-reaching to prisons and jails to link to recovery housing upon release.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Increased access to recovery housing</li> <li>• Increased certified faith-based recovery housing</li> <li>• Successful long-term community recovery</li> <li>• Decreased recidivism rates</li> <li>• Successful linkage to permanent housing</li> </ul>
Data Collection Requirement	Government Performance and Results Act (GPRA) Performance Progress Reports (PPR) Fidelity Monitoring

<b>Goal 3.C</b>	<b>Increase transitional and permanent housing and supports for individuals with opioid use disorder, stimulant use disorder, and co-occurring conditions.</b>
Objective	By September 29, 2025, OhioMHAS will partner to provide access and support to permanent housing for individuals exiting behavioral health housing and/or transitional housing onboarding to permanent recovery housing through connection to landlords, assistance with security deposits and first month rent ( <i>see Appendix B for more details on allowable expenses</i> ).
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Increased recovery supports and housing</li> <li>• Increased number of individuals obtaining permanent housing</li> <li>• Decreased number of individuals being discharged to homelessness</li> </ul>
Data Collection Requirement	Government Performance and Results Act (GPRA) Performance Progress Reports (PPR) Fidelity Monitoring

<b>Goal 3.D</b>	<b>Expand homeless outreach with individuals experiencing opioid use disorder, stimulant use disorder, and co-occurring conditions.</b>
Objective	By September 29, 2025, OhioMHAS will partner to increase the number of outreach specialists to work with individuals experiencing opioid use disorder, stimulant use disorder, and homelessness, including in rural areas. Increase OUD/SUD street outreach to transitional aged youth.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Increased outreach and linkage to services</li> <li>• Expanded outreach programs in rural communities</li> </ul>
Data Collection Requirement	Government Performance and Results Act (GPRA) Performance Progress Reports (PPR) Fidelity Monitoring

**(4) RECOVERY SUPPORTS – PEER SUPPORT AND SERVICES CONTENT AREA**

**Evidence-based peer support and recovery services that will enhance services at the local level and increase accessibility of supports that reach individuals where they are, including re-entry and jail-based settings.**

<b>Goal 4.A</b>	<b>Increase recovery supports access and capacity for individuals with opioid use disorder, stimulant use disorder, and co-occurring conditions.</b>
Objective	By September 29, 2025, OhioMHAS will partner to provide recovery supports statewide and increase certified Recovery Community Organizations (RCOs).
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Increased access and retention in recovery support activities</li> <li>• Enhanced recovery supports programming</li> <li>• Sustained existing RCOs and expand RCOs statewide</li> <li>• Increased recovery capital</li> </ul>
Data Collection Requirement	Government Performance and Results Act (GPRA) Performance Progress Reports (PPR) Fidelity Monitoring

<b>Goal 4.B</b>	<b>Increase peer recovery efforts that engage culturally diverse and underserved populations experiencing opioid use disorder, stimulant use disorder, and co-occurring conditions.</b>
Objective	By September 29, 2025, OhioMHAS will partner to increase peer support programming statewide, prioritizing services for culturally and linguistically services for diverse and underserved populations.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Increased peer support capacity</li> <li>• Enhanced peer support programming</li> <li>• Expanded peer support programming to increase culturally and linguistically appropriate services</li> <li>• Increased recovery capital</li> </ul>
Data Collection Requirement	Government Performance and Results Act (GPRA) Performance Progress Reports (PPR) Fidelity Monitoring

<b>Goal 4.C</b>	<b>Increase availability of peer supporters statewide to serve individuals with opioid use disorder, stimulant use disorder, and co-occurring conditions.</b>
Objective	By September 29, 2025, OhioMHAS will partner to pilot peer support internships (i.e. in-field coaching) statewide in culturally and geographically diverse communities.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Expanded peer services in multiple settings</li> <li>• Increased peer support workforce and in-field coaching</li> <li>• Increased recovery capital</li> </ul>
Data Collection Requirement	Non-GPRA Reporting Tool and SOR-TOR Program Instrument Performance Progress Reports (PPR) Fidelity Monitoring

<b>Goal 4.D</b>	<b>Increase and advance recovery knowledge in Ohio communities.</b>
Objective	By September 29, 2025, OhioMHAS will partner to host local recovery events, focused on increasing recovery knowledge, referrals for recovery supports, harm reduction activities, and education about opioid and stimulant use disorder recovery.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Decreased number of Ohio’s overdose deaths</li> <li>• Increased local community capacity</li> <li>• Increased number of individuals reached through recovery activities</li> <li>• Improved knowledge of opioid and stimulant use disorder recovery</li> </ul>
Data Collection Requirement	Government Performance and Results Act (GPRA) Performance Progress Reports (PPR) Fidelity Monitoring

<b>Goal 4.E</b>	<b>Increase Collegiate Recovery Communities (CRCs) and expand awareness of recovery friendly environments for transitional aged youth and young adults (ages 16-25).</b>
Objective	By September 29, 2025, OhioMHAS will partner to support collaboration with existing CRCs in Ohio to increase reach to transitional aged youth and young adults.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Expanded CRCs in Ohio</li> <li>• Improved recovery services for transitional aged youth and young adults</li> </ul>
Data Collection Requirement	Government Performance and Results Act (GPRA) Performance Progress Reports (PPR) Fidelity Monitoring

<b>Goal 4.F</b>	<b>Increase access to harm reduction activities and resources.</b>
Objective	By September 29, 2025, Ohio will partner to add and increase access to naloxone vending machines and NaloxBoxes statewide.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Decreased number of Ohio’s overdose deaths</li> <li>• Accessibility to allowable harm reduction activities</li> </ul>
Data Collection Requirement	Non-GPRA Reporting Tool SOR-TOR Program Instrument Performance Progress Reports (PPR) Fidelity Monitoring

**(5) RECOVERY SUPPORTS – SUPPORTED EMPLOYMENT CONTENT AREA**

**Evidence-based supported employment focusing on improving financial literacy, increasing workforce-based employment programming, and ensuring recovery friendly workplaces are promoted throughout Ohio.**

<b>Goal 5.A</b>	<b>Increase individuals’ understanding of work incentives counseling and financial literacy.</b>
Objective	By September 29, 2025, OhioMHAS will partner to provide participant access to work incentive counseling and financial literacy education.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Increased recovery support programming</li> <li>• Increased participant retention and engagement</li> <li>• Improved participant knowledge of financial literacy</li> </ul>
Data Collection Requirement	Government Performance and Results Act (GPRA) Performance Progress Reports (PPR) Fidelity Monitoring

<b>Goal 5.B</b>	<b>Increase evidence-based supported employment statewide.</b>
Objective	By September 29, 2025, Ohio will partner to implement employment/education navigators statewide, serving individuals in evidence-based supported employment.
Client/System Outcomes	<ul style="list-style-type: none"> <li>• Enhanced supported employment</li> <li>• Increased local capacity of peer navigators</li> <li>• Increased linkages to gainful employment</li> </ul>
Data Collection Requirement	Government Performance and Results Act (GPRA) Performance Progress Reports (PPR) Fidelity Monitoring

### **SECTION III. APPLICATION GUIDELINES**

The applicant must submit electronic response to [SOS4@mha.ohio.gov](mailto:SOS4@mha.ohio.gov). A copy of the grant application must be received by OhioMHAS no later than **09/23/2024 by 3:00 p.m. EDT**. Applications received after this date and time will not be reviewed. Materials mailed or submitted separately from the application packet will not be accepted or added to the application/proposal by staff of OhioMHAS. Faxed or mailed applications will not be accepted. Costs incurred in the preparation of this application are to be borne by the applicant; OhioMHAS will not contribute in any way to the costs of the preparation.

#### **3.1 Page Limit and Formatting**

The page limit for this application is no more than 10 pages, single spaced, one-inch margins, 12-point Times New Roman. The 10 pages do not include the Face Sheet, Abstract, Budget Expenditure Form and Budget Narrative. Applicants should submit their application and all attached documents in Adobe PDF whenever possible.

Please note that if the application is longer than 10 pages, OhioMHAS will evaluate the application based upon the first 10 pages, and the remainder of the application may be disregarded.

#### **3.2 Application Components**

##### **A. Face Sheet:**

- a. Name of applicant organization, address, phone number
- b. Executive director name and contact information
- c. Project Director name and contact information
- d. Fiscal officer name and contact information
- e. Applicant's federal tax ID and valid SAM.gov number
- f. Specify whether applicant is a 501 C (3) or (4) non-profit or government entity
- g. Title of this RFA
- h. Amount of funding requested.

- B. Abstract:** In 400 words or less, the abstract should include the project name, population(s) to be served, a summary of services and supports to be implemented, the project goals and measurable objectives, number of individuals projected to be served, and the total amount of funding requested. In the first five lines or less of the abstract, write a summary of your project that can be used in publications, reports to the Governor's Office, or press releases if your application is funded.

- C. Scope of the Work/Project Description:** Provide a detailed description of the proposed approach to completing each selected goal(s) in each proposed content area and timeline for completing each deliverable. In the project description for each content area, please also include the following information:
- a. Population(s) of Focus:** Identify and describe your population(s) of focus and the geographic catchment area where your organization and/or sub-awardee(s) will deliver services that align with the intended population of focus and scope of the grant.
  - b. Number to be served:** Please identify the number of individuals projected to be served.
  - c. National Outcome Measures (NOMs):** Applications must include a description of the project goals and measures to be achieved during the programmatic project period. NOMs collected in the GPRA include abstinence from illicit substances, housing, employment and education, criminal justice involvement, and social connectedness.
  - d. Staffing Plan:** The applicant's response must identify by position and name, the staff who will be key to the project's success. Include qualifications, the amount of FTE per position, and the service providers' level of subject matter expertise implementing the proposed services and supports.
  - e. Sub-Awardee qualifications and staffing plan (if applicable)**
  - f. Adherence to the National CLAS Standards:**
    - 1. Link to National CLAS Standards  
<https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53>
    - 2. How diverse cultural health beliefs and practices will be implemented in a culturally competent and trauma informed manner
    - 3. How preferred languages will be honored
    - 4. How to meet health literacy and other communication needs of all sub-populations identified in the proposal
  - g. Data Collection and Reporting Plan (see Section 1.8)**
  - h. Fidelity Monitoring Plan (see Section 1.9)**
  - i. Sustainability Plan (see Section 1.10)**
- D. Prior Experience and Applicant Qualifications:** Applicants must demonstrate prior experience successfully implementing complex subject projects related to the subject matter. All applicants and proposed sub-awardees or partners must have demonstrated a minimum of two years' experience in delivering prevention, harm reduction, treatment, and recovery supports as required by SAMHSA. In addition to demonstrating prior experience, please provide a written statement certifying that your organization and all partnering service provider organizations will meet the two-year experience requirement and applicable licensing, accreditation, and certification requirements as



required by SAMHSA and OhioMHAS.

- E. Proposed Implementation Approach:** Applications must include a discussion of the evidence-based, culturally adapted, and/or community-defined evidence practices that will be implemented during the project. Additionally, they must provide a realistic timeline for each month of the project. The timeline should include objectives that are SMART (specific, measurable, achievable, relevant, and time-bound). All key dates, key activities, and responsible personnel should be outlined in detail and align with the proposed phases of the project period.
- F. Outcome Measures:** Applications must include a description of the following:
- a. Project goals and outcomes to be achieved
  - b. Data collection and reporting plan
  - c. Fidelity monitoring plan
  - d. Sustainability plan
  - e. Detailed methodology for measuring progress
  - f. Benchmarks that provide an indication of standards to be achieved
  - g. Methodology for tracking progress achievements or shortfalls
  - h. Methodology for analyzing and correcting project errors
- G. Budget Expenditure Form and Budget Narrative**
- a. Applications must include a Budget Expenditure Form and Budget Narrative that identifies all costs as described in the RFA on the provided template. Costs must be allowable, reasonable, realistic, and within scope.
  - b. Include a signed Notice of Award/Sub-awardee Statement of Assurances including budget and budget narrative for each sub-awardee on the provided template.
  - c. Include the Budget Checklist which can be found on the OhioMHAS Funding Opportunity Page.

By submitting a budget expenditure form and budget narrative, the Applicant is confirming that the services and deliverables outlined within this RFA are encompassed within the budget expenditure form and budget narrative.

The Applicant acknowledges that if their application is chosen as a result of this RFA, the Applicant will not be entitled to increase the original application's cost breakdown. OhioMHAS relies on the budget expenditure form and budget narrative to adequately evaluate and determine awards, and no Applicant shall be entitled to additional funds outside of the cost proposal.

#### **SECTION IV. CRITERIA FOR APPLICATION SCORING**

#### **4.1 Scoring Applications**

OhioMHAS will enter into agreement(s) with a grantee(s) that best demonstrates the ability to meet requirements as specified in the RFA. Applicants submitting a response will be evaluated based on the capacity and experience demonstrated in their Application and Project Budget. All applications will be reviewed and scored by a team from OhioMHAS. Applicants responding to more than one content area shall submit a single application under this “Umbrella” RFA with each content area clearly defined. Each content area will be scored individually. For each content area your entity is applying, please include the content area goal number and title in your application. Please see the scoring rubric at the end of this document.

OhioMHAS is under no obligation to issue an agreement as a result of this solicitation if, in the opinion of OhioMHAS and the Scoring Team, none of the applications are responsive to the objectives and needs of OhioMHAS. OhioMHAS reserves the right not to select any application should OhioMHAS decide not to proceed.

OhioMHAS may review the highest-ranking Applicants and/or its key team members to ensure that the Applicant is responsible. The award may not be made to an Applicant that is determined not to be responsible. OhioMHAS’s determination of an Applicant’s responsibility may include the following factors: the experience of the Applicant and its key team members; past conduct and past performance on previous contracts or grants; ability to execute this project properly; and management skill. OhioMHAS will make such determination of responsibility based on the Applicant’s Application, reference evaluations, and any other information OhioMHAS requests or determines to be relevant.

Additionally, OhioMHAS reserves the right to review the Applicant’s previous work or work product prior to awarding a grant.

All applications and any other documents submitted to OhioMHAS in response to any solicitation shall become the property of OhioMHAS. This RFA and, after the selection of an applicant for award, any applications received in response to a solicitation that have been opened, reviewed and considered by OhioMHAS are deemed to be public records pursuant to ORC 149.43. For purposes of this section, the term “application” shall mean both the Technical Application and the Project Budget submitted by an applicant and any attachments, addenda, appendices, resumes, letters of recommendation, or sample products.

## **4.2**            **Criteria for Scoring**

All applications will be scored based on the available points per section.

## **4.3**            **Award**

1. Awards are expected to be announced during the week of 10/01/2024
2. All grant funds must be expended by 09/29/2025

**Deadline for submission of all applications is 09/23/2024 by 3:00 p.m. EDT  
and must be submitted to [SOS4@mha.ohio.gov](mailto:SOS4@mha.ohio.gov)**

## **SECTION V.    CONDITIONS AND OTHER REQUIREMENTS**

\* According to requirements of Ohio Revised Code (ORC) 126.07, OhioMHAS agreements are not valid and enforceable until the Office of Budget and Management (OBM) certifies the availability of appropriate funding, as indicated by the approval of the Purchase Order (PO). The selected applicant(s) may neither perform work nor submit an invoice for payment for work performed for this project for any time period prior to the PO approval date. The OhioMHAS Agreement Manager will notify the selected applicant(s) when the requirements of ORC Section 126.07 have been met.

\*\* Subject to all applicable approvals, the agreement period is expected to run from approximately 09/30/2024 through 09/29/2025.

## **5.1**            **Public Release of Records**

Public release of any evaluation or monitoring reports funded under this agreement will be made only by OhioMHAS. Prior to public release of such reports, OhioMHAS must have at least a thirty (30) day period for review and comment.

## **SECTION VI.    ATTACHMENTS AND THEIR USES**

- A. Required Applicant Information and Certifications (to be completed & included in the application as specified)
- B. Assurances
- C. Application Score Sheet (for applicant reference purposes)
- D. Project Budget Form (to be completed and included in cost application packet as specified in Section 3.2, B.)

- E.** Appendix A: Evidence-based, culturally adapted, and community-defined evidence practices (for applicant reference purposes)
- F.** Appendix B: List of SAMHSA Required and Allowable Activities (for applicant reference purposes)
- G.** Appendix C: SAMHSA Contingency Management Requirements

## Scoring Rubric

Application Score Sheet (for applicant reference purposes).

Organization: \_\_\_\_\_

Content Area(s) Selected: \_\_\_\_\_

<b>(1) Evidence-Based Treatment and Harm Reduction</b>
<b>(2) Community and Family Resiliency (Prevention)</b>
<b>(3) Recovery Supports – Recovery Housing</b>
<b>(4) Recovery Supports – Peer Support and Services</b>
<b>(5) Recovery Supports – Supported Employment</b>

Review Criterion	Available Points	Points Scored
<b>Requirements:</b> Demonstration that applicant meets the minimum requirements to apply for the grant. Applications that do not meet the minimum requirements will not be scored.	N/A	
<b>Face Sheet</b>	N/A	
<b>Abstract</b>	5	
<b>For each content area proposed, please specify Scope of Work/Project Description Components:</b>		
<b>Population(s) of Focus &amp; Number to be Served:</b> Identify and describe your population(s) of focus and the geographic catchment area where your organization and/or sub-awardee(s) will deliver services that align with the intended population of focus and scope of the grant.	20	
<b>National Outcome Measures (NOMs):</b> Applications must include a description of the project goals and measures to be achieved during the programmatic project period.	15	
<b>Staffing Plan:</b> Include qualifications, the amount of FTE per position, and the service providers' level of subject matter expertise implementing the proposed services and supports. <b>Sub-Awardee Qualifications and Staffing Plan</b> (if applicable)	5	

<b>Adherence to the National CLAS Standards</b>	10	
<b>Prior Experience and Applicant Qualifications:</b> Demonstration that applicant has prior experience successfully implementing complex subject projects related to the subject matter. Includes required written statement of certification as required by SAMHSA.	5	
<b>Proposed implementation approach:</b> Applications must include a discussion of the evidence-based, culturally adapted, and/or community-defined evidence practices that will be implemented during the project. Includes a realistic timeline for each month of the project.	15	
<b>Outcome Measures:</b> Applications must include a description of the following: a. Project goals and outcomes to be achieved b. Data collection and reporting plan c. Fidelity monitoring plan d. Sustainability plan e. Detailed methodology for measuring progress f. Benchmarks that provide an indication of standards to be achieved g. Methodology for tracking progress achievements or shortfalls h. Methodology for analyzing and correcting project errors	30	
<b>Budget Expenditure Form and Budget Narrative:</b> All costs of the project are on the provided template. Costs are allowable, reasonable, realistic, and within scope. Statement of Assurance signed. Budget Checklist provided.	N/A	
<b>Total Score</b>	100	

**OhioMHAS Official Use Only**

Comments: \_\_\_\_\_

Printed Name of Reviewer: \_\_\_\_\_

Signature of Reviewer: \_\_\_\_\_

Date: \_\_\_\_\_