



Staff Report

File #: 15-075, **Version:** 1

Agenda Date: 10/20/2015

Subject:

Notice of grant award with the Substance Abuse and Mental Health Services Administration for Elevate: Raising Problem Solving to Another Level.

Recommended Action

Approval of the notice of grant award with the Substance Abuse and Mental Health Services Administration (SAHMSA) for Elevate: Raising Problem Solving to Another Level Grant Project (Elevate).

Project Period: September 30, 2015 to September 29, 2018; Year 1 Budget Period September 30, 2015 to September 29, 2016. Funding for fiscal year 2016 (FY16) is \$324,858.

Strategic Plan:

Ensure Public Health, Safety and Welfare

2.2 Be a facilitator, convener, and purchaser of services for those in need.

Summary:

SAMHSA has awarded the County the first year of a three (3) year grant for the Elevate program which aims to reduce crime and substance abuse among high risk/high need, nonviolent youthful offenders aged 18-30 who have been diagnosed with a substance abuse disorder, have experienced trauma, and may also be struggling with a mild co-occurring mental health disorder. Between 2015 and 2018, at least 185 youthful offenders are expected to enroll in Elevate through joint funding from SAMHSA and the Bureau of Justice Assistance (BJA).

This award is a follow up to a previous joint SAMHSA and BJA award for the YouCan! Program which is scheduled to end September 30, 2015. The YouCan! program provided intensive, evidence-based, gender-specific substance abuse treatment to young adults with prescription drug addictions. The target for participants served was set at 185 over three (3) years. During that period, 192 (104%) eligible participants were referred for evaluation through the grant for which 166 (90%) assessments were completed. Of those, 154 (83%) completed intake and received services through the grant; 39 of these participants have successfully completed the grant treatment and 28 have graduated from Drug Court. At the time of this reporting, 37 participants were still active in treatment; 29 participants that were discharged unsuccessfully remain in Drug Court and have been referred to a higher level of treatment.

The YouCan! grant proposal called for follow up evaluations at six (6) months and twelve (12) months from intake. We maintained an 89% follow up rate at six (6) months and 71% at twelve (12) months, well above the average of other grants with similar reporting requirements. The success rate for the Elevate program is projected to be the same or better than the YouCan! program.

Background Information:

The Elevate program is the result of a joint adult drug court solicitation with SAMHSA and BJA to enhance services, coordination, and treatment. Drug courts are part of the larger universe of problem-solving courts, and have been demonstrated to reduce recidivism and substance abuse among high-risk substance abusing offenders and increase their likelihood of successful rehabilitation through:

- early, continuous, and intense treatment;
- close judicial supervision and involvement;
- mandatory and random drug testing;
- community supervision;
- appropriate incentives and sanctions; and
- recovery support services.

BJA and SAMHSA provide drug court applicants the flexibility to identify the most appropriate adult court model on which to base the drug court in order to accommodate the needs and available resources of the jurisdiction.

Fiscal Impact:

The total amount of the year one (1) SAMHSA award is \$324,858. There is no match required. A budget resolution will be prepared to add this funding to the FY16 Budget.

Staff Member Responsible:

Michael Cooksey, Director, Justice and Consumer Services

Partners:

SAMHSA, BJA, Sixth Judicial Circuit Court, WestCare, Center for Rational Living.

OMB Contract Review

Contract Name(s)	Notice of Award for Substance Abuse and Mental Health Services Administration for Elevate: Raising Problem Solving to Another Level – Year 1		
Legistar File #	15-075	Contract #	1H79TI026408-01

Mark all Applicable Boxes:

Type of Contract									
CIP		Grant	x	Other		Revenue	x	Project	x

Contract information:

New Contract (Y/N)	Y	Original Contract Amount	\$324,858
Fund(s)	0001	Amount of Change	\$0.00 – N/A
Cost Center(s)	311112	Contract Amount	\$324,858
Program(s)	1712	Amount Available	Total: \$324,858
Account(s)	Exp: 5340001 Rev: 3312001	Included in Applicable Budget? (Y/N)	N – Budget Resolution required for FY16.
Project(s)	TBD		
Fiscal Year(s)	FY16	Required \$ Match (grants)	N/A
Description & Comments			
(What is it, any issues found, is there a financial impact to current/next FY, does this contract vary from previous FY, etc.)			
<p>Substance Abuse and Mental Health Services Administration (SAMHSA) – The purpose of this grant is to support programs for substance use disorders and mental illness through counseling, rehabilitation services, alcohol/drug testing, etc. This grant project period is expected to span over three years, and the County must apply for a continuation of the project every year (Budget Period). During each Budget Period of the award, the grant # and amounts may vary. Special terms of this award include the submission of a Disparity Impact Statement consisting of specific components outlined in the award.</p> <p>This grant funds a portion of a large project to expand and enhance the capacity of the County's Adult Drug Court Program. Roughly, \$300,000 is being funded by the Bureau of Justice Assistance (BJA) and \$975,000 is being funded by SAMHSA (divided over three years).</p> <p>Upon execution, this grant for \$324,858 will begin September 30, 2015, and end September 29, 2016, or until funds are depleted. There are no matching funds required for this grant.</p>			

Analyst: Fredricka Jones 09/21/2015

Ok to Sign: ☒

Risk Management Contract Review

Contract Name	Notice of Award with the Substance Abuse and Mental Health Services Administration (SAMHSA) for Elevate: Raising Problem Solving to Another Level (Elevate).						
Bid/Contract#		Granicus	15-075	PID #			
Department	J&CS	Project Mgr				Date In	9/22/2015
Contract Mgr	Emily Fasnacht	RUSH?		Pre-Review?		Date Out	Click here to enter a date.
Purchasing Contact				Term			Amount
						\$324,858.00	
Type of Contract (select both)	Funding Agreement		Non-Purchasing		Method of Review	Choose an item.	
Limitation of Liability?	Indemnification Language?				If PE to PE, \$768.28?		

Required Coverages	Add'l Language / Exclusions	Limits	Justification
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			

Discussed scope & suggested insurance requirements with	N/A
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Date/Time/Comments: Public Entity to Public Entity – Funding Only – no insurance requirements to add and none required of County

NOTES:

Reviewed By	Virginia E. Holscher, Dir	Date	9/22/2015
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<input checked="" type="checkbox"/> Ready for Signature	Authorized By Virginia E. Holscher, Director
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Notice of Award

BJA Drug Court 2015
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Treatment

Issue Date: 09/04/2015

Grant Number: 1H79TI026408-01
FAIN: TI026408

Program Director:
Nicholas Bridenback

Project Title: Elevate: Raising Problem Solving to Another Level

Grantee Address	Business Address
COUNTY OF PINELLAS County Justice and Consumer Services 315 Court Street Clearwater, FL 337565165	Pinellas Count Justice & Consumer Services Director 631 Chestnut Street Clearwater, FL 33756

Budget Period: 09/30/2015 – 09/29/2016

Project Period: 09/30/2015 – 09/29/2018

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of \$324,858 (see “Award Calculation” in Section I and “Terms and Conditions” in Section III) to COUNTY OF PINELLAS in support of the above referenced project. This award is pursuant to the authority of 42 USC 3797u et seq. & 509 of the PHS Act, as amended and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Award recipients may access the SAMHSA website at www.samhsa.gov (click on “Grants” then SAMHSA Grants Management), which provides information relating to the Division of Payment Management System, HHS Division of Cost Allocation and Postaward Administration Requirements. Please use your grant number for reference.

Acceptance of this award including the “Terms and Conditions” is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact your Grants Management Specialist and your Government Project Officer listed in your terms and conditions.

Sincerely yours,

Eileen Bermudez
Grants Management Officer
Division of Grants Management

See additional information below

SECTION I – AWARD DATA – 1H79TI026408-01**Award Calculation (U.S. Dollars)**

Consortium/Contractual Cost	\$324,858
Direct Cost	\$324,858
Approved Budget	\$324,858
Federal Share	\$324,858
Cumulative Prior Awards for this Budget Period	\$0
AMOUNT OF THIS ACTION (FEDERAL SHARE)	\$324,858

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
1	\$324,858
2	\$324,978
3	\$324,518

*Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

Fiscal Information:

CFDA Number:	93.243
EIN:	1596000800A8
Document Number:	15TI26408A
Fiscal Year:	2015

IC	CAN	Amount
TI	C96N292	\$324,858

IC	CAN	2015	2016	2017
TI	C96N292	\$324,858	\$324,978	\$324,518

TI Administrative Data:

PCC: EADC-SCT / **OC:** 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 1H79TI026408-01

Payments under this award will be made available through the HHS Payment Management System (PMS). PMS is a centralized grants payment and cash management system, operated by the HHS Program Support Center (PSC), Division of Payment Management (DPM). Inquiries regarding payment should be directed to: The Division of Payment Management System, PO Box 6021, Rockville, MD 20852, Help Desk Support – Telephone Number: 1-877-614-5533.

The HHS Inspector General maintains a toll-free hotline for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. The telephone number is: 1-800-HHS-TIPS (1-800-447-8477). The mailing address is: Office of Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington, DC 20201.

SECTION III – TERMS AND CONDITIONS – 1H79TI026408-01

This award is based on the application submitted to, and as approved by, SAMHSA on the

above-title project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. The grant program legislation and program regulation cited in this Notice of Award.
- b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
- c. 45 CFR Part 75 as applicable.
- d. The HHS Grants Policy Statement.
- e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

Treatment of Program Income:
Additional Costs

SECTION IV – TI Special Terms and Conditions – 1H79TI026408-01

REMARKS:

As a reminder all SAMHSA official notifications will be electronically mailed to your organization's Business Official address identified in the HHS Checklist, Part C.

This award reflects approval of the budget submitted on June 1, 2015 as part of the application.

SPECIAL TERMS OF AWARD:

Disparity Impact Statement (DIS):

By November 30, 2015, you must:

Submit an electronic copy of a disparity impact statement to the Government Project Officer (GPO) and Grants Management Specialist (GMS) as identified under Contacts on this notice of award. The disparity impact statement should be consistent with information in your application regarding access, *service use and outcomes for the program and include three components as described below. Questions about the disparity impact statement should be directed to your GPO. Examples of disparity impact statements can be found on the SAMHSA website at <http://samhsa.gov/grants/grants-management/disparity-impact-statement>.

*Service use is inclusive of treatment services, prevention services as well as outreach, engagement, training and/or technical assistance activities.

The disparity impact statement, in response to the Special Term of Award, consists of three components:

1. Proposed number of individuals to be trained by subpopulations in the grant implementation area should be provided in a table that covers the entire grant period. The disparate population(s) should be identified in a narrative that includes a description of the population and rationale for how the determination was made.
2. A quality improvement plan for how you will use your program (GPRA) data on access, use and outcomes to monitor and manage program outcomes by race, ethnicity and LGBT status, when possible. The quality improvement plan should include strategies for how processes and/or programmatic adjustments will support efforts to reduce disparities for the identified sub-populations.

3. The quality improvement plan should include methods for the development and implementation of policies and procedures to ensure adherence to the Enhanced Culturally and Linguistically Appropriate Services (CLAS) Standards and the provision of effective care and services that are responsive to:
- a. Diverse cultural health beliefs and practices;
 - b. Preferred languages; and
 - c. Health literacy and other communication needs of all sub-populations within the proposed geographic region.

DOMA:

On June 26, 2013, in United States v. Windsor, the Supreme Court held that section 3 of the Defense of Marriage Act (DOMA), which prohibited federal recognition of same-sex spouses/marriages, was unconstitutional. As a result of that decision, SAMHSA is no longer prohibited from recognizing same sex marriages. Consistent with HHS policy and the purposes of SAMHSA programs, same-sex spouses/marriages are to be recognized in the Joint Adult Drug Courts program. This means that, as a recipient of SAMHSA Joint Adult Court funds you are required to treat as valid the marriages of same-sex couples whose marriage was legal when entered into. This applies regardless of whether the couple now lives in a jurisdiction that recognizes same-sex marriage or a jurisdiction that does not recognize same-sex marriage. Any same-sex marriage legally entered into in one of the 50 states, the District of Columbia, a U.S. territory or a foreign country will be recognized. However, this does not apply to registered domestic partnerships, civil unions or similar formal relationships recognized under state law as something other than a marriage.

EPLS:

SAMHSA's OFAS is conducting a review of one or more of the key staff listed in your organization's Application for Federal Assistance (SF424) because they had the same or a similar name to an individual in the System of Award Management Exclusions List. If OFAS's review determines that the individual(s) in question is(are) the same person(s), enforcement action will be taken, which may include terminating the grant or requiring the person be removed from working on the grant or at your organization in accordance with 2 CFR Part 180. Please note that by selecting "I agree" in § 21 of the SF424, the authorized representative certified that, to the best of his or her knowledge and belief, that the applicant and its principals were not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department or agency.

SPECIAL CONDITIONS OF AWARD:

None

STANDARD TERMS OF AWARD:

Refer to the following SAMHSA website for Standard Terms of Award:

<http://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions> **(NEW)**

Key staff (or key staff positions, if staff has not been selected) are listed below:

Nicholas Bridenback, Project Director @ 15% level of effort (BJA match)

All changes in key staff including level of effort must be sent electronically to the GPO including a biographical sketch and other documentation and information as stated above who will make a recommendation for approval or disapproval to the assigned Grants Management Specialist. Only the GMO, SAMHSA may approve Key Staff Changes.

REPORTING REQUIREMENTS:

Submission of a Programmatic Semi-annual Report is due no later than the dates as follows:

1st Report – April 30, 2016
2nd Report – October 31, 2016

**Please submit your Programmatic Semi-annual Report to
DGMProgressReports@samhsa.hhs.gov and copy your Program Official.
(HARD COPIES SUBMISSION IS NOT REQUIRED)**

Failure to comply with the above stated terms and conditions may result in suspension, classification as High Risk status, termination of this award or denial of funding in the future.

All responses to special terms and conditions of award and post award requests may be electronically mailed to the Grants Management Specialist and to the Program Official as identified on your Notice of Award.

It is essential that the Grant Number be included in the SUBJECT line of the email.

CONTACTS

Jon Berg, Program Official

Phone: (240) 276-1609 **Email:** Jon.Berg@samhsa.hhs.gov

Doug Lees, Grants Specialist

Phone: (240) 276-1653 **Email:** Doug.Lees@samhsa.hhs.gov



STANDARD TERMS OF AWARD (NEW)

SPECIAL TERM OF AWARD:

Your organization may be permitted to automatically carryover, without prior approval from SAMHSA, an unobligated balance of funds to the second budget period (FY 2016) up to 10 percent of the Federal share; however, SAMHSA reserves the right to suspend this practice.

STANDARD TERMS OF AWARD:

1) As required by the Federal Funding Accountability and Transparency Act of 2006, this new award is subject to the subaward and executive compensation reporting requirement of 2 CFR Part 170. Although the full text of this regulation is attached, you may access the language online at <http://www.samhsa.gov/grants/subaward.aspx>.

The following SAMHSA Term of Award is applicable to all (Type 1) new SAMHSA grants which start on or after Oct. 1, 2010. At this time, Type 2s (competing renewals) and Type 3s (competing supplements) are not included, but may be subject to this requirement in the future:

Reporting Subawards and Executive Compensation

a. Reporting of first-tier subawards.

1. Applicability. Unless you are exempt as provided in paragraph d. of this award term, you must report each action that obligates \$25,000 or more in Federal funds that does not include Recovery funds (as defined in section 1512(a)(2) of the American Recovery and Reinvestment Act of 2009, Pub. L. 111-5) for a subaward to an entity (see definitions in paragraph e. of this award term).

2. Where and when to report.

i. You must report each obligating action described in paragraph a.1. of this award term to <http://www.fsr.gov>.

ii. For subaward information, report no later than the end of the month following the month in which the obligation was made. (For example, if the obligation was made on November 7, 2010, the obligation must be reported by no later than December 31, 2010.)

3. What to report. You must report the information about each obligating action that the submission instructions posted at <http://www.fsrs.gov> specify

b. Reporting Total Compensation of Recipient Executives.

1. Applicability and what to report. You must report total compensation for each of your five most highly compensated executives for the preceding completed fiscal year, if-

i. the total Federal funding authorized to date under this award is \$25,000 or more;

ii. in the preceding fiscal year, you received-

(A) 80 percent or more of your annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards); and

(B) \$25,000,000 or more in annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards); and

iii. The public does not have access to information about the compensation of the executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation filings at <http://www.sec.gov/answers/execomp.htm>.)

2. Where and when to report. You must report executive total compensation described in paragraph b.1. of this award term:

i. As part of your registration profile, you must access the System for Award Management (SAM) at: <https://www.sam.gov/portal/public/SAM/> .

ii. By the end of the month following the month in which this award is made, and annually thereafter.

c. Reporting of Total Compensation of Subrecipient Executives.

1. Applicability and what to report. Unless you are exempt as provided in paragraph d. of this award term, for each first-tier subrecipient under this award, you shall report the names and total compensation of each of the subrecipient's five most highly compensated executives for the subrecipient's preceding completed fiscal year, if-

i. in the subrecipient's preceding fiscal year, the subrecipient received-

(A) 80 percent or more of its annual gross revenues from Federal procurement contracts (and subcontracts) and Federal financial assistance subject to the Transparency Act, as defined at 2 CFR 170.320 (and subawards); and

(B) \$25,000,000 or more in annual gross revenues from Federal procurement contracts (and subcontracts), and Federal financial assistance subject to the Transparency Act (and subawards); and

ii. The public does not have access to information about the compensation of the executives through

periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation filings at <http://www.sec.gov/answers/execomp.htm>.)

2. Where and when to report. You must report subrecipient executive total compensation described in paragraph c.1. of this award term:

i. To the recipient.

ii. By the end of the month following the month during which you make the subaward. For example, if a subaward is obligated on any date during the month of October of a given year (i.e., between October 1 and 31), you must report any required compensation information of the subrecipient by November 30 of that year.

d. Exemptions

If, in the previous tax year, you had gross income, from all sources, under \$300,000, you are exempt from the requirements to report:

i. Subawards, and

ii. The total compensation of the five most highly compensated executives of any subrecipient.

e. Definitions. For purposes of this award term:

1. Entity means all of the following, as defined in 2 CFR part 25:

i. A Governmental organization, which is a State, local government, or Indian tribe;

ii. A foreign public entity;

iii. A domestic or foreign nonprofit organization;

iv. A domestic or foreign for-profit organization;

v. A Federal agency, but only as a subrecipient under an award or subaward to a non-Federal entity.

2. Executive means officers, managing partners, or any other employees in management positions.

3. Subaward:

i. This term means a legal instrument to provide support for the performance of any portion of the substantive project or program for which you received this award and that you as the recipient award to an eligible subrecipient.

ii. The term does not include your procurement of property and services needed to carry out the project or program (for further explanation, see Sec. II.210 of the attachment to OMB Circular A-133, "Audits of States, Local Governments, and Non-Profit Organizations").

iii. A subaward may be provided through any legal agreement, including an agreement that you or a

subrecipient considers a contract.

4. Subrecipient means an entity that:

- i. Receives a subaward from you (the recipient) under this award; and
- ii. Is accountable to you for the use of the Federal funds provided by the subaward.

5. Total compensation means the cash and noncash dollar value earned by the executive during the recipient's or subrecipient's preceding fiscal year and includes the following (for more information see 17 CFR 229.402(c)(2)):

i. Salary and bonus.

ii. Awards of stock, stock options, and stock appreciation rights. Use the dollar amount recognized for financial statement reporting purposes with respect to the fiscal year in accordance with the Statement of Financial Accounting Standards No. 123 (Revised 2004) (FAS 123R), Shared Based Payments.

iii. Earnings for services under non-equity incentive plans. This does not include group life, health, hospitalization or medical reimbursement plans that do not discriminate in favor of executives, and are available generally to all salaried employees.

iv. Change in pension value. This is the change in present value of defined benefit and actuarial pension plans.

v. Above-market earnings on deferred compensation which is not tax-qualified.

vi. Other compensation, if the aggregate value of all such other compensation (e.g. severance, termination payments, value of life insurance paid on behalf of the employee, perquisites or property) for the executive exceeds \$10,000.

2) **Performance Goals:**

Recipients must comply with the performance goals, milestones and expected outcomes as reflected in the RFA. All requirements specified around performance data collection must be followed.

3) **Indirect Cost Rates:** §200.414/§75.414

(f) In addition to the procedures outlined in the appendices in paragraph (e) of this section, any non-Federal entity that has never received a negotiated indirect cost rate, except for those non-Federal entities described in Appendix VII to Part 200/Appendix VII to part 75 —States and Local Government and Indian Tribe Indirect Cost Proposals, paragraph D.1.b, may elect to charge a de minimis rate of 10% of modified total direct costs (MTDC) which may be used indefinitely. As described in §200.403/§75.403 Factors affecting allowability of costs, costs must be consistently charged as either indirect or direct costs, but may not be double charged or inconsistently charged as both. If chosen, this methodology once elected must be used consistently for all Federal awards until such time as a non-Federal entity chooses to negotiate for a rate, which the non-Federal entity may apply to do at any time.

(g) Any non-Federal entity that has a current federally negotiated indirect cost rate may apply for a one-time extension of the rates in that agreement for a period of up to four years. This extension will be subject to the review and approval of the cognizant agency for indirect costs. If an extension is granted the non-Federal entity may not request a rate review until the extension period ends. At the end of the 4-year

extension, the non-Federal entity must re-apply to negotiate a rate. Subsequent one-time extensions (up to four years) are permitted if a renegotiation is completed between each extension request.

4) **Mandatory disclosures.**

The non-Federal entity or applicant for a Federal award must disclose, in a timely manner, in writing to the Federal awarding agency or pass-through entity all violations of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the Federal award. Failure to make required disclosures can result in any of the remedies described in §200.338 Remedies for noncompliance, including suspension or debarment. (See also 2 CFR part 180 and 31 U.S.C. 3321).

5) **English Language**

All Federal financial assistance announcements and Federal award information must be in the English language. Applications must be submitted in the English language and must be in the terms of U.S. dollars. If the Federal awarding agency receives applications in another currency, the Federal awarding agency will evaluate the application by converting the foreign currency to United States currency using the date specified for receipt of the application.

Non-Federal entities may translate the Federal award and other documents into another language. In the event of inconsistency between any terms and conditions of the Federal award and any translation into another language, the English language meaning will control. Where a significant portion of the non-Federal entity's employees who are working on the Federal award are not fluent in English, the non-Federal entity must provide the Federal award in English and the language(s) with which employees are more familiar.

- 6) The Division of Grants Management created a Public Assistance (P) Account in the Division of Payment Management's (DPM) Payment Management System to provide a separate accounting of federal funds per SAMHSA grant. When discussing your account with the DPM's Account Representative, provide the document number identified on Page 2 of the Notice of Award under Section I - AWARD DATA, Fiscal Information.
- 7) As the recipient organization, you acknowledge acceptance of the grant terms and conditions by drawing down or otherwise obtaining funds from the Payment Management System. In doing so, your organization must ensure that you exercise prudent stewardship over Federal funds and that all costs are allowable, allocable and reasonable.
- 8) Recipients must adhere to all applicable requirements of the Fiscal Year 2012 Consolidated Appropriations Act provisions in PL 112-74 for the Department of Labor, Health and Human Services, and Education and the Department of Interior and Related Agencies and from the Consolidated and Further Continuing Appropriations Act, Fiscal Year 2012, Public Law 112- 55 for the United States Department of Agriculture, and Related Agencies.
- 9) This grant is subject to the terms and conditions as stated in Section III (Terms and Conditions) of the NoA. Refer to the "order of precedence" that explains the laws and regulations that govern the award.
- 10) The recipient organization is legally and financially responsible for all aspects of this grant, including funds provided to sub-recipients.

- 11) The Department of Health and Human Services' (HHS), Office of General Counsel (OGC) has provided guidance on how the lobbying restrictions in the Fiscal Year 2012 Consolidated Appropriations Act (CAA, 2012) will affect HHS programs. Section 503 of the Labor, HHS, and Education Appropriation Act (Division F of the CAA, 2012) is the most comprehensive provision focused on lobbying restrictions. Recent changes to this section may have implications for SAMHSA and its recipients. Language provided by OGC, below provides specific guidance on: agency actions; recipient lobbying; tax increases and other restrictions on legal consumer products; and clarification of Internal Revenue Code provisions.

SEC. 503. - Agency Actions

- a) No part of any appropriation contained in this Act or transferred pursuant to section 4002 of Public Law 111-148 shall be used, other than for normal and recognized executive-legislative relationships, for publicity or propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication, electronic communication, radio, television, or video presentation designed to support or defeat the enactment of legislation before the Congress or any State or local legislature or legislative body, except in presentation to the Congress or any State or local legislature itself, or designed to support or defeat any proposed or pending regulation, administrative action, or order issued by the executive branch of any State or local government, except in presentation to the executive branch of any State or local government itself.

Section 503(b) - Recipient and Contractor Lobbying

- b) No part of any appropriation contained in this Act or transferred pursuant to section 4002 of Public Law 111-148 shall be used to pay the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before the Congress or any State government, State legislature or local legislature or legislative body, other than for normal and recognized executive-legislative relationships or participation by an agency or officer of a State, local or tribal government in policymaking and administrative processes within the executive branch of that government.
- c) The prohibitions in subsections (a) and (b) shall include any activity to advocate or promote any proposed, pending or future Federal, State or local tax increase, or any proposed, pending, or future requirement or restriction on any legal consumer product, including its sale or marketing, including but not limited to the advocacy or promotion of gun control.
- 12) Grant funds cannot be used to supplant current funding of existing activities. Under the HHS Grants Policy Directives, 1.02 General -- Definition: Supplant is to replace funding of a recipient's existing program with funds from a Federal grant.
- 13) The recommended future support as indicated on the NoA reflects TOTAL costs (direct plus indirect). Funding is subject to the availability of Federal funds, and that matching funds, (if applicable), is verifiable, progress of the grant is documented and acceptable.
- 14) For FY 2015, the Consolidated Appropriations Act, 2015 (Public Law 113-76) signed into law on January 17, 2015, restricts the amount of direct salary to Executive Level II of the Federal Executive

Pay scale. The Executive Level II salary is \$183,300 annually.

- 15) "Confidentiality of Alcohol and Drug Abuse Patient Records" regulations (42 CFR 2) are applicable to any information about alcohol and other drug abuse patients obtained by a "program" (42 CFR 2.11), if the program is federally assisted in any manner (42 CFR 2.12b).

Accordingly, all project patient records are confidential and may be disclosed and used only in accordance with (42 CFR 2). The recipient is responsible for assuring compliance with these regulations and principles, including responsibility for assuring the security and confidentiality of all electronically transmitted patient material.

- 16) Accounting Records and Disclosure - Awardees and sub-recipients must maintain records which adequately identify the source and application of funds provided for financially assisted activities. These records must contain information pertaining to grant or subgrant awards and authorizations, obligations, unobligated balances, assets, liabilities, outlays or expenditures, and income. The awardee, and all its sub-recipients, should expect that SAMHSA, or its designee, may conduct a financial compliance audit and on-site program review of grants with significant amounts of Federal funding.
- 17) Per (45 CFR Part 75) and the HHS Grants Policy Statement, any copyrighted or copyrightable works developed under this cooperative agreement/grant shall be subject to a royalty-free, nonexclusive and irrevocable license to the government to reproduce, publish, or otherwise use them and to authorize others to do so for Federal Government purposes. Income earned from any copyrightable work developed under this grant must be used as program income.
- 18) A notice in response to the President's Welfare-to-Work Initiative was published in the Federal Register on May 16, 1997. This initiative is designed to facilitate and encourage recipients and their sub-recipients to hire welfare recipients and to provide additional needed training and/or mentoring as needed. The text of the notice is available electronically on the OMB home page at <http://www.whitehouse.gov/omb/fedreg/omb-not.html>.
- 19) Program Income accrued under the award must be accounted for in accordance with (45 CFR Part 75.307) as applicable. Program income must be reported on the Federal Financial Report, Standard Form 425.

Program income accrued under this award may be used in accordance with the additional costs alternative described in (45 CFR 75.307 (e)(2)) as applicable. Program income must be used to further the grant objectives and shall only be used for allowable costs as set forth in the applicable OMB Circulars A-102 ("Grants and Cooperative Agreements with State and Local Governments") and A-110 ("Uniform Administrative Requirements for Grants and Agreements With Institutions of Higher Education, Hospitals, and Other Non-Profit Organizations").

- 20) Actions that require prior approval must be submitted in writing to the Grants Management Officer (GMO), SAMHSA. The request must bear the signature of an authorized business official of the recipient organization as well as the project director. Approval of the request may only be granted by the GMO and will be in writing. No other written or oral approval should be accepted and will not be binding with SAMHSA. Post Award Changes and instructions may be found at www.samhsa.gov then click on "grants", then "grants management".

- 21) The recipient is required to notify the Government Program Official (GPO) in writing if the Project Director (PD) or key personnel specifically named in the NoA will withdraw from the project entirely, be absent from the project during any continuous period of 3 months or more, or reduce time devoted to the project by 25 percent or more from the level that was approved at the time of award (for example, a proposed change from 40 percent effort to 30 percent or less effort). SAMHSA must approve any alternate arrangement proposed by the recipient, including any replacement of the PD or key personnel named in the NoA.

The request for approval of a substitute PD/key person should include a justification for the change, the biographical sketch of the individual proposed, other sources of support (if applicable), and any budget changes resulting from the proposed change. If the arrangements proposed by the recipient, including the qualifications of any proposed replacement, are not acceptable to SAMHSA, the grant may be suspended or terminated. If the recipient wants to terminate the project because it cannot make suitable alternate arrangements, it must notify the GMO, in writing, of its wish to terminate, and the GMO will forward closeout instructions.

Key staff (or key staff positions, if staff has not been selected) are listed below:

Joe Smith, Project Director @ 10% level of effort

Name, Evaluator @ unstated level of effort

All changes in key staff including level of effort must be sent electronically to the GPO including a biographical sketch and other documentation and information as stated above who will make a recommendation for approval or disapproval to the assigned Grants Management Specialist. Only the GMO, SAMHSA may approve Key Staff Changes.

- 22) Refer to the NoA under Section II (Payment/Hotline Information) regarding the Payment Management System and the HHS Inspector General's Hotline concerning fraud, waste or abuse.
- 23) No HHS funds may be paid as profit (fees) per (45 CFR Part 75.215 (b))
- 24) Where a conference is funded by a grant or cooperative agreement the recipient must include the following statement on all conference materials (including promotional materials, agenda, and Internet sites):
- Funding for this conference was made possible (in part) by (insert grant or cooperative agreement award number) from SAMHSA. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.
- 25) If federal funds are used by the recipient to attend a meeting, conference, etc. and meal(s) are provided as part of the program, then the per diem applied to the Federal travel costs (M&IE allowance) must be reduced by the allotted meal cost(s).
- 26) This award is subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. 7104). For the full text of the award term, go to:

<http://www.samhsa.gov/grants/grants-management/policies-regulations/additional-directives>

- 27) Recipients must comply with the requirements of the National Historical Preservation Act and EO 13287, Preserve America. The HHS Grants Policy Statement provides clarification and uniform guidance regarding preservation issues and requirements (pages I-20, "Preservation of Cultural and Historical Resources"). Questions concerning historical preservation, please contact SAMHSA's Office of Program Services, Building, Logistics and Telecommunications Branch at 240-276-1001.
- 28) Executive Order 13410: Promoting Quality and Efficient Health Care in Federal Government Administered or Sponsored Health Care Programs promotes efficient delivery of quality health care through the use of health information technology, transparency regarding health care quality and price, and incentives to promote the widespread adoption of health information technology and quality of care. Accordingly, all recipients that electronically exchange patient level health information to external entities where national standards exist must:
 - a) Use recognized health information interoperability standards at the time of any HIT system update, acquisition, or implementation, in all relevant information technology systems supported, in whole or in part, through this agreement/contract. Please consult www.healthit.gov for more information, and
 - b) Use Electronic Health Record systems (EHRs) that are certified by agencies authorized by the Office of the National Coordinator for Health Information Technology (ONC), or that will be certified during the life of the grant. For additional information contact: Jim Kretz at 240-276-1755 or Jim.Kretz@samhsa.hhs.gov; Kathryn Wetherby at 240-276-2899 or Kathryn.Wetherby@samhsa.hhs.gov. Questions and issues may be raised on SAMHSA's HIT Forum at <http://cmhbbs.samhsa.gov/>.
- 29) By signing the Application for Federal Assistance (SF-424) Item #21, the Authorized Representative (AR) certifies (1) to the statements contained in the list of certifications and (2) provides the required assurances and checking the "I AGREE" box provides SAMHSA with the AR's agreement of compliance. It is not necessary to submit signed copies of these documents, but should be retained for your records. Assurance and Certification pages can be located at the following link: <http://www.samhsa.gov/grants/continuation-grants> or contained within the Request for Applications (RFA).

REPORTING REQUIREMENTS:

- 1) Federal Financial Report (FFR) – (Standard Form 425) is required on an annual basis and must be submitted no later than 90 days after the end of the budget period.
 - a) SINGLE GRANT REPORTING IS REQUIRED FOR EACH SAMHSA PROJECT AS STATED ON THE FFR (#10 d-o). Do not include any amount in Line 10f that has been reported in Line 10e. If applicable, include the required match on this form under Recipient Share (#10 i-k) and Program Income (l-o) in order for SAMHSA to determine whether matching is being provided and the rate of expenditure is appropriate. Adjustments to the award amount, if necessary, will be made if the recipient fails to meet the match.

- b) The FFR must be prepared on a cumulative basis and all program income must be reported.
 - c) If your organization intends to automatically carryover an unobligated balance of funds from the prior year(s) up to 10 percent of the federal share as reflected in the current Notice of Award, it must be stated in the Remarks section (#12) of the FFR. The subsequent FFR must reflect the actual carryover amount in the Remarks section (#12) also. If the actual carryover amount exceeds the 10 percent threshold, the excess grant funds must be returned. SAMHSA reserves the right to change and/or suspend the practice of permitting recipients to automatically carryover unobligated balances of funds without prior approval.
 - d) When submitting the FFR to SAMHSA, the amounts reported under Transactions (#10 a-c) to the (DPM), must equal or be reconciled with the Federal Expenditures and Unobligated Balance reported in (#10d-h). The FFR may be accessed from the following website at http://www.whitehouse.gov/omb/grants_forms including instructions. The data can be entered directly on the form and the system will calculate the figures, then it can be printed and mailed to this office.
- 2) Submission of a Programmatic (annual, semi-annual or quarterly) Report is due no later than the dates (i.e., January 1, 2016, January 1, 2017, etc.) as follows:

1st Report - , XXXX
2nd Report - , XXXX
3rd Report - , XXXX
4th Report - , XXXX

Please submit your Programmatic (annual, semi-annual or quarterly) Report to DGMPProgressReports@samhsa.hhs.gov and copy your Program Official.
(HARD COPIES SUBMISSION IS NOT REQUIRED)

- 3) The recipient must comply with the GPRA requirements that include the collection and periodic reporting of performance data as specified in the RFA or by the Program Official. This information is needed in order to comply with PL 102-62 which requires that SAMHSA report evaluation data to ensure the effectiveness and efficiency of its programs. Please contact your Program Official for additional submission information.

****This information should not be submitted to DGMPProgressReports@samhsa.hhs.gov.***

- 4) Audit requirements for Federal award recipients are detailed at http://www.whitehouse.gov/sites/default/files/omb/assets/a133/a133_revised_2007.pdf. Specifically, non-Federal entities that expend a total of \$750,000 or more in Federal awards, during each Fiscal Year, are required to have an audit completed in accordance with OMB Circular A-133. The Circular defines Federal awards as Federal financial assistance (grants) and Federal cost-reimbursement (contracts) received both directly from a Federal awarding agency as well as indirectly from a pass-through entity and requires entities submit, to the Federal Audit Clearinghouse (FAC), a completed Data Collection Form (SF-SAC) along with the Audit Report, within the earlier of 30 days after receipt of the report or 9 months after the fiscal year end.

The Data Collection Forms and Audit Reports MUST be submitted to the FAC electronically at

<http://harvester.census.gov/fac/collect/ddeindex.html>. For questions and information concerning the submission process, please visit <http://harvester.census.gov/sac/> or call the FAC 1-800-253-0696.

Failure to comply with the above stated terms and conditions may result in suspension, classification as High Risk status, termination of this award or denial of funding in the future.

All previous terms and conditions remain in effect until specifically approved and removed by the Grants Management Officer.

All responses to special terms and conditions of award and postaward requests must be electronically mailed to the Division of Grants Management Specialist and to the Program Official as identified on your Notice of Award.

It is essential that the Grant Number be included in the SUBJECT line of the email.

Abstract

Pinellas County, Florida, on behalf of the Sixth Judicial Circuit, is requesting Joint Adult Drug Court Grant Program funds in the amount of \$1,275,000 (\$300,000 from BJA and \$975,000 from SAMHSA, over a three-year period) to expand and enhance the capacity of its Adult Drug Court program. Established in 2001, the Sixth Judicial Circuit's Adult Drug Court of Pinellas County, Florida, assists nonviolent offenders to achieve successful rehabilitation from the use of drugs and/or alcohol. The Sixth Judicial Circuit's Adult Drug Court is in adherence with all ten (10) key components of drug courts as identified by BJA and SAMHSA.

With the implementation of the proposed *Elevate* program, the Sixth Judicial Circuit will increase and improve its ability to reduce crime and substance abuse among high risk/high need, nonviolent youthful offenders (ages 18-30) who are diagnosed with a substance abuse disorder (SUD), have experienced trauma and may also be living with a mild co-occurring mental health disorder, and are in immediate need of treatment.

During a three (3)-year period from 2015 to 2018, at least 185 youthful offenders will be enrolled in *Elevate* and will be served utilizing BJA and SAMHSA funding. *Elevate* will utilize a Risk-Need-Responsivity (RNR) model and the Level of Service Inventory-Revised™ (LSI-R™) to match each offender's level and intensity of services to his/her level of risk and relative to his/her needs. Treatment providers, WestCare GulfCoast-Florida, Inc. and Center for Rational Living (subgrantees), will employ several evidence-based programs and practices (from NREPP) including Moral Reconation Therapy (MRT), Seeking Safety (SS), Wellness Recovery Action Plan (WRAP) and Motivational Interviewing (MI). *Elevate* also incorporates a unique home visitation component within its community-based comprehensive case management services which maximizes coordination with probation officers.

All services offered will be evidence-based, trauma informed, gender responsive and in alignment with the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care. The overall goal of the proposed program is to expand and enhance the capacity of the Sixth Judicial Circuit to address gaps in the continuum of treatment and facilitate reductions in recidivism and substance abuse among the population of focus that will increase the likelihood of their successful reintegration into their community.



The [U.S. Department of Justice](#) (DOJ), [Office of Justice Programs](#) (OJP), [Bureau of Justice Assistance](#) (BJA) and the [U.S. Department of Health and Human Services](#) (HHS), [Substance Abuse and Mental Health Services Administration](#) (SAMHSA) are seeking applications for funding to enhance drug court services, coordination, and substance abuse treatment and recovery support services. This program furthers the missions of DOJ and HHS by providing resources to state, local, and tribal governments and state, local, and tribal courts to enhance drug court programs and systems for nonviolent substance-abusing offenders.

Joint Adult Drug Court Solicitation to Enhance Services, Coordination, and Treatment FY 2015 Competitive Grant Announcement

Eligibility

Applicants are limited to states or state courts applying on behalf of a single jurisdiction; local courts; counties; other units of local government; or federally recognized Indian tribal governments (as determined by the Secretary of the Interior). Indian tribal governments may apply directly or through other public or not-for-profit private entities. Eligible jurisdictions must have a fully operational (at least 1 year as of September 30, 2015) adult drug court. "Operational" is defined as a judge being designated as a "drug court" judge with a drug court docket of cases and seeing defendants in drug court on a regular and recurring basis. **By signing the SF-424, the authorized representative of the applicant organization is certifying that the Adult Drug Court(s) that receives funding from this grant announcement has been operational, as defined above.**

Note: Applicants must demonstrate that eligible drug court participants promptly enter the drug court program following a determination of their eligibility. BJA and SAMHSA will not make awards to applicants whose drug courts require an initial period of incarceration unless the period of incarceration is mandated by statute for the offense in question. In such instances, the applicant must demonstrate that the offender is receiving treatment services, if available, while incarcerated and begins drug court treatment services immediately upon release.

BJA and SAMHSA will prioritize making awards to those jurisdictions who do not have an active BJA or SAMHSA drug court award for the same population. BJA and SAMHSA may also elect to make awards for applications submitted under this solicitation in future fiscal years, dependent on the merit of the applications and on the availability of appropriations.

For the purposes of this solicitation, the definition of "adult drug court" is a court program managed by a non-adversarial and multidisciplinary team that responds to the offenses and treatment needs of offenders who have a substance use disorder (SUD). Eligible drug court models include Tribal Healing to Wellness Courts, Driving While Intoxicated (DWI)/Driving Under the Influence (DUI) Courts, Co-Occurring Courts where those participants possess a substance abuse-related charge

and substance abuse diagnosis, and Veterans Courts, that adhere to the Drug Court 10 key components in [Defining Drug Courts: The Key Components](#) and serve substance-abusing adults in the respective problem-solving court, as long as the court meets all the elements required for drug courts, as described herein. Municipal courts using the problem-solving model, in which substance abuse has been identified as the criterion for the individual being referred to the court, are eligible to apply for funding.

Coordination Requirement: The following requirements must be met or the application will not be reviewed or considered for an award:

- Non-tribal applicants must include a letter from the State Substance Abuse (SSA) Director or designated representative indicating support for the application and confirming that the proposal conforms to the framework of the State Strategy of Substance Abuse Treatment. Applicants must include this letter as **Attachment 7** of the application.
- Non-tribal applicants must also submit a letter from the Chief Justice of the state's highest court, the State Court Administrator, or a designee (for example, the state drug or problem-solving court coordinator) describing how the proposed application would enhance the statewide efforts related to problem-solving courts. Applicants must include this letter as **Attachment 8** of their application.
- Tribal applicants submitting on behalf of a tribe/tribal organization must submit a Tribal Authorizing Resolution in lieu of a letter of support from the state as **Attachment 9** of their application. These resolutions should authorize the inclusion of the tribe or tribal organization and its membership within the application.

For additional eligibility information, see Section [C. Eligibility Information](#).

Deadline

Applicants must register with [Grants.gov](#) prior to submitting an application. All applications are due to be submitted and in receipt of a successful validation message in Grants.gov by 11:59 p.m. eastern time on June 1, 2015.

All applicants are encouraged to read: [Important Notice: Applying for Grants in Grants.gov](#).

For additional information, see [How To Apply](#) in Section [D. Application and Submission Information](#).

Contact Information

For technical assistance with submitting an application, contact the Grants.gov Customer Support Hotline at 800-518-4726 or 606-545-5035, or via e-mail to support@grants.gov. The [Grants.gov](#) Support Hotline hours of operation are 24 hours a day, 7 days a week, except federal holidays.

Applicants that experience unforeseen Grants.gov technical issues beyond their control that prevent them from submitting their application by the deadline must e-mail the BJA contact (NCJRS) identified below **within 24 hours after the application deadline** and request approval to submit their application. Additional information on reporting technical issues is found under "Experiencing Unforeseen Grants.gov Technical Issues" in the [How To Apply](#) section.

For assistance with any BJA requirements of this solicitation, contact the National Criminal Justice Reference Service (NCJRS) Response Center: toll-free at 1-800-851-3420; via TTY at 301-240-6310 (hearing impaired only); email responsecenter@ncjrs.gov; fax to 301-240-5830; or web chat

at <https://webcontact.ncjrs.gov/ncjchat/chat.jsp>. The NCJRS Response Center hours of operation are 10:00 a.m. to 6:00 p.m. eastern time, Monday through Friday.

For assistance with SAMHSA program-specific requirements of this solicitation, contact Jon Berg, Public Health Advisor, at 240–276–1609 or by e-mail to Jon.Berg@samhsa.hhs.gov.

For assistance with financial/fiscal SAMHSA-specific requirements of this solicitation, contact Eileen Bermudez, Grants Management Team Lead at 240–276–1412 or by e-mail to eileen.bermudez@samhsa.hhs.gov.

Grants.Gov number assigned to announcement: BJA-2015-4179

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Joint Adult Drug Court Solicitation to Enhance Services, Coordination, and Treatment CFDA #s 16.585 (BJA) and 93.243 (SAMHSA)

A. Program Description

Overview

BJA and SAMHSA are accepting applications for fiscal year (FY) 2015 for grants to enhance court services, coordination, and evidence-based substance abuse treatment and recovery support services of adult drug courts. The purpose of this joint initiative is to allow applicants to submit a comprehensive strategy for enhancing drug court services and substance abuse treatment. Through this solicitation, applicants are competing for two grant awards (a grant from SAMHSA and a separate grant from BJA) for both criminal justice and substance abuse treatment funds with one application. In order to fulfill all of the requirements for this grant program, applicants should comply with the requirements outlined in this announcement as well as those incorporated by reference in the [Requirements Resource Guide](#). These grants are authorized under 42 U.S.C. § 3797u, et seq., and section 509 of the Public Health Service Act, as amended. This announcement addresses Healthy People 2020 Substance Abuse Topic Area HP 2020-SA and SAMHSA's Strategic Initiative on Trauma and Justice.

Drug courts funded through this grant may use federal funding and matched funding to serve only nonviolent offenders¹ and must operate the adult drug court based on BJA's and the National Association of Drug Court Professionals' publication [Defining Drug Courts: The Key Components](#), which addresses the statutory requirements.

This opportunity provides drug court applicants the flexibility to identify the most appropriate evidence-based court (service/docket) model on which to base the drug court, in order to accommodate the needs and available resources of that jurisdiction, so long as the model conforms to the 10 key drug court components (see pages 9-11 of this solicitation), which describe the basic elements that define drug courts. (See page 8 for a definition of "evidence-based.")

NOTE: In addition to this announcement, BJA is offering its standalone drug court solicitation titled "Adult Drug Court Discretionary Grant Program FY 2015 Competitive Grant Announcement," which provides financial and technical assistance to states, state courts, local courts, units of local government, and Indian tribal governments to develop and implement drug treatment courts that

¹ Programs funded through this solicitation may not, with grant funding or matched funding, serve violent offenders. As defined in 42 U.S.C. 3797u-2, a "violent offender" means a person who—(1) is charged with or convicted of an offense that is punishable by a term of imprisonment exceeding one year, during the course of which offense or conduct— (A) the person carried, possessed, or used a firearm or dangerous weapon; (B) there occurred the death of or serious bodily injury to any person; or (C) there occurred the use of force against the person of another, without regard to whether any of the circumstances described in subparagraph (A) or (B) is an element of the offense or conduct of which or for which the person is charged or convicted; or (2) has 1 or more prior convictions for a felony crime of violence involving the use or attempted use of force against a person with the intent to cause death or serious bodily harm. A BJA Adult Drug Court Grant Program-funded drug court may, at its own discretion and after taking a valid assessment of risk into consideration, choose to provide services to an offender that is otherwise excluded from this program if the grantee is using non-federal (including match) funding to provide the services to that offender. BJA strongly encourages the use of valid risk assessment instruments and consideration of public safety needs in this local decision making process.

effectively integrate substance abuse treatment, mandatory drug testing, sanctions and incentives, and transitional services in a judicially supervised court setting with jurisdiction over nonviolent, substance-abusing offenders.

SAMHSA is also offering a standalone grant program titled “Grants to Expand Substance Abuse Treatment Capacity in Adult and Family Drug Courts” (TI-15-002), which provides funding to expand and/or enhance substance abuse treatment services in existing adult and family “problem-solving” courts. Applicants must use the treatment drug court model in order to provide alcohol and drug treatment (including recovery support services supporting substance abuse treatment, screening, assessment, case management, and program coordination as well as family-focused services in the case of Family Treatment Drug Courts) to defendants/offenders. Grantees will be expected to provide a coordinated, multi-system approach designed to combine the sanctioning power of treatment drug courts with effective treatment services to break the cycle of criminal behavior, child abuse and neglect, alcohol and/or drug use, and incarceration or other penalties. Grants funds must be used to serve people diagnosed with a substance use disorder as their primary condition, particularly high risk/high need populations diagnosed with substance dependence or addiction to alcohol/other drugs and identified as needing immediate treatment. Grant funds must be used to address gaps in the continuum of treatment for those individuals in these drug courts who have substance abuse and/or co-occurring disorders treatment needs. Grant funds may be used to provide services for co-occurring disorders as long as expenditures remain consistent with the drug court model which is designed to serve individuals needing treatment for substance dependence or addiction to alcohol/other drugs.

Applicants may submit an application in response to one or all three grant solicitations. However, neither SAMHSA nor BJA will make more than one award for the same proposed drug court project to the same jurisdiction/court (e.g., if an applicant receives an award under this solicitation, that applicant would not receive an award under BJA’s Adult Drug Court Discretionary Grant Program or SAMHSA’s Grants to Expand Substance Abuse Treatment Capacity in Adult and Family Drug Courts). Furthermore, both SAMHSA and BJA may consider geographic distribution when making funding decisions. The aforementioned drug court grant solicitations may be found on BJA’s web site at www.bja.gov/funding.aspx#1, and SAMHSA’s web site at www.samhsa.gov/grants/grant-announcements-2015.

Program-Specific Information

Background Information

Drug courts are part of the larger universe of problem-solving courts, and have been demonstrated (where implemented in an evidence-based manner) to reduce recidivism and substance abuse among high-risk substance abusing offenders and increase their likelihood of successful rehabilitation through:

- early, continuous, and intense treatment;
- close judicial supervision and involvement (including judicial interaction with participants and frequent status hearings);
- mandatory and random drug testing;
- community supervision;
- appropriate incentives and sanctions; and
- recovery support services.

BJA and SAMHSA provide drug court applicants the flexibility to identify the most appropriate adult court (service/docket) model on which to base the drug court in order to accommodate the needs

and available resources of that jurisdiction, so long as the model conforms to the key drug court components, which describe the basic elements that define drug courts.

For the purposes of this solicitation, an “adult drug court” is a court program managed by a multidisciplinary team that responds to the needs of offenders who have a substance use disorder (SUD). Drug courts funded through this grant solicitation may use federal funding and matched funding to serve only nonviolent offenders and must operate the adult drug court based on the publication [*Defining Drug Courts: The Key Components*](#).

For [Tribal Healing to Wellness Courts](#), [Veterans Treatment Courts](#), and [DWI Courts](#), program designs must also function in accordance with the corresponding key components or principles as included in the Appendices A-C of this solicitation.

The National Drug Court Resource Center (NDCRC), available at www.NDCRC.org, is a BJA-funded resource for the drug court field. This web site serves as a clearinghouse for drug court training, technical assistance, publications, funding resources, and other practitioner-specific resources. Applicants are encouraged to visit this site for information.

Goals, Objectives, and Deliverables

The overall goal of the Joint Adult Drug Court Program is to expand and/or enhance the drug court capacity of state, local, and tribal levels to reduce crime and substance abuse among high risk/high need offenders. Potential participants must be diagnosed with a SUD and identified as needing immediate treatment.

Program objectives include:

- Building and maximizing the capacity of jurisdictions to ensure that all potential participants are identified and assessed for risk and need, as well as co-occurring substance use and mental disorders;
- Ensuring all participants receive targeted research-based services;
- Enhancing the provision of recovery support services that prevent recidivism (e.g., individualized treatment, child care, vocational, educational, transportation services community reintegration services, etc.);
- Lowering costs associated with the population of focus;
- Supporting strategies that ensure drug court practitioners have tools to effectively manage these interventions, including data collection and analysis, training and technical assistance; and
- Tracking and improving drug court performance.

BJA’s and SAMHSA’s Joint Adult Drug Court Grant Program is committed to ensuring fair and equitable treatment of drug court participants regardless of race or ethnic background.

The intended outcomes from these goals and objectives should result in reductions in recidivism and substance abuse of the population of focus while increasing an offender’s likelihood of successful reintegration into the community.

Evidence-Based Programs or Practices

OJP strongly emphasizes the use of data and evidence in policy making and program development in criminal justice, juvenile justice, and crime victim services. OJP is committed to:

- Improving the quantity and quality of evidence OJP generates
- Integrating evidence into program, practice, and policy decisions within OJP and the field

- Improving the translation of evidence into practice

OJP considers programs and practices to be evidence-based when their effectiveness has been demonstrated by causal evidence, generally obtained through one or more outcome evaluations. Causal evidence documents a relationship between an activity or intervention (including technology) and its intended outcome, including measuring the direction and size of a change, and the extent to which a change may be attributed to the activity or intervention. Causal evidence depends on the use of scientific methods to rule out, to the extent possible, alternative explanations for the documented change. The strength of causal evidence, based on the factors described above, will influence the degree to which OJP considers a program or practice to be evidence-based. OJP's CrimeSolutions.gov web site is one resource that applicants may use to find information about evidence-based programs in criminal justice, juvenile justice, and crime victim services.

Applicants can also find information on evidence-based treatment practices in the SAMHSA Guide to Evidence-Based Practices (EBP) available at www.samhsa.gov/ebpwebguide. The Guide provides a short description and a link to dozens of web sites with relevant EBP information—either specific interventions or comprehensive reviews of research findings. Note that SAMHSA's Guide also references the [National Registry of Evidence-Based Programs and Practices](http://NationalRegistryofEvidenceBasedProgramsandPractices.org) (NREPP), a searchable database of interventions for the prevention and treatment of mental and substance use disorders. NREPP is intended to serve as a decision support tool, not as an authoritative list of effective interventions. Being included in NREPP, or in any other resource listed in the Guide, does not mean an intervention is “recommended” or that it has been demonstrated to achieve positive results in all circumstances.

Medication-Assisted Treatment (MAT) is an evidence-based substance abuse treatment protocol and BJA and SAMHSA support the right of individuals to have access to FDA-approved medications under the care and prescription of a physician. BJA and SAMHSA recognize that not all communities have access to MAT due to a lack of physicians who are able to prescribe and oversee clients using anti-alcohol and opioid medications. This will not preclude the applicant from applying, but where and when available, BJA and SAMHSA support the client's right to access MAT. This right extends to participation as a client in a BJA/SAMHSA-funded drug court.

Applicants must affirm, in the Statement of Assurance ([Requirements Resource Guide](#)), that the treatment drug court(s) for which funds are sought will not deny any eligible client for the treatment drug court access to the program because of their use of FDA-approved medications for the treatment of substance use disorders (e.g., methadone, buprenorphine products including buprenorphine/naloxone combination formulations and buprenorphine mono-product formulations, naltrexone products including extended-release and oral formulations, disulfiram, and acamprosate calcium). Specifically, methadone treatment rendered in accordance with current federal and state methadone dispensing regulations from an Opioid Treatment Program and ordered by a physician who has evaluated the client and determined that methadone is an appropriate medication treatment for the individual's opioid use disorder must be permitted. Similarly, medications available by prescription must be permitted unless the judge determines the following conditions have not been met:

- the client is receiving those medications as part of treatment for a diagnosed substance use disorder
- a licensed clinician, acting within their scope of practice, has examined the client and determined that the medication is an appropriate treatment for their substance use disorder

- the medication was appropriately authorized through prescription by a licensed prescriber

In all cases, MAT must be permitted to be continued for as long as the prescriber determines that the medication is clinically beneficial. Grantees must assure that a drug court client will not be compelled to no longer use MAT as part of the conditions of the drug court if such a mandate is inconsistent with a licensed prescriber's recommendation or valid prescription.

Under no circumstances may a drug court judge, other judicial official, correctional supervision officer, or any other staff connected to the identified drug court deny the use of these medications when made available to the client under the care of a properly authorized physician and pursuant to regulations within an Opioid Treatment Program or through a valid prescription and under the conditions described above. A judge, however, retains judicial discretion to mitigate/reduce the risk of abuse, misuse, or diversion of these medications. See the [Requirements Resource Guide](#) for more information.

SAMHSA's services grants are intended to fund services or practices that have a demonstrated evidence base and that are appropriate for the population(s) of focus. An EBP refers to treatment approaches that are validated by some form of documented research evidence. In the project narrative, applicants will need to:

- Identify the EBP(s) you propose to implement for the specific population(s) of focus;
- Identify and discuss the evidence that shows that the practice(s) is (are) effective for the specific population(s) of focus;
- If you are proposing to use more than one EBP, provide a justification for doing so and clearly identify which service modality and population of focus each practice will support; and
- Discuss the population(s) for which the practice(s) has (have) been shown to be effective and show that it (they) is (are) appropriate for your population(s) of focus.

SAMHSA recognizes that EBPs have not been developed for all populations and/or service settings. See the [Requirements Resource Guide for Using Evidence-Based Practices](#).

[Note: See the [Requirements Resource Guide](#) for Funding Restrictions regarding allowable costs for EBPs.]

Based on a review of drug court evaluations and research, BJA has partnered with the National Institute of Justice (NIJ) to identify recommended policies and practices to yield effective interventions that maximize the return on investment for Adult Drug Court Program funding. Findings from the NIJ's Multi-site Adult Drug Court Evaluation are available at www.ojp.usdoj.gov/nij/topics/courts/drug-courts/madce.htm.

A priority consideration will be given to applications that propose designs and strategies that are consistent with each of the following 10 evidence-based program design features listed below.

More information on designing a program around recent evidence-based research findings is available from the BJA-funded [Research to Practice web site](#). (Applicants may propose alternative program designs that depart from this list with compelling justification; however, priority consideration may not be provided for these applicants depending on the justification.)

Adult Drug Court 10 Key Components and Corresponding Evidence-Based Program Principles

Key Component #1: Drug courts integrate alcohol and other drug treatment services with justice system case processing.

(Corresponding evidence-based program principle) Treatment and Other Services—*The applicant should maintain program resources that: address drug court participant needs identified over time; accommodate the range of treatment and other rehabilitation services required; and apply case management beyond initial referral to confirm that providers appropriately deliver ongoing assessment and services.*

Key Component #2: Using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights.

Key Component #3: Eligible participants are identified early and promptly placed in the drug court program.

(Corresponding evidence-based program principle) Screening and Assessment—*Referral sources and other stakeholders should be clear on program eligibility criteria, which must be consistent with targeted population needs and available program resources. Applicants should demonstrate an ability to screen promptly and systematically for all offenders potentially eligible for the drug court, identify the agency which will conduct this screening, and detail the procedures that will be used for screening.*

The applicant should further demonstrate how those offenders determined to be eligible for the drug court as a result of screening will then be assessed to identify their risk for relapse and recidivism, as well as the nature of treatment and other rehabilitation needs. Assessments should be conducted using instruments that have been validated for the targeted population and updated periodically. Treatment and other service assessments should be reviewed and adjusted to gauge offender needs that may change over time.

(Corresponding evidence-based program principle) Population of Focus—*Program resources should be prioritized for offenders who demonstrate both high criminogenic risk and high substance abuse treatment need. Applicants should aim to serve offenders whose characteristics and risk factors directly relate to a high probability of offending, and who are frequent drug users diagnosed for drug dependence. Also, applicants should target offenders who are subject to (or eligible for) legal sanctions that may provide greater leverage in program compliance.*

Key Component #4: Drug courts provide access to a continuum of alcohol, drug, and other related treatment and rehabilitation services.

(Corresponding evidence-based program principle) Relapse Prevention, Aftercare and Community Integration—*From the first program phase, the applicant should demonstrate how culturally sensitive planning and other programming will be implemented to support relapse prevention, community integration, and aftercare/continuing care services.*

Key Component #5: Abstinence is monitored by frequent alcohol and other drug testing.

(Corresponding evidence-based program principle) Monitoring—*The applicant should demonstrate a comprehensive plan to: monitor drug court participants using random drug testing and community supervision; disseminate results efficiently to the drug court team; and immediately respond to noncompliance according to established program requirements.*

Key Component #6: A coordinated strategy governs drug court responses to participants' compliance.

(Corresponding evidence-based program principle) Procedural and Distributive Justice—*Applicants should establish and clearly communicate a system of graduated sanctions and incentives that is activated and delivered with certainty in response to offender behavior. Information from the drug court team and the offender should be considered in determining noncompliance and the appropriate response. Specific program responses should be meaningful to the offenders, understandable, and delivered in a manner that is perceived as fair and equitable.*

Key Component #7: Ongoing judicial interaction with each drug court participant is essential.

(Corresponding evidence-based program principle) Judicial Interaction—*Judges should interact directly and regularly with drug court participants during drug court hearings, which should be as frequent as the participant may require. As the program leader, the judge will maintain authority by demonstrating support for the program and knowledge of individual offenders. Communication between the participant and the judge should be based on a foundation of respect, and judges must maintain an understanding of program resources available to assess and respond to participant behavior.*

Key Component #8: Monitoring and evaluating to measure the achievement of program goals and gauge effectiveness.

Key Component #9: Continuing interdisciplinary education promotes effective drug court planning, implementation, and operations.

Key Component #10: Forging partnerships among drug courts, public agencies, and community-based organizations generates local support and enhances drug court program effectiveness.

More information on designing a program around recent evidence-based research findings is available from the BJA-funded [Research to Practice web site](#).

For additional information related to the drug court research supporting the Evidence-Based Program Principles and Key Components, visit the following:

- Quality Improvement for Drug Courts: Evidence-Based Practices: www.ndci.org/sites/default/files/ndci/Mono9.QualityImprovement.pdf.
- SAMHSA's NREPP, an online registry of mental health and substance abuse interventions: www.nrepp.samhsa.gov/LearnLanding.aspx.
- NIJ's Multi-site Adult Drug Court Evaluation: www.nij.gov/topics/courts/drug-courts/pages/madce.aspx

Note: Appendices A-C include key components and corresponding evidence-based program principles of the Tribal Healing to Wellness Courts, Veterans Treatment Courts, and Driving While Intoxicated Courts.

BJA Drug Court Enhancement Component (BJA Grant Funds):

Applicants may propose to use BJA funding to incorporate the evidence-based design features noted above to: 1) expand the population of focus, 2) enhance court operations, 3) enhance court services, and/or 4) enhance offender services. Additionally:

1. Applicants are encouraged to include or establish new services for populations not currently being served in the drug court based on an examination of the emerging needs in their local offender population.
2. Applicants may propose to enhance court operations including training programs for drug court practitioners, drug court program evaluations, performance management system implementation, and automated management information system implementation.
3. Applicants may propose to use funding to expand and/or enhance court services in areas such as offender management, including drug testing, case management, and community supervision.
4. Applicants may also propose to improve the quality and/or intensity of services; for instance, funding may be used for enhancing offender services such as healthcare and mental health care, education, vocational training, job training and placement, housing placement assistance, and childcare or other family support services for each participant who requires such services.

For examples of drug court services allowable under this program, see the [Requirements Resource Guide](#).

SAMHSA Substance Abuse Treatment Component (SAMHSA Grant Funds):

SAMHSA funding is intended to fund treatment services or practices that have a demonstrated evidence base and that are appropriate for the drug court population. Applicants should discuss the evidence base for their proposed service selection in the program narrative. **For more information on EBPs, see “Using Evidence-Based Practices” in the [Requirements Resource Guide](#).**

Applicants are required to enhance and/or expand substance abuse treatment and recovery support services. **For information on allowable substance abuse treatment and recovery support services, see the [Requirements Resource Guide](#).**

Service Enhancement: An applicant may propose to improve **the quality and/or intensity of substance abuse treatment services and recovery support services**, for instance, by adding state-of-the-art treatment approaches, or adding a new service to address emerging trends or unmet needs. For example, a substance abuse treatment project may propose to add a co-occurring substance use and mental disorders treatment intervention to the current treatment protocol for a population being served by the program.

Service Expansion: An applicant may also propose to **increase access and availability of services to a larger number of clients**. Applicants may propose to increase the number of clients receiving services as a result of the award. For example, if a drug court currently serves 50 persons per year and has a waiting list of 50 persons (but no funding to serve these persons), the

applicant may propose to expand service capacity to be able to admit some or all of those persons on the waiting list.

To demonstrate that a comprehensive service system is in place, the substance abuse treatment providers for the drug court must provide letters of commitment which outline the services to be provided including the level and intensity of resources committed. These documents must be provided as **Attachment 6** of the application.

Applicants must screen and assess clients for the presence of co-occurring substance use and mental disorders and use the information obtained from the screening and assessment to develop appropriate treatment approaches for the persons identified as having such co-occurring disorders.

In alignment with the goals of SAMHSA's Trauma and Justice Strategic Initiative, this program aims to reduce the pervasive, harmful, and costly health impact of violence and trauma by integrating trauma-informed approaches throughout health, behavioral health, and related systems.

In order to address the prevalent issue of trauma histories in offender populations, applicants must demonstrate how staff will be trained in trauma-informed practices and how these practices will be integrated into the clinical treatment and recovery services provided for the drug court clients. For more information on trauma and trauma-informed practices, go to the National Center for Trauma-Informed Care at www.samhsa.gov/nctic/.

Applicants must demonstrate that they have developed linkages with community-based substance abuse treatment organizations with experience in providing services to the population of focus.

Examples of possible community linkages are provided in the [Requirements Resource Guide](#).

Recognizing that Medication-Assisted Treatment (MAT) may be an important part of a comprehensive treatment plan, SAMHSA Treatment Drug Court grantees are encouraged to use **up to 20 percent** of the annual grant award to pay for FDA-approved medications (e.g., methadone, buprenorphine products including buprenorphine/naloxone combination formulations and buprenorphine mono-product formulations, naltrexone products including extended-release and oral formulations, disulfiram, and acamprosate calcium) when the client has no other source of funds to do so.

Grantees are encouraged to provide HIV rapid preliminary antibody testing as part of their treatment regimen. Grantees providing HIV testing must do so in accordance with state and local requirements. **Up to 5 percent** of SAMHSA grant funds may be used for HIV rapid testing. (Note: Grant funds may be used to purchase such services from another provider.) All clients who have a preliminary positive HIV test result must be administered a confirmatory HIV test result. Post award, grantees must develop a plan for medical case management of all clients who have a preliminary positive HIV and confirmatory HIV test result.

All clients who are considered to be at risk for viral hepatitis (B and C) as specified by the Centers for Disease Control and Prevention's (CDC) recommendations for hepatitis B (CDC, 2008)² and

² Centers for Disease Control and Prevention. Recommendations for identification and public health management of persons with chronic hepatitis b virus infection. MMWR 2008; 57(No. RR-8): 1-39.
www.cdc.gov/mmwr/preview/mmwrhtml/rr5708a1.htm.

hepatitis C (CDC, 1998)³ must be tested for viral hepatitis (B and C) in accordance with state and local requirements, either onsite or through referral. **Up to \$5,000** of SAMHSA grant funds (when no other funds are available) may be used for viral hepatitis (B and C) testing, including purchase of test kits and other required supplies (e.g., gloves, biohazardous waste containers, etc.) and training for staff related to viral hepatitis (B and C) testing. Grantees must report all positive viral hepatitis test results to the local and state health department, as appropriate.

Applicants must provide a plan for providing referrals to viral hepatitis testing (if applicable), and to treatment for all clients testing positive for viral hepatitis (B or C) and provide memoranda of agreement demonstrating that they have linkages with appropriate treatment providers in **Attachment 6** of their application.

SAMHSA strongly encourages all grantees to provide a tobacco-free workplace and to promote abstinence from all tobacco products (except in regard to accepted tribal traditions and practices).

Grantees must utilize third party and other revenue realized from provision of services to the extent possible and use SAMHSA grant funds only for services to individuals who are ineligible for public or commercial health insurance programs, individuals for whom coverage has been formally determined to be unaffordable, or for services that are not sufficiently covered by an individual's health insurance plan. Grantees are also expected to facilitate the health insurance application and enrollment process for eligible uninsured clients. Grantees should also consider other systems from which a potential service recipient may be eligible for services (for example, the Veterans Administration or senior services) if appropriate for and desired by that individual to meet his/her needs. In addition, grantees are required to implement policies and procedures that ensure other sources of funding are secured first when available for that individual.

Over 2 million men and women have been deployed to serve in support of overseas contingency operations, including Operation Enduring Freedom, Operation Iraqi Freedom, and Operation New Dawn. Individuals returning from Iraq and Afghanistan are at increased risk for suffering post-traumatic stress and other related disorders. Experts estimate that up to one-third of returning veterans will need mental health and/or substance abuse treatment and related services. In addition, the family members of returning veterans have an increased need for related support services. To address these concerns, SAMHSA strongly encourages all applicants to consider the unique needs of returning veterans and their families in developing their proposed project and consider prioritizing this population for services where appropriate.

This jointly funded grant program seeks to address behavioral health disparities among racial and ethnic minorities by encouraging the implementation of strategies to decrease the differences in access, service use, and outcomes among the racial and ethnic minority populations served. If your application is funded, you will be expected to develop a behavioral health disparities impact statement no later than 60 days after your award. In this statement you must propose: (1) the number of individuals to be served during the grant period and identify subpopulations (i.e., racial, ethnic, sexual, and gender minority groups) vulnerable to behavioral health disparities; (2) a quality improvement plan for the use of program data on access, use, and outcomes to support efforts to decrease the differences in access to, use, and outcomes of service activities; and (3) methods for the development of policies and procedures to ensure adherence to the National Standards for

³ Centers for Disease Control and Prevention. Recommendations for prevention and control of hepatitis c virus (HCV) infection and HCV-related chronic disease. MMWR 1998; 57(No. RR-19): 1-20.
www.cdc.gov/hepatitis/HCV/GuidelinesC.htm.

Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care. More information about behavioral health disparities is available in the [Requirements Resource Guide: Appendix E – Addressing Behavioral Health Disparities](#).

Applicants that do not meet the requirements of both BJA and SAMHSA will not be granted an award.

B. Federal Award Information

Amount and Length of Awards

	BJA Funding	SAMHSA Funding
Anticipated Total Available Funding:	\$3,000,000	\$3,250,000
Estimated Number of Awards:	10	10
Estimated Award Amount:	Up to \$300,000 as a <u>one-time award</u> for the entire 3-year grant period	Up to <u>\$325,000 per year for each year</u> of the 3-year grant period
Cost Sharing/Match Required:	Yes. See Requirements Resource Guide for more information on BJA match requirements	No
Project Period:	Up to 3 years	Up to 3 years

Proposed SAMHSA budgets cannot exceed \$325,000 in total costs (direct and indirect) in any year of the proposed project and cannot exceed \$975,000 for the total 3 years. Annual SAMHSA continuation awards will depend on the availability of funds, grantee progress in meeting project goals and objectives, timely submission of required data and reports, and compliance with all terms and conditions of award.

All awards are subject to the availability of appropriated funds and to any modifications or additional requirements that may be imposed by law.

Type of Award⁴

BJA and SAMHSA expect that they will make any award from this solicitation in the form of a grant.

Financial Management and System of Internal Controls

If selected for funding, the award recipient must:

(a) Establish and maintain effective internal control over the federal award that provides reasonable assurance that the non-federal entity is managing the federal award in compliance with federal statutes, regulations, and the terms and conditions of the federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control

⁴ See generally 31 U.S.C. §§ 6301-6305 (defines and describes various forms of federal assistance relationships, including grants and cooperative agreements (a type of grant)).

Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).

(b) Comply with federal statutes, regulations, and the terms and conditions of the federal awards.

(c) Evaluate and monitor the non-federal entity's compliance with statute, regulations and the terms and conditions of federal awards.

(d) Take prompt action when instances of noncompliance are identified including noncompliance identified in audit findings.

(e) Take reasonable measures to safeguard protected personally identifiable information and other information the federal awarding agency or pass-through entity designates as sensitive or the non-federal entity considers sensitive consistent with applicable federal, state, and local laws regarding privacy and obligations of confidentiality.

In order to better understand administrative requirements and cost principles, award applicants are encouraged to enroll, at no charge, in the Department of Justice Grants Financial Management Online Training available [here](#).

Budget Information for BJA and SAMHSA

If awarded, grantees will receive two separate grant awards. Applicants must provide **two separate budgets** (i.e., a budget for the requested BJA grant funds and a budget for the requested SAMHSA grant funds). Additionally, if awarded, grantees must have a system in place to track both the BJA grant and SAMHSA grant fund expenditures separately.

BJA Grant Budget Requirements:

Cost Sharing or Match Requirement (a portion of the match must be cash and the remainder can be in-kind)

Federal funds awarded under this program may not cover more than 75 percent of the total costs of the project being funded. The applicant must identify the source of the 25 percent non-federal portion of the total project costs and how match funds will be used. If a successful applicant's proposed match exceeds the required match amount, and OJP approves the budget, the total match amount incorporated into the approved budget becomes mandatory and subject to audit. (Match is restricted to the same uses of funds as allowed for the federal funds.) Applicants may satisfy this match requirement with any portion of cash and the remainder can be in-kind funds. See the [Financial Guide](#) for definitions and examples of in-kind funding. The formula for calculating the match is:

$$\frac{\text{Federal Award Amount}}{\text{Federal Share Percentage}} = \text{Adjusted (Total) Project Costs}$$

$$\text{Required Recipient's Share Percentage} \times \text{Adjusted Project Cost} = \text{Required Match}$$

Example: 75%/25% match requirement: for a federal award amount of \$300,000, match would be calculated as follows:

$\frac{\$300,000}{75\%} = \$400,000$ 25% x \$400,000 = \$100,000 match

Applicants wishing to exceed the 25 percent match amount should reflect the amount above 25 percent in the program narrative section only. The budget detail should distinguish cash from in-kind matched funds using an asterisk to show what percentage of the budget is cash. (Refer to the Financial Guide at www.ojp.gov/financialguide/index.htm.)

Pre-Agreement Cost Approvals

OJP does not typically approve pre-agreement costs; an applicant must request and obtain the prior written approval of OJP for all such costs. If approved, pre-agreement costs could be paid from grant funds consistent with a grantee's approved budget, and under applicable cost standards. However, all such costs prior to award and prior to approval of the costs are incurred at the sole risk of an applicant. Generally, no applicant should incur project costs *before* submitting an application requesting federal funding for those costs. Should there be extenuating circumstances that appear to be appropriate for OJP's consideration as pre-agreement costs, the applicant should contact the point of contact listed on the title page of this announcement for details on the requirements for submitting a written request for approval. See the section on Costs Requiring Prior Approval in the [Financial Guide](#), for more information.

Limitation on Use of Award Funds for Employee Compensation; Waiver

With respect to any award of more than \$250,000 made under this solicitation, federal funds may not be used to pay total cash compensation (salary plus bonuses) to any employee of the award recipient at a rate that exceeds 110 percent of the maximum annual salary payable to a member of the federal government's Senior Executive Service (SES) at an agency with a Certified SES Performance Appraisal System for that year.⁵ The 2015 salary table for SES employees is available on the Office of Personnel Management [web site](#). Note: A recipient may compensate an employee at a higher rate, provided the amount in excess of this compensation limitation is paid with non-federal funds. (Any such additional compensation will not be considered matching funds where match requirements apply.)

The Assistant Attorney General (AAG) for OJP may exercise discretion to waive, on an individual basis, the limitation on compensation rates allowable under an award. An applicant requesting a waiver should include a detailed justification in the budget narrative of the application. Unless the applicant submits a waiver request and justification with the application, the applicant should anticipate that OJP will request the applicant to adjust and resubmit the budget.

Prior Approval, Planning, and Reporting of Conference/Meeting/Training Costs

OJP strongly encourages applicants that propose to use award funds for any conference-, meeting-, or training-related activity to review carefully – before submitting an application – the OJP policy and guidance on “conference” approval, planning, and reporting available at www.ojp.gov/funding/confcost.htm. OJP policy and guidance (1) encourage minimization of conference, meeting, and training costs; (2) require prior written approval (which may affect project timelines) of most such costs for cooperative agreement recipients and of some such costs for grant recipients; and (3) set cost limits, including a general prohibition of all food and beverage costs.

⁵ This limitation on use of award funds does not apply to the non-profit organizations specifically named at Appendix VIII to 2 C.F.R. part 200.

Costs Associated with Language Assistance (if applicable)

If an applicant proposes a program or activity that would deliver services or benefits to individuals, the costs of taking reasonable steps to provide meaningful access to those services or benefits by individuals with limited English proficiency may be allowable. Reasonable steps to provide meaningful access to services or benefits may include interpretation or translation services where appropriate.

For additional information, see the "Civil Rights Compliance" section of the OJP "Other Requirements for OJP Applications" web page at www.ojp.gov/funding/other_requirements.htm.

SAMHSA Grant Budget Requirements:

- No match is required for the SAMHSA budget.
- Applicants must provide a per-unit cost for this program. One approach might be to provide a per-person or unit cost of the project to be implemented. This figure can be calculated by: 1) taking the total cost of the project over the lifetime of the grant and subtracting 20 percent for data and performance assessment; 2) dividing this number by the total unduplicated number of persons to be served. Another approach might be to calculate a per-person or unit cost based upon your organization's history of providing a particular service(s). This might entail dividing the organization's annual expenditures on a particular service(s) by the total number of persons/families who received that service during the year. Another approach might be to deliver a cost per outcome achieved. Justify that this per-unit cost is providing high quality services that are cost effective. Describe your plan for maintaining and/or improving the provision of high quality services that are cost effective throughout the life of the grant.
- Applicants must include key staff positions (Project Director and Clinical Supervisor) in the budget. If the Project Director is a contractor/consultant, the applicant must include a copy of the contract or proposed contract with the application.
- SAMHSA's Sample Budget and Justification format must be used. A sample budget and justification is included in the [Requirements Resource Guide](#).

For a comprehensive list of SAMHSA requirements and funding restrictions, see the [Requirements Resource Guide](#).

C. Eligibility Information

For additional eligibility information, see Title page.

Cost Sharing or Match Requirement

For additional information on the BJA match requirement, see Section [B. Federal Award Information](#).

Limit on Number of Application Submissions

If an applicant submits multiple versions of the same application, BJA and SAMHSA will review only the most recent system-validated version submitted. For more information on system-validated versions, see [How To Apply](#).

D. Application and Submission Information

What an Application Should Include

Applicants should anticipate that if they fail to submit an application that contains all of the specified elements, it may negatively affect the review of the application, and, should a decision be made to make an award, it may result in the inclusion of special conditions that preclude access to or use of award funds pending satisfaction of the conditions.

Moreover, applicants should anticipate that applications that are unresponsive to the scope of the solicitation, or that do not include application elements designated by BJA and SAMHSA to be critical, will neither proceed to peer review nor receive further consideration. Under this solicitation, BJA and SAMHSA have designated the following application elements as critical: Program Narrative, BJA Budget Detail Worksheet, BJA Budget Narrative, SAMHSA Budget and Narrative. The BJA Budget Detail Worksheet and BJA Budget Narrative should be combined in one document and must contain **both** narrative and detail information. The SAMHSA Budget and Narrative should also be combined and uploaded as a separate attachment.

BJA and SAMHSA strongly recommend use of appropriately descriptive file names (e.g., "Program Narrative," "BJA Budget Detail Worksheet and Budget Narrative," "SAMHSA Budget and Narrative," "Time Task Plan," "Memoranda of Understanding," "Resumes") for all attachments. OJP recommends that resumes be included in a single file.

1. Information to Complete the Application for Federal Assistance (SF-424)

The SF-424, which should reflect only the BJA funding request, is a required standard form used as a cover sheet for submission of pre- applications, applications, and related information. Grants.gov and GMS take information from the applicant's profile to populate the fields on this form. When selecting "type of applicant," if the applicant is a for-profit entity, select "For-Profit Organization" or "Small Business" (as applicable). **NOTE: An SF-424 must be completed for SAMHSA funding and should be included in Attachment 4.** See the [Requirements Resource Guide](#) for further information.

Intergovernmental Review: This funding opportunity (program) **is not** subject to [Executive Order 12372](#). (In completing the SF-424, applicants are to make the appropriate selection in response to question 19 to indicate that the "Program is not covered by E.O. 12372.")

2. Abstract and Program Narrative (Attachment 1)

Only **one** program narrative should be submitted. The program narrative must respond to the solicitation and should address the [Selection Criteria](#) (1-4) listed below in the order given. The program narrative should be double-spaced, using a standard 12-point font (Times New Roman is preferred) with 1-inch margins, and should not exceed 30 pages. Number pages "1 of 30" "2 of 30," etc.

If the program narrative fails to comply with these length-related restrictions, noncompliance may be considered in peer review and in final award decisions.

Abstract:

The first page of the program narrative must include an abstract. This page does not count toward the 30-page limit for the program narrative. Your total abstract must not be longer than 35 lines.

The abstract should include the project name, population to be served, strategies/ interventions proposed, project goals and measurable objectives, including the number of people to be served annually and throughout the lifetime of the project, etc. In the first five lines or less of the abstract, write a summary of the project that can be used, if the project is funded, in publications, reporting to Congress, or press releases. A sample abstract can be found in the Application Information section of the [Requirements Resource Guide](#). The abstract should affirm that the 10 key components of a drug court are or will be met and must indicate which of the seven evidence-based design features are proposed in the application. Also note the corresponding page numbers where features are highlighted in the application.

Note: In the abstract, applicants must provide the target goal (number) of people to whom they expect to provide services under this project during the grant award period. Applicants should identify the number of clients that will be served with SAMHSA funding and the number of clients that will be served with BJA funding. This number will serve as the target number, and BJA and SAMHSA will measure the applicant against these target numbers, if the applicant is selected to receive an award.

Program Narrative:

The following sections should be included as part of the program narrative:

1. Statement of the Problem
2. Project Design and Implementation
3. Capabilities and Competencies
4. Evaluation, Aftercare, Sustainability, and Plan for Collecting the Performance Measurement Data

There will be two primary types of data reporting required by BJA and SAMHSA, which includes biannual report to SAMHSA, quarterly reports to BJA, and Government Performance and Results Act (GPRA) (Public Law 103-62) reporting requirements. The biannual report to SAMHSA provides an overview of the goals and objectives of the grant as proposed in the application and the progress made in achieving these measures.

NOTE: BJA and SAMHSA do not require applicants to submit performance measures data with their application. Performance measures are included as an alert that BJA and SAMHSA will require grantees to submit specific data as part of their reporting requirements. For the application, applicants should indicate an understanding of these requirements and discuss how they will gather the required data, should they receive funding.

BJA Performance Measures:

To assist the Department with fulfilling its responsibilities under the Government Performance and Results Act of 1993 (GPRA), Public Law 103-62, and the GPRA Modernization Act of 2010, Public Law 111-352, applicants that receive funding under this solicitation must regularly provide data to measure the results of their work done under this solicitation. Post award, recipients will be required to submit quarterly performance metrics through BJA's online Performance Measurement Tool (PMT), located at www.bjaperformancetools.org. Applicants should review the complete list of BJA Adult Drug Court Program performance measures at: www.bjaperformancetools.org/help/EnhancementDrugCourtMeasures.pdf.

Note on Project Evaluations

Applicants that propose to use funds awarded through this solicitation to conduct project evaluations should be aware that certain project evaluations (such as systematic investigations designed to develop or contribute to generalizable knowledge) may constitute “research” for purposes of applicable DOJ human subjects protection regulations. However, project evaluations that are intended only to generate internal improvements to a program or service, or are conducted only to meet OJP’s performance measure data reporting requirements likely do not constitute “research.” Applicants should provide sufficient information for OJP to determine whether the particular project they propose would either intentionally or unintentionally collect and/or use information in such a way that it meets the DOJ regulatory definition of research.

Research, for the purposes of human subjects protections for OJP-funded programs, is defined as, “a systematic investigation, including research development, testing, and evaluation, designed to develop or contribute to generalizable knowledge” 28 C.F.R. § 46.102(d). For additional information on determining whether a proposed activity would constitute research, see the decision tree to assist applicants on the “Research and the Protection of Human Subjects” section of [OJP Funding Resource Center](https://oip.gov/funding/Explore/SolicitationRequirements/EvidenceResearchEvaluationRequirements.htm) web page (oip.gov/funding/Explore/SolicitationRequirements/EvidenceResearchEvaluationRequirements.htm). Applicants whose proposals may involve a research or statistical component also should review the “Data Privacy and Confidentiality Requirements” section on that web page.

SAMHSA Data Collection and Performance Measurement Requirements:

All SAMHSA grantees are required to collect and report certain data so that SAMHSA can meet its obligations under the Government Performance and Results (GPRA) Modernization Act of 2010. Applicants must document their ability to collect and report the required data in Selection Criteria #4 “Evaluation, Aftercare, Sustainability, and Plan for Collecting the Performance Measurement Data” in the program narrative section of the application.

In addition to demographic data (gender, age, race, and ethnicity) on all clients served, grantees will be required to report performance on the following GPRA performance measures: abstinence from use, housing status, employment status, criminal justice system involvement, access to services, retention in services, and social connectedness. This information will be gathered using a uniform data collection tool provided by SAMHSA. The current tool is being updated and will be provided upon award. An example of the type of data collection tool required can be found at <https://cdp.samhsa.gov/>.

Data will be collected via a face-to-face interview using this tool at three data collection points: intake to services, six months post intake, and at discharge. Grantees will be expected to do a GPRA interview on all clients in their specified unduplicated target number and are also expected to achieve a six-month follow-up rate of 80 percent. Once data are collected, grantees are required to utilize the Common Data Platform (CDP), SAMHSA’s web-based data collection and reporting tool. All data must be submitted through the CDP within seven days of data collection.

Grantees and subawardees will be provided training on the system and its requirements post award.

The collection of these data will enable SAMHSA to report on key outcome measures relating to substance use. In addition to these outcomes, data collected by grantees will be used to demonstrate how SAMHSA's grant programs are reducing disparities in access, service use, and outcomes nationwide.

Performance data will be reported to the public, the Office of Management and Budget (OMB), and Congress as part of SAMHSA's budget request.

Note: The applicant is required to identify the number of clients that will be served annually and over the entire 3-year project period. The number of clients identified by the applicant is the number of clients that will have GPRA intake, 6 months post intake, and discharge as previously noted above. For more information see "Proposed Number of Service Recipients-Guidelines and Definitions" in the [Requirements Resource Guide](#).

SAMHSA Local Performance Assessment Requirements:

Grantees must periodically review the performance data they report to SAMHSA (as required above) and assess their progress and use this information to improve management of their grant projects. The assessment should be designed to help grantees determine whether they are achieving the goals, objectives, and outcomes they intend to achieve and whether adjustments need to be made to their project. Performance assessments also should be used to determine whether the project is having /will have the intended impact on behavioral health disparities. Grantees will be required to report on their progress achieved, barriers encountered, and efforts to overcome these barriers in a performance assessment report to be submitted at least annually.

At a minimum, the performance assessment should include the required performance measures identified above. Grantees may also consider outcome and process questions, such as the following:

Outcome Questions:

- What was the effect of the intervention on key outcome goals?
- What program/contextual factors were associated with outcomes?
- What individual factors were associated with outcomes, including race/ethnicity/sexual identity (sexual orientation/gender identity)?
- How durable were the effects?
- Was the intervention effective in maintaining the project outcomes at 6-month follow-up?

As appropriate, describe how the data, including outcome data, will be analyzed by racial/ethnic group or other demographic factors to assure that appropriate populations are being served and that disparities in services and outcomes are minimized.

Process Questions:

- How closely did implementation match the plan?
- What types of changes were made to the originally proposed plan?
- What types of changes were made to address disparities in access, service use, and outcomes across subpopulations, including the use of the National CLAS standards?

- What led to the changes in the original plan?
- What effect did the changes have on the planned intervention and performance assessment?
- Who provided (program staff) what services (modality, type, intensity, duration), to whom (individual characteristics), in what context (system, community), and at what cost (facilities, personnel, dollars)?
- What strategies were used to maintain fidelity to the EBP or intervention across providers over time?

The performance assessment report should be a component of or an attachment to the biannual progress report due in October of each grant year.

Up to 20 percent of the total SAMHSA grant award may be used for data collection, performance measurement, and performance assessment, including incentives for participating in the required data collection follow-up.

3. **Two Budgets: BJA Budget Detail Worksheet and Narrative AND SAMHSA Budget and Narrative (Attachment 2)**

Applicants must provide **TWO** separate budgets (Selection Criteria 5) which clearly show the use for BJA funds and SAMHSA funds. If awarded, the grantee will receive two separate awards (BJA award and SAMHSA award) and will be responsible for tracking the resources separately.

- a. BJA Budget with a required match must clearly delineate the uses for BJA funds (not to exceed \$300,000). An example for the BJA budget can be found in the [Requirements Resource Guide](#) (Sample BJA Drug Court Funding Request Budget).
- b. SAMHSA Budget with no match must clearly show the use for the requested SAMHSA funds (not to exceed \$325,000 per year for up to 3 years for a total not to exceed \$975,000). An example for the SAMSHA budget can be found in the [Requirements Resource Guide](#) (SAMHSA Sample Budget and Justification - no match required).

Note: The Sample Budgets for BJA and SAMHSA differ. Applicants should complete the budgets using the correct template located in the [Requirements Resource Guide](#).

Required Grantee Meetings

Grantees must plan to attend an annual grantee meeting in each year of the grant. It is anticipated that during the 3-year grant period, grantees will alternate between physical, onsite grantee meetings and “virtual” grantee meetings on an alternating basis. FY 2017 is slated as a year for an in-person grantee meeting. Applicants should plan to send a drug court team consisting of the judge, project director, clinical director, evaluator, and a representative of the prosecutor’s office and the defense bar to at least one grantee meeting in each year of the grant (up to five staff). For onsite grantee meetings, applicants must include a detailed budget and narrative for this travel in their budget. At these meetings, grantees will present the results of their projects and federal staff will provide technical assistance. Each onsite grantee meeting will be 3 days. These meetings are usually held in the Washington, D.C., area and attendance is mandatory. Grantee meetings may coincide with other national drug court conferences. Applicants are encouraged to consider travel, conference registration fees, and per diem costs for other such conferences in their budgets.

BJA Budget Detail Worksheet and Budget Narrative and Indirect Cost Rate Agreement:

a. BJA Budget Detail Worksheet

A sample budget detail worksheet can be found at www.ojp.gov/funding/Apply/Resources/BudgetDetailWorksheet.pdf. If the budget is submitted in a different format, the budget categories listed in the sample budget worksheet should be included.

For questions pertaining to budget and examples of allowable and unallowable costs, see the Financial Guide at www.ojp.usdoj.gov/financialguide/index.htm.

The budget must indicate how the 75 percent BJA federal funds and the 25 percent match will be allocated in the overall budget.

b. BJA Budget Narrative

The Budget Narrative should thoroughly and clearly describe every category of expense listed in the Budget Detail Worksheet. OJP expects proposed budgets to be complete, cost effective, and allowable (e.g., reasonable, allocable, and necessary for project activities).

Applicants should demonstrate in their budget narratives how they will maximize cost effectiveness of grant expenditures. Budget narratives should generally describe cost effectiveness in relation to potential alternatives and the goals of the project. For example, a budget narrative should detail why planned in-person meetings are necessary, or how technology and collaboration with outside organizations could be used to reduce costs, without compromising quality.

The narrative should be mathematically sound and correspond with the information and figures provided in the Budget Detail Worksheet. The narrative should explain how the applicant estimated and calculated all costs, and how they are relevant to the completion of the proposed project. Applicants should identify the source of the 25 percent non-federal portion of the total project costs and how match funds will be used. The narrative may include tables for clarification purposes but need not be in a spreadsheet format. As with the Budget Detail Worksheet, the Budget Narrative should be broken down by year.

c. Non-Competitive Procurement Contracts In Excess of Simplified Acquisition Threshold

If an applicant proposes to make one or more non-competitive procurements of products or services, where the non-competitive procurement will exceed the simplified acquisition threshold (also known as the small purchase threshold), which is currently set at \$150,000, the application should address the considerations outlined in the [Financial Guide](#).

d. Pre-Agreement Cost Approvals

For information on pre-agreement costs, see Section [B. Federal Award Information](#).

e. Indirect Cost Rate Agreement (if applicable)

Indirect costs are allowed only if the applicant has a current federally approved indirect cost rate. (This requirement does not apply to units of local government.) Attach a copy of the federally approved indirect cost rate agreement to the application. Applicants that do not have an approved rate may request one through their cognizant federal agency, which will review all documentation and approve a rate for the applicant organization, or, if the applicant's accounting system permits, costs may be allocated in the direct cost categories.

For the definition of Cognizant Federal Agency, see the “Glossary of Terms” in the [Financial Guide](#). For assistance with identifying your cognizant agency, please contact the Customer Service Center at 1-800-458-0786 or at ask.ocfo@usdoj.gov. If DOJ is the cognizant federal agency, applicants may obtain information needed to submit an indirect cost rate proposal at www.ojp.gov/funding/Apply/Resources/IndirectCosts.pdf.

SAMHSA Budget and Narrative and Indirect Cost Rate Agreement:

a. SAMHSA Budget and Narrative

Applicants must provide a narrative justification of the items included in their proposed budget, as well as a description of existing resources and other support they expect to receive for the proposed project. Reference the [Requirements Resource Guide](#) for a sample of the SAMHSA budget and narrative as well as SAMHSA funding restrictions.

b. SAMHSA Indirect Cost Rate Agreement

SAMHSA will not accept a “research” indirect cost rate. The grantee must use the “other sponsored program rate” or the lowest rate available.

4. Additional Attachments

a. Project Timeline, Resumes, and Key Staff (Attachment 3)

Applicants must include a realistic timeline for the project, resumes, and job descriptions for proposed staff and identify key staff and level of effort. For more information, refer to the [Requirements Resource Guide](#).

b. SAMHSA Application Forms (Attachment 4)

For SAMHSA Substance Abuse Treatment funding, applicants must go to both Grants.gov (www.Grants.gov) and the SAMHSA web site (www.samhsa.gov/grants/applying/forms-resources) to download the required documents needed to apply for a SAMHSA grant.

Complete and include in Attachment 4 the forms identified in the SAMHSA Grant Application Package.

To view and/or download the required application forms, you must first search for the appropriate funding announcement number (called the opportunity number).

On the Grants.gov site (www.Grants.gov), select the Apply for Grants option from the Applicants Tab at top of the screen. Under STEP 1, click on the red button labeled: ‘Download a Grant Application Package’. Enter either the Funding Opportunity Number or the Catalogue of Federal Domestic Assistance (CFDA) Number exactly as they appear on the cover page of this solicitation, then click the Download Package button. The Catalog of Federal Domestic Assistance number for this solicitation is 16.585, titled “*Drug Court Discretionary Grant Program*,” and the funding opportunity number is BJA-2015-4179. In the Instructions column, click the Download link. You can view, print or save all of these forms. You can complete the forms for electronic submission to Grants.gov. Completed forms can also be saved and printed for your records. These required forms include:

- Application for Federal Assistance (SF-424);
- Budget Information – Non-Construction Programs (SF-424A);

- Project/Performance Site Location(s) Form;
- Disclosure of Lobbying Activities; and
- Checklist.

Applications that do not include these required forms will be screened out and will not be reviewed.

SAMHSA's Grants Web Site

You will find additional materials you will need to complete your application on SAMHSA's web site (www.samhsa.gov/grants/applying/forms-resources). These include:

- Assurances – Non-Construction Programs;
- Certifications;
- Charitable Choice Form SMA 170; and
- Examples of behavioral health disparities impact statement.

Be sure to check the SAMHSA web site periodically for any updates on this program.

c. SAMHSA Confidentiality and Participant Protection (Attachment 5)

Because of the confidential nature of the work in which many SAMHSA grantees are involved, it is important to have safeguards protecting individuals from risks associated with their participation in SAMHSA projects. Applicants must describe procedures relating to Confidentiality, Participant Protection, and the Protection of Human Subjects Regulations in Attachment 5 of their application (see "Confidentiality and SAMHSA Participant Protection" in the [Requirements Resource Guide](#)). Problems with confidentiality, participant protection, and the protection of human subjects identified during peer review of the application must be resolved prior to funding.

d. Evidence of Experience and Credentials for Substance Treatment Provider(s) and Letters of Commitment (Attachment 6)

Applicants must include the following as Attachment 6 of the application:

- (1) Identification of at least one experienced, licensed mental health/substance abuse treatment provider organization;
- (2) a list of all direct service provider organizations that have agreed to participate in the proposed project, including the applicant agency, if it is a treatment or prevention service provider organization;
- (3) letters of commitment from these direct service provider organizations;
- (4) the Statement of Assurance (provided in the [Requirements Resource Guide](#)) signed by the authorized representative of the applicant organization identified on the first page (SF-424) of the application, that assures SAMHSA that all listed providers **a)** meet the 2-year experience requirement, are appropriately licensed, accredited and certified, and that if the application is within the funding range for an award, the applicant will send the GPO the

required documentation within the specified time; and **b)** applicants must affirm that the treatment drug court(s) for which funds are sought will not: 1) deny any appropriate and eligible client for the treatment drug court access to the program because of their use of FDA-approved MAT medications (e.g., methadone, injectable naltrexone, non-injectable naltrexone, disulfiram, acamprosate calcium, buprenorphine, etc.) that is in accordance with an appropriately authorized prescribed by a physician's prescription; and 2) mandate that a drug court client no longer use MAT as part of the conditions of the drug court if such a mandate is inconsistent with a physician's recommendation or prescription.

For more information on Evidence of Experience and Credentials for Substance Treatment Provider(s) and Letters of Commitment/Formal Contractual Agreements, see the [Requirements Resource Guide](#).

e. State Substance Abuse Agency Director, or Designee Letter (Attachment 7)

Nontribal applicants must include a letter from the SSA Director or designated representative that they support the application and confirm that the proposal conforms to the framework of the State Strategy of Substance Abuse Treatment. **A listing of the SSAs can be found on SAMHSA's web site at <http://samhsa.gov/sites/default/files/ssadirectory.pdf>.** This requirement does not pertain to Indian government applicants. See below for information about the Tribal Authorizing Resolution requirement.

f. Chief Justice, State Court Administrator or Designee Letter (Attachment 8)

Nontribal applicants must include a letter from the Chief Justice of the state's highest court, the State Court Administrator, or a designee (for example the state drug or problem solving court coordinator) describing how the proposed application would enhance the statewide efforts related to problem-solving courts. A listing of the state drug and problem-solving court coordinators can be found on BJA's web site at www.bja.gov/ProgramDetails.aspx?Program_ID=58. This requirement does not pertain to Indian government applicants. See below for information about the Tribal Authorizing Resolution requirement.

5. Tribal Authorizing Resolution (if applicable, Attachment 9)

Tribes, tribal organizations, or third parties proposing to provide direct services or assistance to residents on tribal lands should include in their applications a resolution, a letter, affidavit, or other documentation, as appropriate, that certifies that the applicant has the legal authority from the tribe(s) to implement the proposed project on tribal lands. In those instances when an organization or consortium of tribes applies for a grant on behalf of a tribe or multiple specific tribes, then the application should include appropriate legal documentation, as described above, from all tribes that would receive services/assistance under the grant. A consortium of tribes for which existing consortium bylaws allow action without support from all tribes in the consortium (i.e., without an authorizing resolution or comparable legal documentation from each tribal governing body) may submit, instead, a copy of its consortium bylaws with the application.

Applicants that are unable to submit with the application a fully-executed (i.e., signed) copy of appropriate legal documentation, as described above, consistent with the applicable tribe's governance structure, should, at minimum, submit an unsigned, draft version of such legal documentation as part of its application (except in cases where, with respect to a tribal consortium applicant, consortium bylaws allow action without the support of all consortium member tribes). If selected for funding, use of and access to funds will be contingent on receipt

of the fully-executed legal documentation.

6. Applicant Disclosure of Pending Applications (Attachment 10)

Applicants are to disclose whether they have pending applications for federally funded grants or subgrants (including cooperative agreements) that include requests for funding to support the same project being proposed under this solicitation and will cover the identical cost items outlined in the budget narrative and worksheet in the application under this solicitation. The disclosure should include both direct applications for federal funding (e.g., applications to federal agencies) and indirect applications for such funding (e.g., applications to state agencies that will be sub-awarding federal funds).

OJP and SAMHSA seek this information to help avoid any inappropriate duplication of funding. Leveraging multiple funding sources in a complementary manner to implement comprehensive programs or projects is encouraged and is not seen as inappropriate duplication.

Applicants that have pending applications as described above are to provide the following information about pending applications submitted within the last 12 months:

- The federal or state funding agency
- The solicitation name/project name
- The point of contact information at the applicable funding agency

Federal or State Funding Agency	Solicitation Name/Project Name	Name/Phone/E-mail for Point of Contact at Funding Agency
DOJ/COPS	COPS Hiring Program	Jane Doe, 202/000-0000; jane.doe@usdoj.gov
HHS/ Substance Abuse & Mental Health Services Administration	Drug Free Communities Mentoring Program/ North County Youth Mentoring Program	John Doe, 202/000-0000; john.doe@hhs.gov

Applicants should include the table as a separate attachment, with the file name “Disclosure of Pending Applications,” to their application. Applicants that do not have pending applications as described above are to include a statement to this effect in the separate attachment page. (e.g., “[Applicant Name on SF-424] does not have pending applications submitted within the last 12 months for federally funded grants or subgrants (including cooperative agreements) that include requests for funding to support the same project being proposed under this solicitation and will cover the identical cost items outlined in the budget narrative and worksheet in the application under this solicitation.”).

7. Research and Evaluation Independence and Integrity

If a proposal involves research and/or evaluation, regardless of the proposal’s other merits, in order to receive funds, the applicant must demonstrate research/evaluation independence, including appropriate safeguards to ensure research/evaluation objectivity and integrity, both in this proposal and as it may relate to the applicant’s other current or prior related projects. This documentation may be included as an attachment to the application which addresses BOTH i. and ii. below.

- For purposes of this solicitation, applicants must document research and evaluation independence and integrity by including, at a minimum, one of the following two items:

- a. A specific assurance that the applicant has reviewed its proposal to identify any research integrity issues (including all principal investigators and sub-recipients) and it has concluded that the design, conduct, or reporting of research and evaluation funded by BJA grants, cooperative agreements, or contracts will not be biased by any personal or financial conflict of interest on the part of part of its staff, consultants, and/or sub-recipients responsible for the research and evaluation or on the part of the applicant organization;

OR

- b. A specific listing of actual or perceived conflicts of interest that the applicant has identified in relation to this proposal. These conflicts could be either personal (related to specific staff, consultants, and/or sub-recipients) or organizational (related to the applicant or any subgrantee organization). Examples of potential investigator (or other personal) conflict situations may include, but are not limited to, those in which an investigator would be in a position to evaluate a spouse's work product (actual conflict), or an investigator would be in a position to evaluate the work of a former or current colleague (potential apparent conflict). With regard to potential organizational conflicts of interest, as one example, generally an organization could not be given a grant to evaluate a project if that organization had itself provided substantial prior technical assistance to that specific project or a location implementing the project (whether funded by OJP or other sources), as the organization in such an instance would appear to be evaluating the effectiveness of its own prior work. The key is whether a reasonable person understanding all of the facts would be able to have confidence that the results of any research or evaluation project are objective and reliable. Any outside personal or financial interest that casts doubt on that objectivity and reliability of an evaluation or research product is a problem and must be disclosed.
- ii. In addition, for purposes of this solicitation applicants must address the issue of possible mitigation of research integrity concerns by including, at a minimum, one of the following two items:
 - a. If an applicant reasonably believes that no potential personal or organizational conflicts of interest exist, then the applicant should provide a brief narrative explanation of how and why it reached that conclusion. Applicants **MUST** also include an explanation of the specific processes and procedures that the applicant will put in place to identify and eliminate (or, at the very least, mitigate) potential personal or financial conflicts of interest on the part of its staff, consultants, and/or sub-recipients for this particular project, should that be necessary during the grant period. Documentation that may be helpful in this regard could include organizational codes of ethics/conduct or policies regarding organizational, personal, and financial conflicts of interest.

OR

- b. If the applicant has identified specific personal or organizational conflicts of interest in its proposal during this review, the applicant must propose a specific and robust mitigation plan to address conflicts noted above. At a minimum, the plan must include specific processes and procedures that the applicant will put in place to eliminate (or, at the very least, mitigate) potential personal or financial conflicts of interest on the part of its staff, consultants, and/or sub-recipients for this particular project, should that be

necessary during the grant period. Documentation that may be helpful in this regard could include organizational codes of ethics/conduct or policies regarding organizational, personal, and financial conflicts of interest. There is no guarantee that the plan, if any, will be accepted as proposed.

Considerations in assessing research and evaluation independence and integrity will include, but are not be limited to, the adequacy of the applicant's efforts to identify factors that could affect the objectivity or integrity of the proposed staff and/or the organization in carrying out the research, development, or evaluation activity; and the adequacy of the applicant's existing or proposed remedies to control any such factors.

8. **Applicant Disclosure of High Risk Status**

Applicants are to disclose whether they are currently designated high risk by another federal grant making agency. This includes any status requiring additional oversight by the federal agency due to past programmatic or financial concerns. If an applicant is designated high risk by another federal grant making agency, you must email the following information to OJPComplianceReporting@usdoj.gov at the time of application submission:

- The federal agency that currently designated the applicant as high risk
- Date the applicant was designated high risk
- The high risk point of contact name, phone number, and email address, from that federal agency
- Reasons for the high risk status

OJP seeks this information to ensure appropriate federal oversight of any grant award. Unlike the Excluded Parties List, this high risk information does not disqualify any organization from receiving an OJP award. However, additional grant oversight may be included, if necessary, in award documentation.

9. **Financial Management and System of Internal Controls Questionnaire**

In accordance with [2 CFR 200.205](#), federal agencies must have in place a framework for evaluating the risks posed by applicants before they receive a federal award. To facilitate part of this risk evaluation, **all** applicants (other than an individual) are to download, complete, and submit this [form](#).

10. **Disclosure of Lobbying Activities**

All applicants must complete this information. Applicants that expend any funds for lobbying activities are to provide the detailed information requested on the form Disclosure of Lobbying Activities (SF-LLL). Applicants that do not expend any funds for lobbying activities are to enter "N/A" in the text boxes for item 10 ("a. Name and Address of Lobbying Registrant" and "b. Individuals Performing Services").

How To Apply

Applicants must register in, and submit applications through Grants.gov, a "one-stop storefront" to find federal funding opportunities and apply for funding. Find complete instructions on how to register and submit an application at www.Grants.gov. Applicants that experience technical difficulties during this process should call the Grants.gov Customer Support Hotline at **800-518-4726** or **606-545-5035**, 24 hours a day, 7 days a week, except federal holidays. Registering with Grants.gov is a one-time process; however, **processing delays may occur, and it can take several weeks** for first-time registrants to receive confirmation and a user password. OJP encourages applicants to **register several weeks before** the application submission deadline. In

addition, OJP urges applicants to submit applications 72 hours prior to the application due date to allow time to receive validation messages or rejection notifications from Grants.gov, and to correct in a timely fashion any problems that may have caused a rejection notification.

BJA and SAMHSA strongly encourage all prospective applicants to sign up for Grants.gov email [notifications](#) regarding this solicitation. If this solicitation is cancelled or modified, individuals who sign up with Grants.gov for updates will be automatically notified.

Note on File Names and File Types: Grants.gov only permits the use of certain specific characters in names of attachment files. Valid file names may include only the characters shown in the table below. Grants.gov is designed to reject any application that includes an attachment(s) with a file name that contains any characters not shown in the table below.

Characters	Special Characters		
Upper case (A – Z)	Parenthesis ()	Curly braces { }	Square brackets []
Lower case (a – z)	Ampersand (&)	Tilde (~)	Exclamation point (!)
Underscore (_)	Comma (,)	Semicolon (;)	Apostrophe (')
Hyphen (-)	At sign (@)	Number sign (#)	Dollar sign (\$)
Space	Percent sign (%)	Plus sign (+)	Equal sign (=)
Period (.)	When using the ampersand (&) in XML, applicants must use the “&amp;” format.		

Grants.gov is designed to forward successfully submitted applications to OJP’s Grants Management System (GMS).

GMS does not accept executable file types as application attachments. These disallowed file types include, but are not limited to, the following extensions: “.com,” “.bat,” “.exe,” “.vbs,” “.cfg,” “.dat,” “.db,” “.dbf,” “.dll,” “.ini,” “.log,” “.ora,” “.sys,” and “.zip.” GMS may reject applications with files that use these extensions. It is important to allow time to change the type of file(s) if the application is rejected.

All applicants are required to complete the following steps:

OJP and SAMHSA may not make a federal award to an applicant until the applicant has complied with all applicable DUNS and SAM requirements. If an applicant has not fully complied with the requirements by the time the federal awarding agency is ready to make a federal award, the federal awarding agency may determine that the applicant is not qualified to receive a federal award and use that determination as a basis for making a federal award to another applicant.

- 1. Acquire a Data Universal Numbering System (DUNS) number.** In general, the Office of Management and Budget requires that all applicants (other than individuals) for federal funds include a DUNS number in their applications for a new award or a supplement to an existing award. A DUNS number is a unique nine-digit sequence recognized as the universal standard for identifying and differentiating entities receiving federal funds. The identifier is used for tracking purposes and to validate address and point of contact information for federal assistance applicants, recipients, and subrecipients. The DUNS number will be used throughout the grant life cycle. Obtaining a DUNS number is a free, one-time activity. Call Dun and Bradstreet at 866–705–5711 to obtain a DUNS number or apply online at www.dnb.com. A DUNS number is usually received within 1-2 business days.

2. **Acquire registration with the System for Award Management (SAM).** SAM is the repository for standard information about federal financial assistance applicants, recipients, and subrecipients. OJP and SAMHSA require all applicants (other than individuals) for federal financial assistance to maintain current registrations in the SAM database. Applicants must be registered in SAM to successfully register in Grants.gov. Applicants must **update or renew their SAM registration annually** to maintain an active status.

Applications cannot be successfully submitted in Grants.gov until Grants.gov receives the SAM registration information. **The information transfer from SAM to Grants.gov can take up to 48 hours.** OJP recommends that the applicant register or renew registration with SAM as early as possible.

Information about SAM registration procedures can be accessed at www.sam.gov.

3. **Acquire an Authorized Organization Representative (AOR) and a Grants.gov username and password.** Complete the AOR profile on Grants.gov and create a username and password. The applicant organization's DUNS number must be used to complete this step. For more information about the registration process, go to www.grants.gov/web/grants/register.html.
4. **Acquire confirmation for the AOR from the E-Business Point of Contact (E-Biz POC).** The E-Biz POC at the applicant organization must log into Grants.gov to confirm the applicant organization's AOR. Note that an organization can have more than one AOR.
5. **Search for the funding opportunity on Grants.gov.** Use the following identifying information when searching for the funding opportunity on Grants.gov. The Catalog of Federal Domestic Assistance number for this solicitation is CFDA #16.585 titled "Drug Court Discretionary Grant Program," and the funding opportunity number is BJA-2015-4179.
6. **Submit a valid application consistent with this solicitation by following the directions in Grants.gov.** Within 24–48 hours after submitting the electronic application, the applicant should receive two notifications from Grants.gov. The first will confirm the receipt of the application and the second will state whether the application has been successfully validated, or rejected due to errors, with an explanation. It is possible to first receive a message indicating that the application is received and then receive a rejection notice a few minutes or hours later. Submitting well ahead of the deadline provides time to correct the problem(s) that caused the rejection. **Important:** OJP urges applicants to submit applications **at least 72 hours prior** to the application due date to allow time to receive validation messages or rejection notifications from Grants.gov, and to correct in a timely fashion any problems that may have caused a rejection notification.

Click [here](#) for further details on DUNS, SAM, and Grants.gov registration steps and timeframes.

Note: Duplicate Applications

If an applicant submits multiple versions of the same application, BJA and SAMJSA will review only the most recent system-validated version submitted. See Note on File Names and File Types under [How To Apply](#).

Experiencing Unforeseen Grants.gov Technical Issues

Applicants that experience unforeseen Grants.gov technical issues beyond their control that prevent them from submitting their application by the deadline must contact the Grants.gov [Customer Support Hotline](#) or the [SAM Help Desk](#) to report the technical issue and receive a tracking number. Then applicant must e-mail the BJA contact identified in the Contact Information section on page 2 **within 24 hours after the application deadline** and request approval to submit their application. The e-mail must describe the technical difficulties, and include a timeline of the applicant's submission efforts, the complete grant application, the applicant's DUNS number, and any Grants.gov Help Desk or SAM tracking number(s). **Note: BJA and SAMHSA do not automatically approve requests.** After the program office reviews the submission, and contacts the Grants.gov or SAM Help Desks to validate the reported technical issues, OJP will inform the applicant whether the request to submit a late application has been approved or denied. If OJP and SAMHSA determine that the applicant failed to follow all required procedures, which resulted in an untimely application submission, OJP will deny the applicant's request to submit their application.

The following conditions are generally insufficient to justify late submissions:

- Failure to register in SAM or Grants.gov in sufficient time
- Failure to follow Grants.gov instructions on how to register and apply as posted on its web site
- Failure to follow each instruction in the OJP solicitation
- Technical issues with the applicant's computer or information technology environment, including firewalls

Notifications regarding known technical problems with Grants.gov, if any, are posted at the top of the OJP funding web page at www.ojp.gov/funding/Explore/CurrentFundingOpportunities.htm.

E. Application Review Information

Selection Criteria

The following five selection criteria will be used to evaluate each application, with the different weight given to each based on the percentage value listed below after each individual criteria. For example, the first criteria, "Statement of the Problem," is worth 15 percent of the entire application in the review process.

1. Statement of the Problem (15 percent)

- Describe the immediate issues that the grant seeks to address and the proposed enhancements and/or expansion that will address these issues.
- Describe the current operation of the adult drug court, addressing program structure; program length; population of focus; screening and assessment; recovery supportive services delivery plan; judicial supervision; community supervision; drug testing; case management; incentives and sanctions; substance abuse treatment; restitution; costs charged to program participants; and program success data. Identify the treatment service(s)/practice(s) available for drug court participants.
- Provide local data and any evaluation findings that demonstrate the program's impact with regard to offender and community outcomes. Describe a mechanism for targeting offenders facing substantial jail/prison sentences and providing specific drug court resources and services to meet their needs.

- Describe the nature of the problem and extent of both crime and substance use/abuse (e.g., current crime rates, prevalence rates, or incidence data) for the population of focus based on data. The statement of need should include a clearly established baseline for the project. Documentation of need may come from a variety of qualitative and quantitative sources. Examples of data sources for the quantitative data that could be used are local epidemiologic data, state data (e.g., from state needs assessments, SAMHSA's National Survey on Drug Use and Health), and/or national data [e.g., from SAMHSA's National Survey on Drug Use and Health or from National Center for Health Statistics/Centers for Disease Control and Prevention (CDC) reports, and Census data. This list is not exhaustive; applicants may submit other valid data, as appropriate for your program. For data sources that are not well known, provide sufficient information on how the data were collected so reviewers can assess the reliability and validity of the data.
- Provide the target goal (number) of people to whom services will be provided under this project during the grant award period. Applicants should identify the number of clients that will be served with SAMHSA funding and the number of clients that will be served with BJA funding. This number will serve as the target number that BJA and SAMHSA will measure the applicant against, if the applicant is selected to receive an award.
- Provide a comprehensive demographic profile of your population of focus in terms of race, ethnicity, federally recognized tribe, language, gender, age, socioeconomic characteristics, sexual identity (sexual orientation, gender identity) and other relevant factors, such as literacy.
- Discuss the relationship of your population of focus, including sub-populations, to the overall population in your geographic catchment area and identify sub-population disparities, if any, relating to access/use/outcomes of your provided services, citing relevant data. Demonstrate an understanding of these populations consistent with the purpose of your program and intent of the solicitation.
- Identify the Medication Assisted Treatment service(s)/practice(s) available for drug court participants and how those services are currently monitored for quality and effectiveness.

2. Project Design and Implementation (30 percent)

- Clearly state the purpose, goals, and objectives of the proposed enhancement and/or expansion project linking it to the 10 key components of drug courts ([Defining Drug Courts: The Key Components](#)). Describe how achievement of the goals will produce meaningful and relevant results for your community (e.g., increase drug court participation; court services; court coordination; necessary non-treatment services; and treatment access, availability, outreach, pre-services, treatment, and/or intervention).
- Describe the EBP that will be used and justify its use for your population of focus, your proposed program, and the intent of this grant announcement. Describe how the proposed practice will address the following issues in the population(s) of focus, while retaining fidelity to the chosen practice: demographics (race, ethnicity, religion, gender, age, geography, and socioeconomic status); language and literacy; sexual identity (sexual orientation, gender identity); and disability. [See [Requirements Resource Guide Using Evidence-Based Practices \(EBPs\)](#).] Discuss the evidence that shows that this practice is effective with the population of focus. If the evidence is limited or non-existent for the population of focus, provide other information to support the intervention selection. If this is not an EBP, explain why this treatment intervention was selected over other treatment interventions.
- If an EBP does not exist/apply for your program, fully describe the practice you plan to implement, explain why it is appropriate for the population of focus, and justify its use compared to an appropriate existing EBP. Describe how the proposed practice will address the following issues in the population(s) of focus: demographics (race, ethnicity, religion,

gender, age, geography, and socioeconomic status); language and literacy; sexual identity (sexual orientation, gender identity); and disability.

- Explain how your choice of an EBP will help you address disparities in subpopulations.
- Document the evidence that the selected treatment practice(s) is (are) appropriate for the outcomes intended to be achieved.
- If applicable, describe any modifications that will be made to the EBP or practice and the reasons the modifications are necessary.
- Demonstrate how the proposed service(s)/practice(s) will meet project goals and objectives within the 3-year grant period.
- Describe how the proposed service(s) or practice(s) to be implemented will address the impact of violence and trauma by integrating trauma-informed approaches delivered to clients.
- Describe how you will screen and assess clients for the presence of co-occurring substance use and mental disorders and use the information obtained from the screening and assessment to develop appropriate treatment approaches for the persons identified as having such co-occurring disorders.
- Describe how you will identify, recruit and retain the population(s) of focus. Using your knowledge of the language, beliefs, norms, values and socioeconomic factors of the population(s) of focus, discuss how the proposed approach addresses these issues in outreach, engaging and delivering programs to this population, e.g., collaborating with community gatekeepers.
- Describe how you will ensure the input of clients in assessing, planning and implementing your project.
- Describe how the proposed activities will be implemented and how they will adhere to the National Standards for Culturally and Linguistic Appropriate Services (CLAS) in Health and Health Care. For additional information go to <http://ThinkCulturalHealth.hhs.gov>.
- Provide a chart or graph depicting a realistic time line for the entire project period showing key activities, milestones, and responsible staff. These key activities should include the requirements outlined in the solicitation. Be sure to show that the project can be implemented and service delivery can begin as soon as possible and no later than 4 months after grant award. (Note: The time line should be part of the Program Narrative. It should not be placed in an attachment.)
- If you plan to use grant funds for infrastructure development, describe the infrastructure changes you plan to implement and how they will enhance/improve service effectiveness. If you do not plan to use grant funds for infrastructure changes, indicate so in your response.

3. Capabilities and Competencies (25 percent)

- Describe how the project components will be embedded within the existing service delivery system, including other SAMHSA- and OJP-funded projects, if applicable. Identify any other organization (s) that will participate in the proposed project. Describe their roles and responsibilities and demonstrate their commitment to the project. Include letters of commitment **in Attachment 6** of the application.
- Discuss the capability and experience of the applicant organization and other participating organizations with similar projects and populations. Demonstrate that the applicant organization and other participating organizations have linkages to the population(s) of focus and ties to grassroots/community-based organizations that are rooted in the culture(s) and language(s) of the population(s) of focus.
- Show that the necessary groundwork (e.g., planning, consensus development, development of memoranda of agreement, identification of potential facilities) has been completed or is near completion so that the project can be implemented and substance abuse treatment service delivery can begin as soon as possible and no later than 4 months

after grant award.

- Provide a complete list of staff positions for the project, including the Project Director and other key personnel, describing their roles, responsibilities, their level of effort and qualifications. Include in **Attachment 3** the resumes for key staff positions, including the Project Director and Clinical Director/Supervisor. Discuss how key staff have demonstrated experience and are qualified to serve the population(s) of focus and are familiar with their culture(s) and language(s).
- Describe the resources available for the proposed project (e.g., facilities, equipment), and provide evidence that treatment and other services will be provided in a location that is adequate, accessible, compliant with the Americans with Disabilities Act (ADA), and amenable to the population of focus. If the ADA does not apply to your organization, explain why.

4. Evaluation, Aftercare, Sustainability, and Plan for Collecting the Performance Measurement Data (15 percent)

- Describe the program's ability to collect and analyze client-level demographics, performance and outcome data and their ability to conduct regular assessments of program service delivery and performance as described in the evidence-based program principles described in this solicitation. Indicate program's willingness and ability to report aggregated client-level performance and outcome data through the Performance Measurement Tool (PMT) as well as the person responsible for collecting the data.
- Provide a plan detailing how performance of court operations will be evaluated and managed. Describe the program's screening and referral process which ensures that offenders screened and referred to drug court mirror the jurisdiction's substance abuse arrestee percentages.
- Describe how the program will demonstrate an ongoing review of the expected program capacity as compared to the actual program capacity.
- Describe how operation and enhancement efforts will be maintained after federal assistance ends and how current collaborations and evaluations will be used to leverage ongoing resources.
- Provide a client community reintegration or aftercare strategy as well as a sustainability plan detailing how court operations will be maintained after federal assistance ends.
- Document your ability to collect and report on the required performance measures as directed in the solicitation. Describe your plan for data collection, management, analysis, and reporting. Specify and justify any additional measures or instruments planned to be used for your grant project.
- Describe how data will be used to manage the project and assure continuous quality improvement. Describe the data-driven quality improvement process by which sub-population disparities in access/use/outcomes will be tracked, assessed, and reduced.
- Describe your plan for conducting the local performance assessment as specified in this solicitation and document your ability to conduct the assessment.

5. Budget (15 percent)

- Applicants must provide two proposed budgets, one for requested SAMHSA funding (up to \$325,000 per year for each year, not to exceed a total of \$975,000 over 3 years) and one for BJA funding (up to \$300,000 total for the 3-year grant period). Both budgets must be complete, cost effective, and allowable (e.g., reasonable, allocable, and necessary for project activities). Budget narratives should detail how applicants will maximize cost effectiveness of grant expenditures. Budget narratives should demonstrate cost effectiveness in relation to potential alternatives and the goals of the project. Reference the

[Requirements Resource Guide](#) for a complete list of allowable costs and examples of the BJA budget and narrative and the SAMHSA budget and narrative.

- In the SAMHSA budget, applicants must provide a per-unit cost for this program. Justify that this per-unit cost is providing high quality services that are cost effective. Describe your plan for maintaining and/or improving the provision of high quality services that are cost effective throughout the life of the grant.

Review Process

OJP and SAMHSA are committed to ensuring a fair and open process for awarding grants. BJA and SAMHSA review the application to make sure that the information presented is reasonable, understandable, measurable, and achievable, as well as consistent with the solicitation.

Peer reviewers will review the applications submitted under this solicitation that meet basic minimum requirements. For purposes of assessing whether applicants have met basic minimum requirements, OJP and SAMHSA screen applications for compliance with specified program requirements to help determine which applications should proceed to further consideration for award. Although program requirements may vary, the following are common requirements applicable to all solicitations for funding under OJP and SAMHSA grant programs:

- Applications must be submitted by an eligible type of applicant
- Applications must request funding within programmatic funding constraints (if applicable)
- Applications must be responsive to the scope of the solicitation
- Applications must include all items designated as “critical elements”
- Applicants will be checked against the General Services Administration’s Excluded Parties List

For a list of critical elements, see “What an Application Should Include” under [Section D. Application and Submission Information](#).

BJA and SAMHSA may use internal peer reviewers, external peer reviewers, or a combination, to assess applications meeting basic minimum requirements on technical merit using the solicitation’s selection criteria. An external peer reviewer is an expert in the subject matter of a given solicitation who is not a current DOJ or HHS employee. An internal reviewer is a current DOJ or HHS employee who is well-versed or has expertise in the subject matter of this solicitation. A peer review panel will evaluate, score, and rate applications that meet basic minimum requirements. Peer reviewers’ ratings and any resulting recommendations are advisory only, although their views are considered carefully. In addition to peer review ratings, considerations for award recommendations and decisions may include, but are not limited to, underserved populations, geographic diversity, strategic priorities, past performance under prior BJA, OJP, and SAMHSA awards, and available funding.

OJP and SAMHSA review applications for potential discretionary awards to evaluate the risks posed by applicants before they receive an award. This review may include but is not limited to the following:

1. Financial stability and fiscal integrity
2. Quality of management systems and ability to meet the management standards prescribed in the Financial Guide
3. History of performance
4. Reports and findings from audits

5. The applicant's ability to effectively implement statutory, regulatory, or other requirements imposed on non-federal entities
6. Proposed costs to determine if the Budget Detail Worksheet and Budget Narrative accurately explain project costs, and whether those costs are reasonable, necessary, and allowable under applicable federal cost principles and agency regulations

Absent explicit statutory authorization or written delegation of authority to the contrary, all final grant award decisions will be made by the Assistant Attorney General and the Administrator of SAMHSA.

F. Federal Award Administration Information

Federal Award Notices

OJP award notification will be sent from GMS. Recipients will be required to log in; accept any outstanding assurances and certifications on the award; designate a financial point of contact; and review, sign, and accept the award. The award acceptance process involves physical signature of the award document by the authorized representative and the scanning of the fully-executed award document to OJP.

Administrative, National Policy, and other Legal Requirements

If selected for funding, in addition to implementing the funded project consistent with the agency-approved project proposal and budget, the recipient must comply with award terms and conditions, and other legal requirements, including but not limited to OMB, DOJ or other federal regulations which will be included in the award, incorporated into the award by reference, or are otherwise applicable to the award. OJP strongly encourages prospective applicants to review the information pertaining to these requirements **prior** to submitting an application. To assist applicants and recipients in accessing and reviewing this information, OJP has placed pertinent information on its [Solicitation Requirements](#) page of the [OJP Funding Resource Center](#).

Please note in particular the following two forms, which applicants must accept in GMS prior to the receipt of any award funds, as each details legal requirements with which applicants must provide specific assurances and certifications of compliance. Applicants may view these forms in the Apply section of the [OJP Funding Resource Center](#) and are strongly encouraged to review and consider them carefully prior to making an application for OJP grant funds.

- [Certifications Regarding Lobbying; Debarment, Suspension and Other Responsibility Matters; and Drug-Free Workplace Requirements](#)
- [Standard Assurances](#)

Upon grant approval, OJP electronically transmits (via GMS) the award document to the prospective award recipient. In addition to other award information, the award document contains award terms and conditions that specify national policy requirements⁶ with which recipients of federal funding must comply; uniform administrative requirements, cost principles, and audit requirements; and program-specific terms and conditions required based on applicable program

⁶ See generally 2 C.F.R. 200.300 (provides a general description of national policy requirements typically applicable to recipients of federal awards, including the Federal Funding Accountability and Transparency Act of 2006 (FFATA)).

(statutory) authority or requirements set forth in OJP solicitations and program announcements, and other requirements which may be attached to appropriated funding. For example, certain efforts may call for special requirements, terms, or conditions relating to intellectual property, data/information-sharing or -access, or information security; or audit requirements, expenditures and milestones, or publications and/or press releases. OJP also may place additional terms and conditions on an award based on its risk assessment of the applicant, or for other reasons it determines necessary to fulfill the goals and objectives of the program.

Prospective applicants may access and review the text of mandatory conditions OJP includes in all OJP awards, as well as the text of certain other conditions, such as administrative conditions, via [Mandatory Award Terms and Conditions](#) page of the [OJP Funding Resource Center](#).

General Information about Post-Federal Award Reporting Requirements

Recipients must submit quarterly financial reports, quarterly progress reports to BJA, biannual progress reports to SAMHSA, final financial and progress reports, and, if applicable, an annual audit report in accordance with 2 CFR Part 200. Future awards and fund drawdowns may be withheld if reports are delinquent.

Special Reporting requirements may be required by OJP depending on the statutory, legislative or administrative obligations of the recipient or the program.

G. Federal Awarding Agency Contact(s)

For additional Federal Awarding Agency Contact(s), see the Title page.

For additional contact information for Grants.gov, see the Title page.

H. Other Information

Provide Feedback to OJP

To assist OJP in improving its application and award processes, we encourage applicants to provide feedback on this solicitation, the application submission process, and/or the application review/peer review process. Provide feedback to OJPSolicitationFeedback@usdoj.gov.

IMPORTANT: This e-mail is for feedback and suggestions only. Replies are **not** sent from this mailbox. If you have specific questions on any program or technical aspect of the solicitation, **you must** directly contact the appropriate number or e-mail listed on the front of this solicitation document. These contacts are provided to help ensure that you can directly reach an individual who can address your specific questions in a timely manner.

If you are interested in being a reviewer for other OJP grant applications, please e-mail your resume to ojppeerreview@lmbps.com. The OJP Solicitation Feedback email account will not forward your resume. **Note:** Neither you nor anyone else from your organization can be a peer reviewer in a competition in which you or your organization have submitted an application.

Application Checklist

FY 2015 Joint Adult Drug Court Solicitation to Enhance Services, Coordination, and Treatment

The application checklist has been created to assist in developing an application. Please note that the items indicated with an asterisk (*) below have been designated as the basic minimum requirements for both categories of applications. Applications that do not include these elements shall neither proceed to peer review nor receive further consideration by BJA or SAMHSA.

What an Applicant Should Do:

Prior to Registering in Grants.gov:

- _____ Acquire a DUNS Number (see page 31)
- _____ Acquire or renew registration with SAM (see page 32)

To Register with Grants.gov:

- _____ Acquire AOR and Grants.gov username/password (see page 32)
- _____ Acquire AOR confirmation from the E-Biz POC (see page 32)

To Find Funding Opportunity:

- _____ Search for the funding opportunity on Grants.gov (see page 32)
- _____ Download Funding Opportunity and Application Package (see page 32)
- _____ Sign up for Grants.gov email [notifications](#) (optional) (see page 31)
- _____ Read [Important Notice: Applying for Grants in Grants.gov](#)

After application submission, receive Grants.gov email notifications that:

- _____ (1) application has been received,
- _____ (2) application has either been successfully validated or rejected with errors (see page 32)

If no Grants.gov receipt, and validation or error notifications are received:

- _____ contact the NCJRS Response Center regarding experiencing technical difficulties (see page 33)

General Requirements:

- _____ Review the [Solicitation Requirements](#) in the OJP Funding Resource Center.

Scope Requirement:

The federal amount requested is within the allowable limit:

- _____ The federal amount requested is within the allowable limit(s) (see page 15)
 - BJA:** a one-time award up to \$300,000 (**match is required**) per grantee for the entire 3-year grant period
 - SAMHSA:** annual awards, up to \$325,000 per year for each year of the 3-year grant period. Annual SAMHSA continuation awards will depend on the availability of funds, grantee progress in meeting project goals and objectives, timely submission of required data and reports, and compliance with all terms and conditions of award.

Eligibility Requirement

_____ Applicants are limited to states or state courts applying on behalf of single local jurisdiction, local court, county, other unit of local government, or Indian tribal governments (as defined under the Indian Self Determination Act, 25 U.S.C. 450b(e)); Indian tribal governments may apply directly or through other public or not-for-profit private entities. Eligible jurisdictions must have a fully operational (at least 1 year) adult drug court (see title page).

What an Application Should Include:

- _____ Application for Federal Assistance (SF-424) (see [Requirements Resource Guide](#)) – please

note that the SF-424 should reflect only the BJA funding request. A separate SF-424 that reflects only the SAMHSA funding request will be included in Attachment 4.

- _____ *Attachment 1: Abstract and Program Narrative, including an abstract (see page 19)
- _____ *Attachment 2 (see page 23)
- _____ BJA Budget Worksheet and Budget Narrative:
 - _____ Employee Compensation Waiver request and justification (if applicable) (see page 17)
 - _____ Read OJP policy and guidance on “conference” approval, planning, and reporting available at www.ojp.gov/funding/confcost.htm (see page 17)
 - _____ Indirect Cost Rate Agreement (if applicable) (see page 24)
- _____ SAMHSA Budget Worksheet and Budget Narrative:
 - _____ Attachment 3: Project Timeline, Resumes and Key Staff (see page 25)
 - _____ Attachment 4: SAMHSA Application Forms (see page 25)
 - _____ Attachment 5: Confidentiality and SAMHSA Participant Protection (see page 26)
 - _____ *Attachment 6: Evidence of Experience and Credentials for Substance Treatment Provider(s) and Letters of Commitment (see page 26)
 - _____ *Attachment 7: State Substance Abuse Agency Director or Designee Letter (see page 27) **(required for nontribal applicants)**
 - _____ *Attachment 8: Chief Justice, State Court Administrator or Designee Letter and/or Letter Certifying Abstract Sent to State Drug or Problem Solving Court Coordinator (see page 27) **(required for nontribal applicants)**
 - _____ Attachment 9: Tribal Authorizing Resolution (if applicable) (see page 27)
 - _____ Attachment 10: Applicant Disclosure of Pending Applications (see page 28)
 - _____ Applicant Disclosure of High Risk Status (see page 30)
 - _____ Financial Management and System if Internal Controls (if applicable) (see page 30)
 - _____ Disclosure of Lobbying Activities (see page 30)

*These elements are the basic minimum requirements for applications. Applications that do not include these elements shall neither proceed to peer review nor receive further consideration by BJA or SAMHSA.

Appendix A

Tribal Healing to Wellness Court Key Components

Key Component #1: Tribal Healing to Wellness Courts brings together community-healing resources with the tribal justice process, using a team approach to achieve the physical and spiritual healing of the participant and the well-being of the community.

*(Corresponding evidence-based program principle) **Treatment and Other Services**—The applicant should maintain program resources that: address drug court participant needs identified over time; accommodate the range of treatment and other rehabilitation services required; and apply case management beyond initial referral to confirm that providers appropriately deliver ongoing assessment and services.*

*(Corresponding evidence-based program principle) **Relapse Prevention, Aftercare and Community Integration**—From the first program phase, the applicant should demonstrate how culturally sensitive planning and other programming will be implemented to support relapse prevention, community integration, and aftercare/continuing care services.*

Key Component #2: Participants enter the wellness court program through various referral points and legal procedures while protecting their due process rights.

*(Corresponding evidence-based program principle) **Screening and Assessment**—Referral sources and other stakeholders should be clear on program eligibility criteria, which must be consistent with targeted population needs and available program resources. Applicants should demonstrate an ability to screen promptly and systematically for all offenders potentially eligible for the drug court, identify the agency which will conduct this screening, and detail the procedures that will be used for screening.*

The applicant should further demonstrate how those offenders determined to be eligible for the drug court as a result of screening will then be assessed to identify their risk for relapse and recidivism, as well as the nature of treatment and other rehabilitation needs. Assessments should be conducted using instruments that have been validated for the targeted population and updated periodically. Treatment and other service assessments should be reviewed and adjusted to gauge offender needs that may change over time.

*(Corresponding evidence-based program principle) **Target Population**—Program resources should be prioritized for offenders who demonstrate both high criminogenic risk and high substance abuse treatment need. Applicants should aim to serve offenders whose characteristics and risk factors directly relate to a high probability of offending, and who are frequent drug users diagnosed for drug dependence. Also, applicants should target offenders who are subject to (or eligible for) legal sanctions that may provide greater leverage in program compliance.*

Key Component #3: Eligible substance abuse offenders are identified early through legal and clinical screening for eligibility and are promptly placed in the Tribal Healing to Wellness Program.

Key Component #4: Tribal Healing to Wellness Programs provides access to holistic, structured and phased substance abuse treatment and rehabilitation services that incorporate culture and tradition.

Key Component #5: Participants are monitored through intensive supervision that includes

frequent and random testing for alcohol and other substance use.

*(Corresponding evidence-based program principle) **Monitoring**—The applicant should demonstrate a comprehensive plan to: monitor drug court participants using random drug testing and community supervision; disseminate results efficiently to the drug court team; and immediately respond to noncompliance according to established program requirements.*

Key Component #6: Progressive consequences (or sanctions) and rewards (or incentives) are used to encourage participant compliance with program requirements.

*(Corresponding evidence-based program principle) **Procedural and Distributive Justice**—Applicants should establish and clearly communicate a system of graduated sanctions and incentives that is activated and delivered with certainty in response to offender behavior. Information from the drug court team and the offender should be considered in determining noncompliance and the appropriate response. Specific program responses should be meaningful to the offenders, understandable, and delivered in a manner that can be perceived as fair and equitable.*

Key Component #7: Ongoing judicial interaction with each participant and judicial involvement in team staffing is essential.

*(Corresponding evidence-based program principle) **Judicial Interaction**—Judges should interact directly and regularly with drug court participants during drug court hearings, which should be as frequent as the participant may require. As the program leader, the judge will maintain authority by demonstrating support for the program and knowledge of individual offenders. Communication between the participant and the judge should be based on a foundation of respect, and judges must maintain an understanding of program resources available to assess and respond to participant behavior.*

Key Component #8: Monitoring and evaluation measure the achievement of program goals and gauge effectiveness to meet three purposes: providing information to improve the Healing to Wellness process; overseeing participant progress; and preparing evaluative information for interested community groups and funding sources.

Key Component #9: Continuing interdisciplinary education promotes effective wellness court planning, implementation, and operation.

Key Component #10: The development of ongoing communication, coordination, and cooperation among team members, the community and relevant organizations are critical for program success.

Appendix B

Veterans Treatment Court 10 Key Components

Key Component #1: Veterans Treatment Court integrate alcohol, drug treatment, and mental health services with justice system case processing.

*(Corresponding evidence-based program principle) **Treatment and Other Services**—The applicant should maintain program resources that: address drug court participant needs identified over time; accommodate the range of treatment and other rehabilitation services required; and apply case management beyond initial referral to confirm that providers appropriately deliver ongoing assessment and services.*

Key Component #2: Using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights.

*(Corresponding evidence-based program principle) **Procedural and Distributive Justice**—Applicants should establish and clearly communicate a system of graduated sanctions and incentives that is activated and delivered with certainty in response to offender behavior. Information from the drug court team and the offender should be considered in determining noncompliance and the appropriate response. Specific program responses should be meaningful to the offenders, understandable, and delivered in a manner that can be perceived as fair and equitable.*

Key Component #3: Eligible participants are identified early and promptly placed in the Veterans Treatment Court program.

*(Corresponding evidence-based program principle) **Screening and Assessment**—Referral sources and other stakeholders should be clear on program eligibility criteria, which must be consistent with targeted population needs and available program resources. Applicants should demonstrate an ability to screen promptly and systematically for all offenders potentially eligible for the drug court, identify the agency which will conduct this screening, and detail the procedures that will be used for screening.*

The applicant should further demonstrate how those offenders determined to be eligible for the drug court as a result of screening will then be assessed to identify their risk for relapse and recidivism, as well as the nature of treatment and other rehabilitation needs. Assessments should be conducted using instruments that have been validated for the targeted population and updated periodically. Treatment and other service assessments should be reviewed and adjusted to gauge offender needs that may change over time.

*(Corresponding evidence-based program principle) **Target Population**—Program resources should be prioritized for offenders who demonstrate both high criminogenic risk and high substance abuse treatment need. Applicants should aim to serve offenders whose characteristics and risk factors directly relate to a high probability of offending, and who are frequent drug users diagnosed for drug dependence. Also, applicants should target offenders who are subject to (or eligible for) legal sanctions that may provide greater leverage in program compliance.*

Key Component #4: Veterans Treatment Court provide access to a continuum of alcohol, drug, mental health and other related treatment and rehabilitation services.

*(Corresponding evidence-based program principle) **Relapse Prevention, Aftercare and Community Integration**—From the first program phase, the applicant should demonstrate how culturally sensitive planning and other programming will be implemented to support relapse prevention, community integration, and aftercare/continuing care services.*

Key Component #5: Abstinence is monitored by frequent alcohol and other drug testing.

*(Corresponding evidence-based program principle) **Monitoring**—The applicant should demonstrate a comprehensive plan to: monitor drug court participants using random drug testing and community supervision; disseminate results efficiently to the drug court team; and immediately respond to noncompliance according to established program requirements.*

Key Component #6: A coordinated strategy governs Veterans Treatment Court responses to participants' compliance.

Key Component #7: Ongoing judicial interaction with each Veteran is essential.

*(Corresponding evidence-based program principle) **Judicial Interaction**—Judges should interact directly and regularly with drug court participants during drug court hearings, which should be as frequent as the participant may require. As the program leader, the judge will maintain authority by demonstrating support for the program and knowledge of individual offenders. Communication between the participant and the judge should be based on a foundation of respect, and judges must maintain an understanding of program resources available to assess and respond to participant behavior.*

Key Component #8: Monitoring and evaluation measure the achievement of program goals and gauge effectiveness.

Key Component #9: Continuing interdisciplinary education promotes effective Veterans Treatment Court planning, implementation, and operations.

Key Component #10: Forging partnerships among Veterans Treatment Court, Veterans Administration, public agencies, and community-based organizations generates local support and enhances Veteran Treatment Court effectiveness.

Appendix C

The Guiding Principles of DWI Courts

Guiding Principle #1: Determine the Population

*(Corresponding evidence-based program principle) **Target Population**—Program resources should be prioritized for offenders who demonstrate both high criminogenic risk and high substance abuse treatment need. Applicants should aim to serve offenders whose characteristics and risk factors directly relate to a high probability of offending, and who are frequent drug users diagnosed for drug dependence. Also, applicants should target offenders who are subject to (or eligible for) legal sanctions that may provide greater leverage in program compliance.*

Guiding Principle #2: Perform a Clinical Assessment

*(Corresponding evidence-based program principle) **Screening and Assessment**—Referral sources and other stakeholders should be clear on program eligibility criteria, which must be consistent with targeted population needs and available program resources. Applicants should demonstrate an ability to screen promptly and systematically for all offenders potentially eligible for the drug court, identify the agency which will conduct this screening, and detail the procedures that will be used for screening.*

The applicant should further demonstrate how those offenders determined to be eligible for the drug court as a result of screening will then be assessed to identify their risk for relapse and recidivism, as well as the nature of treatment and other rehabilitation needs. Assessments should be conducted using instruments that have been validated for the targeted population and updated periodically. Treatment and other service assessments should be reviewed and adjusted to gauge offender needs that may change over time.

Guiding Principle #3: Develop the Treatment Plan

Guiding Principle #4: Supervise the Offender

*(Corresponding evidence-based program principle) **Monitoring**—The applicant should demonstrate a comprehensive plan to: monitor drug court participants using random drug testing and community supervision; disseminate results efficiently to the drug court team; and immediately respond to noncompliance according to established program requirements.*

Guiding Principle #5: Forge Agency, Organization, and Community Partnerships

*(Corresponding evidence-based program principle) **Relapse Prevention, Aftercare and Community Integration**—From the first program phase, the applicant should demonstrate how culturally sensitive planning and other programming will be implemented to support relapse prevention, community integration, and aftercare/continuing care services.*

Guiding Principle #6: Take a Judicial Leadership Role

*(Corresponding evidence-based program principle) **Procedural and Distributive Justice**—Applicants should establish and clearly communicate a system of graduated sanctions and incentives that is activated and delivered with certainty in response to offender behavior.*

Information from the drug court team and the offender should be considered in determining noncompliance and the appropriate response. Specific program responses should be meaningful to the offenders, understandable, and delivered in a manner that can be perceived as fair and equitable.

Guiding Principle #7: Develop Case Management Strategies

Guiding Principle #8: Address Transportation Issues

Guiding Principle #9: Evaluate the Program

Guiding Principle #10: Ensure a Sustainable Program