



**State Opioid Response (SOR) Grant**

**Application Package for  
Primary Prevention Services**

**Overview**

**Project Summary**

The South Carolina Department of Alcohol and Other Drug Abuse Services (DAODAS) State Opioid Response (SOR) Grant will provide up to $900,000.00 to fund approximately 18 single-year primary prevention sub-awards to organizations that serve South Carolina communities. The purpose of the sub-awards is to support implementation of evidence-based environmental and educational primary prevention strategies in an effort to prevent opioid and stimulant misuse, and to reduce the consequences of opioid and stimulant misuse in South Carolina.

Strategies may be implemented for the general population, or may be implemented for targeted populations. The planned sub-award period is **October 1, 2021, to August 31, 2022**. The available funding level per award is up to $50,000.00.

**Funding Source**

The funding source is the Substance Abuse and Mental Health Services Administration (SAMHSA). The State Opioid Response (SOR) Grant is administered by DAODAS. The CFDA number is 93.788.

**Eligibility for Funding**

Organizations eligible to apply for funding include: local municipalities (town, city, or county, to include law enforcement agencies, coroner’s offices, school districts, etc.), colleges and universities, substance abuse prevention agencies and coalitions, faith communities, youth-serving organizations, senior citizen-serving organizations, veteran-serving organizations, healthcare organizations, and service organizations that hold 501c3 status. Other organizations may be eligible to apply. Any questions concerning eligibility can be submitted during the specified question period *(see below)*, and DAODAS will respond to ensure your organization is eligible prior to submission of your application.

**Question Period**

Prospective applicants can pose any questions concerning the application requirements to DAODAS between August 2 and August 13, 2021. Question(s) must be e-mailed to application@daodas.sc.gov. A complete summary of all questions received by August 10 – and their answers – will be posted on the DAODAS website home page (www.daodas.sc.gov) no later than the close of business on August 17, 2021.

**Due Date**

Applications are due to DAODAS *(see application requirements on Page 5)* **by close of business (5:00 p.m.) on August 27, 2021**. No late applications will be moved forward to the review/scoring phase. Late applications are those that arrive via e-mail any time after 5:00 p.m. on August 27, 2021.

**Review Process**

Applications will be reviewed and scored using the following criteria:

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

**Scoring Criteria**

Technical Proposal (25 points)

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

Qualifications and Experience (15 points)

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

Budget (10 points)

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

**Descriptors for Scoring Criteria**

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

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

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

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

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

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

**Notification of Awards**

Final awards will be posted on the DAODAS website homepage ([www.daodas.sc.gov](http://www.daodas.sc.gov)) on or before **September 20, 2021. All posted awards are considered final.**  All non-funded applicants will receive a summary report with evaluative comments for the summited application no later than December 10, 2021.

**Contract Period**

Contracts for funded applicants will be issued by DAODAS on **October 1, 2021**. The contract period is **October 1, 2021 to August 31, 2022**. **All services must be rendered and all goods purchased must be received by this date.** Funds will be reimbursed for expenses on a monthly basis contingent upon meeting the reporting requirements outlined in the next section. **Final budget reimbursement requests must be made no later than September 12, 2022.**

**Reporting Requirements**

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

**Financial Guidelines**

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

## Defining “Supplement” and “Supplant”

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

**Unallowable Expenditures**

SAMHSA grant funds may not be used to:

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

**NOTE:** A treatment or prevention provider may give up to $30.00 in non-cash incentives to individuals to participate in required data-collection follow-up. This amount may be paid for participation in each required follow-up interview.

* Pay for meals, which are generally unallowable unless they are an integral part of an education strategy such as the Strengthening Families program. Grant funds may be used to pay for light snacks, not to exceed $3.00 per person per day.
* Purchase supplies, which are items costing less than $5,000.00 per unit, often having one-time use.

**Difference Between a Contract and a Consultant**

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

**Application Requirements**

All applications must meet the requirements listed below.

| **Requirements** | **Description** |
| --- | --- |
| Submit an application that addresses misuse of and/or the consequences related to the two types of substances eligible for funding. The application must be submitted by the due date and time stated in the “Due Date” section on Page 1. | * Submit an application to:  1. reduce the misuse of opioids and/or stimulants; *and/or* 2. prevent or reduce the consequences of opioid and stimulant misuse.  * Examples of **opioid** drugs are: Vicodin, oxycodone, codeine, morphine, heroin, fentanyl, etc. * Examples of **stimulant** drugs are: Adderall, Ritalin, Didrex, cocaine, methamphetamine, etc. |
| Complete the Application Cover Letter, Application Information, Technical Proposal, Qualifications and Experience, and Budget sections, and then **submit the documents as a single PDF** to the e-mail address provided on Page 12. | * Complete an Application Cover Letter to indicate your organization’s intent to apply for a sub-award. * Complete the Application Information section as requested, to share important contact information, other details about your organization, and the desired funding amount. * Complete the Technical Proposal and include the required content. * Complete the Qualifications and Experience section and include the required content. * Complete the Budget, using the template provided, and include the required content. |
| Adhere to the maximum page lengths where indicated. | * The Technical Proposal must be no longer than eight pages, the Qualifications and Experience section must be no longer than four pages, and the Budget must be no longer than four pages. Follow the instructions for documents that should be included as appendices (MOU/MOAs and Community Survey). |
| Use the Pre-Approved Strategy List (Pages 6-11) to identify and select a minimum of two primary prevention strategies to implement. | * Select two or more strategies that your organization proposes to implement. Ensure that each selected strategy corresponds with data-supported needs that are included in the Technical Proposal’s Statement of Need. * The Pre-Approved Strategy List also includes a list of items that funds can be used to support implementation of sub-awards. Required purchases per strategy are printed in bold. Please ensure that required purchases for any strategies selected are clearly included in the Budget. |

**State Opioid Response (SOR) Grant Application Package for Primary Prevention Services**

**Pre-Approved Strategy List**

# Data and Needs Assessment Strategies

| **Types of Strategies** | **Intended Audience** | **Allowable Uses of Funds** |
| --- | --- | --- |
| * Identifying and mapping hospitals, doctor’s offices, and pharmacies that have permanent prescription drug drop boxes available to the general public * Mapping locations where permanent drop boxes are located * Mapping of the number of locations distributing Deterra or similar disposal products * Scan/mapping of opioid and/or stimulant drug issues and resources available in the community * Tracking advertising of prescription drug disposal locations/Take Back events | General Population | * Training costs related to building capacity to complete community scans and mapping * Mileage reimbursement * Electronic devices such as laptops and tablets * Office supplies, gloves, masks, hand sanitizer * Cost for personnel or contractual staff to complete community scans and mapping * Non-cash incentives for volunteers |
| * Data tracking and/or visualization software to build capacity to identify problem areas related to opioid and stimulant use, and to make solution-focused decisions | General Population | * Cost of licensing fees for software * Cost for personnel or contractual staff to take current data and populate a tracking system (ODMAP, etc.) * Cost related to developing memorandum of agreement or understanding (MOA/MOU) * Training costs related to use of program/software * Creation of printed materials to disseminate to partner agencies or the general public |

# Safe Medication-Disposal Strategies

| **Types of Strategies** | **Intended Audience** | **Allowable Uses of Funds** |
| --- | --- | --- |
| * Drug Take Back events in partnership with law enforcement agencies to allow community members to bring and dispose of unwanted prescription medications at designated locations, such as police departments, pharmacy parking lots, retail store parking lots, etc. | General Population | * **Advertising/promoting the event** * Providing overtime pay for law enforcement officers to staff the event (unless you can demonstrate that law enforcement officers are volunteering their time) * Non-cash incentives for people who turn in medication (less than $10.00 in value) * Materials to host event such as tent, table, gloves, masks, hand sanitizer, container to collect the medications, etc. |
| * Distributing and making available drug deactivation bags/buckets (Deterra, DisposeRx, etc.) for community organizations, partners, and individuals | Law Enforcement, Coroners,  General Population | * **Deterra Drug Deactivation Systems, DisposeRx, etc.** * **Advertising/promoting the safe medication-disposal product** * Gloves, masks, hand sanitizer * Storage container for products * Recognition activities for participating community partners |
| * Prescription drug drop boxes (installation of boxes and/or promotion of current box locations) | General Population | * **Purchase of prescription drug drop box** * **Advertising/promoting the prescription drug drop box** * Non-cash incentives for people who turn in medication (less than $10.00 in value) * Resources to maintain the drop box, such as inner liners, reverse distributor contracts, gloves, masks, hand sanitizer, etc. |
| * Sharing messages with organizations, businesses, and community members to promote safe use and safe disposal of unwanted opioid medications | General Population | * **Public awareness campaign – local branding of statewide “Just Plain Killers” campaign (**[**www.justplainkillers.com**](http://www.justplainkillers.com)**) – placing ads on local cable channels; radio PSAs; local billboards in high-need areas; information packets for dentists, doctors, pharmacists, etc.** |

# Education and Awareness Strategies

| **Types of Strategies** | **Intended Audience** | **Allowable Uses of Funds** |
| --- | --- | --- |
| * Curriculum- and activity-based programs that have a focus on prescription drugs and stimulants: * [Operation Prevention](https://www.operationprevention.com/) * [Botvin’s Life Skills](https://www.blueprintsprograms.org/programs/5999999/lifeskills-training-lst/) * [SPORT Prevention Plus Wellness](https://www.blueprintsprograms.org/programs/477999999/sport-prevention-plus-wellness/) * [Generation Rx](https://generationrx.org/toolkits/) * [Strengthening Families](https://strengtheningfamiliesprogram.org/) * [Communities That Care](https://www.blueprintsprograms.org/programs/444999999/communities-that-care/) * [PROSPER](https://www.blueprintsprograms.org/programs/408999999/prosper/) | Youth, Families | * **Curriculum materials for trainers and students** * Trainer education costs * Trainer fees * Office supplies * Incentives for participants |
| * Geofencing opioid and stimulant prevention messages   *(A geofence is a perimeter boundary created around the location of a smartphone or other device. It is a location-based service in which an app or other software uses GPS, RFID, Wi-Fi or cellular data to trigger a pre-programmed message to target users who enter their area.)* | Multiple Targeted Populations | * **Message development and graphics** * **Dissemination of messages via geofencing technology providers** |
| * Opioid and stimulant Drug-Free Workplace education and materials | Organizations, Businesses | * Print and electronic materials and speaking engagements to promote opioid-free workplaces * Information on and linkage to Employee Assistance Programs |
| * Opioid- and stimulant-related educational programs or information-sharing for realtors, hospice programs, individuals caring for elderly family members at home, older adults, adults, college students, teenagers, patients, elementary school students, etc. | Realtors, Nurses, Social Workers, Caregivers, College Students, Adults,  Older Adults, Youth, Patients, etc. | * Print materials * Development and dissemination of promotional materials on social media and other information-sharing platforms |
| * Opioid and stimulant stigma reduction to promote messages that clarify opioid use disorder and other substance use disorders are diseases and not moral failures or weaknesses | General Population | * Print materials * Media campaigns and social media campaigns * Speaking engagements |
| * Professional education for healthcare, behavioral health, law enforcement, and education professionals, etc., related to opioids and stimulants, such as Drug Impairment Training for Educational Professionals (DITEP), Advanced Roadside Impaired Driving Enforcement (ARIDE), Drug Recognition Expert (DRE) training, safe prescribing practices, use of SC SCRIPTS, academic detailing, etc. | Health-Related Professionals (i.e., prescribers and dispensers), School Resource Officers, School Nurses, Guidance Counselors, Teachers, Law Enforcement Officers, etc. | * Contractual costs for room rental fees * Subscription fees for virtual meeting software * Trainer contracts * Office supplies |

# Proper Medication-Storage Strategies

|  |  |  |
| --- | --- | --- |
| **Types of Strategies** | **Intended Audience** | **Allowable Uses of Funds** |
| * Distributing and making available proper medication storage boxes to individuals or to businesses to provide to customers such as pharmacies, doctor’s offices, senior care agencies, etc. | General Population | * **Prescription drug storage lockboxes and containers** |
| * Sharing messages with organizations, businesses, and community members to promote safe use and proper storage of medication | General Population | * **Public awareness campaign – local branding of statewide “Just Plain Killers” campaign (**[**www.justplainkillers.com**](http://www.justplainkillers.com)**) – placing ads on local cable channels; radio PSAs; local billboards in high-need areas; information packets for dentists, doctors, pharmacists, etc.** |

# Community Event Strategies

|  |  |  |
| --- | --- | --- |
| **Types of Strategies** | **Intended Audience** | **Allowable Uses of Funds** |
| * Community social events and gatherings that promote drug-free, healthy families and social bonding among community members in safe spaces *(Events can be held virtually.)* | General Population,  People in Recovery, Children and Spouses of People in Recovery, Active-Duty Military and Veterans | * **Promotion of the event** * Supplies/materials to host event * Room rental, speaker fees, etc. * Masks, gloves, hand sanitizer |
| * Hosting opioid- and stimulant-related “town hall” meetings / community forums *(Events can be held virtually.)* | General Population | * **Promotion of the event** * Supplies/materials to host event * Room rental, speaker fees, etc. * Masks, gloves, hand sanitizer |

**Submission Information**

**What to Submit**

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

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

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

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

**Application Package for Submission**

**Applicant Information Form**

**Instructions:** Please provide a response to each item in the table below.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **DAODAS Applicant Information: FY2022 SOR Primary Prevention** | | |
| **1.** | **Agency Information** | Agency Name |  |
| Mailing Address |  |
| Agency Type | County Alcohol and Drug Abuse Authority  Coroner’s Office  Faith-Based Organization  Law Enforcement  Senior Citizen-Serving Organization  Substance Use Prevention Coalition  Youth-Serving Organization  Other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **3.** | **Point of Contact** | Contact Name |  |
| E-mail Address |  |
| Phone Number |  |
| **4.** | **Award Amount Requested** | *Applicants may request up to $50,000.00.* |  |

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

**Include the following information:**

| **Technical Proposal Sections** | **Required Content** |
| --- | --- |
| 1. **Statement of Need** | * Information that documents the impact of opioids and stimulants within the proposed service area. Include qualitative and quantitative data. Identify the source of all data. (Data can be placed in tables/charts, with explanations to follow.) * Clear identification of the geographic area and/or communities that strategies will impact, including the population of the proposed service area. * Any specific challenges motivating the applicant’s interest in applying for this grant. * Service gaps that will be addressed with the funding. * Existing efforts (either provided by your organization or others in the community) and explanation of how this new effort will not be duplicative. * Explanation of the inability to fund the proposed program without federal assistance, and a description of any existing funding or resources that are being leveraged to support the proposed program. |
| 1. **Plan to Implement Selected Strategy/Strategies** | * Measurable SMART goals and objectives *(See Attachment 1, pages 19-21, for more information on writing SMART goals and objectives.)* * The pre-approved primary prevention strategies that will be implemented *(a minimum of two strategies must be selected)*, and a description of how the identified strategies will be implemented and how they will address the need identified through data in the Statement of Need section.   Applicants that select certain strategies also are required to adhere to additional instructions related to them as outlined in the corresponding bullet points below.   * + Data and Needs Assessment Strategies   ODMAP:  Include a Memorandum of Agreement/Understanding (MOA/MOU) from each key stakeholder organization (i.e., law enforcement agency, emergency medical services department, etc.) that will be partnered with to implement the strategy. *This should be included as an appendix and will not be included in the page count.*   * + Education Strategies   Curriculum-based programs:   * 1. Describe the recruitment process for gaining curriculum-based program participants; and   2. Include a Memorandum of Agreement/Understanding (MOA/MOU) from each key stakeholder organization (as applicable) that will be partnered with to implement the strategy. *This should be included as an appendix and will not be included in the page count.*   + Proper Medication Storage Strategies   Distributing and making available proper medication-storage boxes:  To achieve fidelity implementation, organizations that select this strategy must describe how they will incorporate information dissemination activities (i.e., place advertisement and PSAs on social media platforms and in newspapers, or conduct media campaigns via social media and billboards, etc., to promote safe storage of medications in homes, schools, and healthcare facilities).   * + Safe Medication Disposal Strategies   A. Drug Take Back events; B. Distributing and making available drug deactivation bags/buckets; and C. Prescription drug drop boxes:   1. To achieve fidelity implementation, organizations that select any of these strategies must describe how they will incorporate information dissemination activities (i.e., place advertisement on social media platforms and in newspapers to announce Take Back event dates, locations, and times).  * Month-by-month timeline for strategy implementation, to include the following: * Key activities that will be implemented per strategy by month * Responsible party per key activity   *(Please present the monthly timeline as a Gantt chart, a table, or in another format that can be viewed at a glance.)*   * Description of how DAODAS’ [Just Plain Killers](https://justplainkillers.com/) and/or [Embrace Recovery](https://embracerecoverysc.com/) campaign resources can be used to support strategy implementation at the local level. * Description of any potential barriers to implementation and how you plan to overcome the barriers. * Description of the intention or plans to sustain strategy implementation and/or related infrastructure after the grant period. |
| 1. **Data Collection and Reporting Plan** | * Complete an evaluation plan (*see example in Attachment 2, page 22*) that contains the following:   + Description of the following: * Data that will be collected to evaluate achievement of the stated goal and objectives * Who will be responsible for collecting the required data * How the data will be collected and reported to DAODAS * Timeline for data collection   + Description of how the SMART goals and objectives will be monitored and measured to address the overall need(s) identified. * Provide a sample of the survey (*see example in Attachment 3, pages 23-25)* that the organization will use to collect baseline and outcomes data. The survey should be able to indicate changes in knowledge, attitudes, and/or behaviors among the populations served through strategy implementation. T*his should be included as an appendix and will not be included in the page count.* |

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

**Include the following information:**

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

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

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

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

See sample budget and budget narrative in Attachment 4 (pages 26-29) for additional information.

**Include the following information:**

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

**Attachment 1 – SMART Goals and Objectives**

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

**GOALS**

**Definition −** A goal is a broad statement about the long-term expectation of what should happen as a result of your program (i.e., the desired result). It serves as the foundation for developing your program objectives. Goals should align with the statement of need that is described. Goals should be only one sentence.

The characteristics of effective goals include:

* Goals address outcomes, not how outcomes will be achieved.
* Goals describe the behavior or condition in the community that is expected to change.
* Goals describe who will be affected by the project.
* Goals lead clearly to one or more measurable results.
* Goals are concise.

**Examples**

|  |  |  |
| --- | --- | --- |
| **Unclear Goal** | **Critique** | **Improved Goal** |
| Increase the substance abuse and HIV/AIDS prevention capacity of the local school district | This goal could be improved by *specifying an expected program effect in reducing a health problem*. | Increase the capacity of the local school district to reduce high-risk behaviors of students that may contribute to substance abuse and/or HIV/AIDS |
| Decrease the prevalence of marijuana, alcohol, and prescription drug use among youth in the community by increasing the number of schools that implement effective policies, environmental change, intensive training of teachers, and educational approaches to address high-risk behaviors, peer pressure, and tobacco use | This goal is not concise. | Decrease youth substance use in the community by implementing evidence-based programs within the school district that address behaviors that may lead to the initiation of use |

**OBJECTIVES**

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

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

* ***Specific*** – Includes the “who” and “what” of program activities. Use only one action verb to avoid issues with measuring success. For example, “Outreach workers will administer the HIV risk assessment tool to at least 100 injection drug users in the population of focus” is a more specific objective than “Outreach workers will use their skills to reach out to drug users on the street.”
* ***Measurable*** – How much change is expected. It must be possible to count or otherwise quantify an activity or its results. It also means that the source of and mechanism for collecting measurement data can be identified and that collection of the data is feasible for your program. A baseline measurement is required to document change (e.g., to measure the percentage of increase or decrease). If you plan to use a specific measurement instrument, it is recommended that you incorporate its use into the objective. For example, “By 9/22 increase by 10% the number of 8th-, 9th-, and 10th-grade students who disapprove of marijuana use as measured by the annual school youth survey.”
* ***Achievable*** – Objectives should be attainable within a given time frame and with available program resources. For example, “The new part-time nutritionist will meet with seven teenage mothers each week to design a complete dietary plan” is a more achievable objective than “Teenage mothers will learn about proper nutrition.”
* ***Realistic*** – Objectives should be within the scope of the project and propose reasonable programmatic steps that can be implemented within a specific time frame. For example, “Two ex-gang members will make one school presentation each week for two months to raise community awareness about the presence of gangs” is a more realistic objective than “Gang-related violence in the community will be eliminated.”
* ***Time-bound*** – Provide a time frame indicating when the objective will be measured or a time by which the objective will be met. For example, “Five new peer educators will be recruited by the second quarter of the first funding year” is a better objective than “New peer educators will be hired.”

**Sample SMART Objectives**

|  |  |  |
| --- | --- | --- |
| **Non-SMART Objective** | **Critique** | **SMART Objective** |
| Teachers will be trained on the selected evidence-based substance abuse prevention curriculum. | The objective is not SMART because it is not *specific, measurable*, or *time-bound*. It can be made SMART by *specifically* indicating *who* is responsible for training the teachers, *how many* will be trained, *who* they are, and *the date* by which the trainings will be conducted. | ***By June 1, 2022****,* ***LEA supervisory staff*** will have trained ***75% of******health education*** teachers ***in the local* *school******district*** on the selected, evidence-based substance abuse prevention curriculum. |
| 90% of youth will participate in classes on assertive communication skills. | This objective is not SMART because it is not *specific* or *time-bound.* It can be made SMART by indicating *who* will conduct the activity, *by when*, and *who* will participate in the lessons on assertive communication skills. | By the ***end of the 2021-2022 school year****,* ***district health educators*** will have conducted classes on assertive communication skills for 90% of youth ***in******the middle* *school*** receiving the ***substance abuse and HIV prevention curriculum.*** |
| Train individuals in the community on the prevention of prescription drug/opioid overdose-related deaths. | This objective is not SMART because it is not *specific, measurable* or *time-bound.* It can be made SMART by specifically indicating *who* is responsible for the training, *how many* people will be trained, *who* they are, and *the date* by which the training will be conducted. | ***By the end of Year 2 of the project***, the ***Health Department*** will have trained ***75% of EMS staff*** ***in the* *county government***on the selected curriculum addressing the prevention of prescription drug/opioid overdose-related deaths. |

**Attachment 2 – Sample Evaluation Plan**

**Sample Evaluation Plan**

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

**Goal Statement:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Objective** | **Data Indicator** | **Data Source** | **Data Collection Frequency** | **Responsible Staff for Data Collection** | **Method of  Data Analysis** |
| Example: Objective 1.a. |  |  |  |  |  |
| Example: Objective 1.b. |  |  |  |  |  |
|  |  |  |  |  |  |
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*\*Information adapted from the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Strategic Prevention Framework – Partnership for Success Application (Funding Opportunity Announcement No. SP-20-002)*

**Attachment 3 – Sample Community Survey**

**Sample Community Survey**

**Note:** It may be helpful to utilize an online survey resource (Google Forms, Survey Monkey, Qualtrics, etc.) to administer the community survey(s). Ideal survey administration for the grant period includes administering the survey: 1) before strategy implementation begins (baseline data); and 2) near/at the end of strategy implementation. Use skip patterns as needed if administering the survey(s) online for increased survey efficiency. Ensure appropriate consent is received prior to administering the survey to community members, especially people under the age of 18.

Questions provided below are sample questions. Actual questions that you include in your community survey ideally will reflect your agency’s stated goals and objectives for the grant.

**Sunny County Safe Medication Disposal Survey**

Welcome to the Sunny County Safe Medication Disposal Survey! Thank you for taking a few minutes to complete this anonymous community survey about safe medication disposal through prescription drug drop boxes. It will ask questions about your awareness and perceptions related to prescription drug drop box use.

1. How old are you?
2. 18-25
3. 26-34
4. 35-44
5. 45-54
6. 55-64
7. 65+
8. Please identify your sex.
9. Male
10. Female
11. How would you describe your racial or ethnic background?
12. American Indian, Alaskan Native, or Native Hawaiian
13. Asian or Pacific Islander
14. Bi-Racial or Multi-Racial
15. Black or African American
16. Hispanic or Latino
17. White or Caucasian
18. Other
19. ZIP Code
20. Have you seen or heard media messages about prescription drug drop boxes in the county (i.e., radio, print, social media, etc.)?
21. Yes
22. No
23. How did you see or hear about prescription drug drop boxes in the county *(please select all that apply)*?

Television

Radio

Print Media (e.g., brochures, newspapers)

Online Website (e.g., online news, business website)

Social Media Website (e.g., Facebook, Snap Chat, Instagram)

Press Releases

Other

1. How long has it been since you used a prescription drug drop box to dispose of unwanted medication?
2. 1-3 months ago
3. 4-6 months ago
4. 6-12 months ago
5. 1 year ago+
6. Never
7. How likely are you to use a prescription drug drop box to dispose of unwanted medication in the future?
8. Extremely Unlikely
9. Unlikely
10. Neutral
11. Likely
12. Extremely Likely
13. What influenced your decision to dispose of unused medication through a prescription drug drop box (please select all that apply)?

Heard a radio ad about it

Saw a television ad about it

Saw it on social media

Saw it on a billboard or newspaper

Someone told me about it

To keep my family safe

Other reason

1. What types of medication are you most likely to dispose of using a prescription drug drop box (please select all that apply)?

Over-the-counter pain medication (i.e., Aleve, aspirin, Tylenol)

Prescription pain medication (i.e., hydrocodone, OxyContin, Percocet)

Other over-the-counter medication (i.e. Benadryl, Claritin, Cough Syrup)

Other prescription medication (i.e. Adderall, Xanax, Valium)

None

**Attachment 4 – Sample Budget and Budget Narrative**

**CATEGORIES**

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

Provide the following information for the narrative and justification:

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

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

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

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

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

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

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

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

**Example**

|  |  |
| --- | --- |
| **Organization Name:** Sunny County Police Department | |
| **Funding Amount:** $24,914.94 | |
| **Strategies to Be Implemented:** (1) Data Tracking (ODMAP), (2) Take Back Days / Public Information Campaign, (3) Deterra Distribution / Public Information Campaign, and (4) Botvin’s Life Skills for middle school students who attend a summer day camp program sponsored by the police department | |
| **Travel and Training** | Online training for teachers of Botvin’s Life Skills – $250.00 x 2 school resource officers = $500.00  CATEGORY TOTAL: $500.00 |
| **Supplies and Materials** | Deterra 2.5-gallon buckets (2 buckets/case) – 4 cases x $215.00/case = $860.00  Deterra medium pouches (100/case) – 5 cases x $780.00/case = $3,900.00  1 10-foot-x-15-foot customized tent for Take Back Days and Deterra distribution events = $999.99  Gloves for events – 10 boxes of 100 gloves x $9.99/box = $99.99  Masks for events – 100 customized triple-ply cotton masks = $289.99  Hand sanitizer (12 oz. bottles) for events (15/case) – 3 cases x $139.99/case = $419.97  Botvin’s Life Skills curriculum materials – 1 full middle school curriculum set (includes 1 teacher’s manual, 30 student guides for each level {6/7-Level 1, 7/8-Level 2, 8/9-Level 3}, 1 stress management techniques CD, and 1 smoking prevention DVD = $645.00  Botvin’s Life Skills Prescription Drug Abuse Module – 1 teacher’s manual and student worksheets for 100 participants = $200.00  Paid social media boosts to promote Take Back Days and Deterra distribution events – $500.00/month x 4 months = $2,000.00 x 2 platforms = $4,000.00  CATEGORY TOTAL: $11,414.94 |
| **Contractual Services** | Contract with data analyst to input data into ODMAP and pull reports from the system for real-time data analysis – $25.00/hour x 10 hours/week x 32 weeks = $8,000.00  Contract with media specialist to assist with design of messages for public information campaign to accompany the implementation of the Deterra distribution events and the Take Back Days – $25.00/hour x 10 hours/month x 8 months = $2,000.00  CATEGORY TOTAL: $10,000.00 |
| **Other** | Non-cash incentives for middle school summer camp participants – $30.00 x 25 participants = $750.00  Non-cash incentives for medication Take Back Days to provide to up to 25 participants at each event – $10.00 x 25 participants x 4 events = $1,000.00  CATEGORY TOTAL: $1,750.00 |
| **Administrative Costs** | Administrative costs for police department to support the implementation of the grant through staff support – 5% of total award = $1,250.00  CATEGORY TOTAL: $1, 250.00 |
| **GRAND TOTAL** | $24,914.94 |

**Budget Narrative**

**Travel and Training:** Two School Resource Officers from the police department will attend an online facilitator’s training for the Botvin’s Life Skills middle school curriculum in the spring of 2021 to ensure the program is delivered with fidelity during the 2021 summer day camp for middle school youth in Sunnyville. This expenditure relates to the implementation of Strategy 4.

**Supplies and Materials:** $860.00 – 4 cases (8 2.5-gallon buckets) of Deterra for disposal of medication collected by the police department through the four Take Back Days and the permanent drop box that is installed at the main police station. Expenditure relates to the implementation of Strategy 2.

$3,900.00 – 5 cases of medium Deterra pouches (500 total pouches) to be distributed by the police department to the general public to promote safe disposal of medication at community events hosted by the department throughout the year (e.g., National Night Out, Safe Trick or Treat, neighborhood watch meetings, etc.). This expenditure relates to the implementation of Strategy 2.

$1,809.94 – Supplies for Take Back Days and Deterra distribution events to ensure visibility and safety:

* 1 10-foot-x-15-foot customized tent for Take Back Days and Deterra distribution events = $999.99
* Gloves for events – 10 boxes of 100 gloves x $9.99/box = $99.99
* Masks for events – 100 customized triple-ply cotton masks = $289.99
* Hand sanitizer (12 oz. bottles) for events (15/case) – 3 cases x $139.99/case = $419.97

These expenditures relate to the implementation of Strategy 2.

$645.00 – Botvin’s Life Skills curriculum materials (1 full middle school curriculum set {includes 1 teacher’s manual, 30 student guides for each level (6/7-Level 1, 7/8-Level 2, 8/9-Level 3}, 1 stress management techniques CD, 1 smoking prevention DVD). This expenditure relates to the implementation of Strategy 4.

$200.00 – Botvin’s Life Skills Prescription Drug Abuse Module (1 teacher’s manual and student worksheets for 100 participants). This expenditure relates to the implementation of Strategy 4.

$4,000.00 – Paid social media boosts to promote Take Back Days and Deterra distribution events.

* $500.00/month x 4 months = $2,000.00 x 2 platforms – Ads will be created and posted on the police department’s Facebook and Instagram feeds. This expenditure relates to the implementation of Strategies 2, 3, and 4.

**Contractual Services:** Contract with data analyst to input data into ODMAP and pull reports from the system for real-time data analysis – $25.00/hour x 10 hours/week x 32 weeks = $8,000.00. This expenditure relates to the implementation of Strategy 1.

Contract with media specialist to assist with design messages for public information campaign to accompany the implementation of the Deterra distribution events and the Take Back Days – $25.00/hour x 10 hours/month x 8 months = $2,000.00. This expenditure relates to the implementation of Strategies 2, 3, and 4.

**Other:**

* $750.00 (25 participants x $30.00 non-cash incentive) – Participants in the police department’s summer camp program for middle school (6th- to 8th-graders) in the community will receive a $30.00 non-cash incentive for completing the Botvin’s Life Skills program and survey. This expenditure relates to the implementation of Strategy 4.
* $1,000 ($10.00 non-cash incentives x 25 participants x 4 Take Back events) – Incentives will be provided for the first 25 participants to take part in each of the four Take Back events that will be held throughout the grant period. This expenditure relates to the implementation of Strategy 2.

**Administrative Costs:** $1,250 (5% as allowed) will be allocated to cover administration of the grant through the police department.

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**State Opioid Response (SOR) Grant Application Package  
for Primary Prevention Services**

**Questions and Responses**

A response is provided below for each question concerning the application requirements received by the South Carolina Department of Alcohol and Other Drug Abuse Services (DAODAS) by 5:00 p.m. on Friday, August 13, 2021. Please send email to [application@daodas.sc.gov](mailto:application@daodas.sc.gov) if additional clarification is needed for any of the responses. Thank you.

| **#** | **Question** | **Response** |
| --- | --- | --- |
| **1** | **Will grants per awarded per agency or per county? I am a multi-county agency and would like to know whether we should submit an RFP per county or per agency and whether the guidance is the same for both grants?** | The grant will be awarded to the agency. However, multi-county agencies that seek funding for multiple counties should submit an application per county that is focused on addressing the needs and health disparities of individuals, groups, etc., in each respective county. |
| **2** | **Could funds be used to purchase Sharps Storage Containers for use by partnering Law Enforcement Agencies for evidence collection in opioid/drug cases?** | Applicants are only allowed to purchase sharps storage containers to support implementation of a pre-approved strategy. Pre-approved strategies are listed on pages 6-10. |
| **3** | **Could funds be used to allow community partners/coalition members/prevention specialists to build capacity through participation in national conferences and trainings?** | The approval of the national conferences and trainings for professional education will depend on whether attendance is clearly tied to successful implementation of an applicant’s programs and strategies and the applicant’s ability to accomplish its stated SMART goals and objectives. |
| **4** | **Is a Community Survey required for all strategies? (for example – an agency applies to (1) provide overtime pay to law enforcement (2) implement geofencing messaging -- Would a community survey need be crafted & included in the application for EACH of these strategies?** | Applicants are required to submit a single survey. The community survey is required to ensure that organizations can demonstrate the extent to which they have met their stated objectives by the end of the grant period. Applicants may submit additional surveys if they choose, but only one survey is required. |
| **5** | **We saw that there is a survey requirement mentioned that needs to be attached. However, what if it is hard to track the change in knowledge, attitudes, and/or behaviors based on our specific strategy? For example, disseminating brochures and deterra bags to local pharmacies with opioid prescriptions. We are unsure how we would get those specific people reached to fill out a survey.**   1. **Would we meet the requirement if we had a survey related to one of our strategies?** | The community survey is required to ensure that organizations can demonstrate the extent to which they have met their stated objectives by the end of the grant period. Applicants may consider asking an evaluation subject matter expert for assistance to help determine whether it is possible to collect data from any population for which the applicant seeks a change outcome. In the example provided – disseminating brochures and Deterra bags to local pharmacies with opioid prescriptions – it is possible that a customer incentive might increase level of participation in a survey. |
| **6** | **We are not proposing any media campaigns with these funds. In the RFP, it states that it wants us to state how we will utilize the Just Plain Killers and/or Embrace Recovery campaigns. Is this a requirement?** | Applicants are not required to implement media campaigns. However, they are required to describe how DAODAS’ Just Plain Killers and/or Embrace Recovery campaign resources can be used to support implementation of the strategies they have selected. |
| **7** | **We have a significant amount of deterra bags from another funding source. One of the bolded items for the “Distributing and making available drug deactivation bags/buckets for community organization.” says that we would need to purchase deterra drug deactivation bags. I believe we already have 10,000! Can we bypass this and still target this strategy?** | Yes, leveraging resources is encouraged. |
| **8** | **For this grant, some of the strategies are the same as it was for the ECHO Grant. If we were a part of the ECHO Grant can we still apply for this grant using the same strategies?** | Yes, an organization may apply to implement any pre-approved strategy for which it can demonstrate current need for implementation. |
| **9** | **The grant guidelines only mention utilizing a contractor or consultant. Can DAODAS consider allowing organizations to utilize employees for classification especially since the guidelines do not mention it as a disallowable expense and because most non-profit agencies under the SC Dep of Employment Workforce have strict guidelines for classifying people as contractors or consultants? And in this line of work specifically carrying out the objectives/work for this grant, it is not easy to find an organization outside of ours that could oversee the grant. That role/work and similar work is left to us as the sole designated authority for substance use services in our county. We believe any contractor or consultant outside of our area to oversee the project would require too much of the grant funds limiting our ability to execute as much as we desire.** | Based on the initial recommendation of the funding, the limited time frame, and limited funds, it is DAODAS’ continued guidance to utilize a contractor or consultant vs. hiring an employee. This method will allow for a greater programmatic use of the funds vs. employee-related expenses such as fringe, insurance, etc. |
| **10** | **In the new grant, can I buy liners for the dropboxes already in the county?** | See response #7. |
| **11** | **Is it possible to get the critique of the SOR grant that we are currently implementing? I would like to improve this year’s grant by reviewing our scores from last if possible.** | DAODAS can provide FY21 Primary Prevention SOR contract holders with their respective application scores by section (technical proposal, qualifications, and budget). |