Bureau of Justice Assistance's
Comprehensive Opioid Abuse Program

Partnerships to Support Data-driven Responses to Emerging Drug Threats

Grant Overview and Application

Overview of Funding Opportunity

The opioid crisis is an evolving drug epidemic that impacts the health of individuals and the safety of communities. To respond effectively to this multifaceted challenge, local public health, behavioral health, and public safety stakeholders need access to timely and accurate information of the drug environment at the community level. These stakeholders have distinct and complementary roles and their effective use of near-real-time data, to include fatal and nonfatal overdoses, can save lives and allow for coordinated and tailored responses. This data can be used to:

‹ Identify trend data at the community and regional levels that guide public health, behavioral health, and public safety response efforts, including prevention.

‹ Support public health and public safety partnerships that can rapidly respond to emerging drug threats.

‹ Prioritize outreach efforts to high-risk populations and communities/regions most impacted.

‹ Assess the impact of intervention strategies and the evolving nature of the drug environment.

The **Partnerships to Support Data-driven Responses to Emerging Drug Threats** solicitation is designed to demonstrate how local public health, behavioral health, and public safety agencies can collect and analyze near real-time data and develop rapid responses that use public health, behavioral health, and public safety strategies to reduce overdose deaths in the applicant community and guide public safety and public health responses. As a part of this effort, applicants will also be required to assess the impact of intervention strategies through evaluation and performance measurement.

The primary focuses of this initiative are preventing and reducing overdose deaths associated with opioids, including illicit fentanyl, and advancing a shared understanding of the patterns and characteristics of problem drug use in a local community. Applications should demonstrate an understanding of the dynamic nature of substance abuse in a community and shifting drug markets. Communities that are experiencing a shift away from a drug market dominated by opioids towards an increase in cocaine and/or methamphetamine abuse are also encouraged to apply.

The Institute for Intergovernmental Research (IIR) is releasing this solicitation on behalf of the U.S. Department of Justice, Bureau of Justice Assistance (BJA). Under this solicitation, up to six communities will be selected for an award of up to $600,000 each for a 24-month time period. This solicitation is part of a series of solicitations to support national demonstration collaborations to build local capacity and support innovation. Please see the **ODMAP Statewide Expansion and Response** Grant solicitation for other funding opportunities released as part of the effort.

Eligibility

Applicants are limited to units of local government and federally recognized Indian tribal governments (as determined by the Secretary of the Interior). All recipients and subrecipients (including any for-profit organization) must forgo any profit or management fee.

Current Comprehensive Opioid Abuse Program (COAP) training and technical assistance (TTA) grantees, their contractors, and consultants are ineligible to apply for this award.

BJA's Comprehensive
Opioid Abuse
Program

Applicant Requirements

The intent of this solicitation is for public health and public safety stakeholders to adopt a shared goal of building partnerships that guide data analysis activities and response planning. All stakeholders are expected to be accountable for implementation and for identifying short- and long-term goals based on the data analysis.

We seek applicants that demonstrate the following:

1. **Willingness to form an organizational structure that includes, at a minimum, public safety, public health, and behavioral health agency representatives and data analysts who agree to work collaboratively on the proposed initiative.** The structure may vary, but communities will want to consider the following organizational structure:

   - An executive leadership group that will provide strategic oversight and execute decision-making authority for this initiative. This group is expected to meet monthly, when necessary; and

   - A data-focused workgroup composed of midlevel management staff and data analysts who will meet at least monthly to achieve the data analysis goals of the project; and

   - A larger stakeholder group that will meet quarterly to ensure that community perspectives are considered in the project.

   Applicants are encouraged to use existing interagency workgroups, where possible, such as a local criminal justice coordinating council or a local opioid taskforce or drug coalition. The exact composition of the executive leadership group, data-focused workgroup, and stakeholder group may vary by locality but will generally include representatives from local and state agencies (where applicable), including:

   - Department of health

   - Department of behavioral health or county/city substance use treatment authority

   - Department(s) of social and/or human services

   - Prosecutor's office

   - Law enforcement (e.g., sheriff's office and/or police department)

   - Jail or detention center

   - Departments of probation, parole, and/or community corrections

   - Public and/or private hospital system(s)

   - Emergency medical services

   - Child protective services (CPS)

   - Housing and/or homeless services

   - Medical examiner/coroner's office

2. **Capacity to support the level of coordination needed to effectively coordinate and sustain cross-disciplinary initiatives.** Initiatives supported by this funding opportunity will require a considerable administrative component, and a project coordinator is necessary to provide project management and alignment. Applicants must identify a project coordinator to serve as the operational coordinator of the initiative, guiding the development of the project, formalizing processes to support cross-agency collaboration, and conducting outreach to stakeholders. The project coordinator must dedicate 100 percent of his or her time to this initiative. The coordinator position should be housed in an agency with existing data-sharing and analytic expertise. The coordinator may be best situated within the agency contributing most of the data (i.e., health department or law enforcement agency) or centrally located within the local government administration office. Because of the timeline of this project, applicants that identify an existing employee as the project coordinator will be given priority consideration so that project start-up time is minimized.

   BJA anticipates that the project coordinator will:

   - Guide the planning and implementation of the local initiative, including a comprehensive, cross-agency strategy for achieving the goals and objectives of the initiative.

   - Conduct outreach to officials in key agencies to gain support for the formal development of the initiative.

   - Cultivate and maintain effective partnerships with key public health/behavioral health staff and public safety/criminal justice staff members to achieve the goals and objectives of the initiative, with strategic attention to cross-agency data sharing and data integration.

   - Coordinate and convene the executive leadership group, the workgroup, and required subgroups of the initiative and ensure follow-up to key action items and proposals.

- Guide the development, evaluation, and improvement of business processes, policies and procedures, and other protocols commonly associated with information management and data sharing, integration, and analysis.

- Maintain partnerships with internal and external partners such as other city, county, and state agencies; community organizations; advocacy groups; and nonprofit organizations, foundations, and private entities.

- Establish a communication strategy to provide policymakers, practitioners, and the public with information about the initiative.

- Serve as the primary point of contact for the initiative and provide monthly progress and outcome data to BJA, the Centers for Disease Control and Prevention (CDC), and their consortium partners via IIR.

- Collect, share, and report performance measurement data.

- Document challenges in implementation and successful strategies developed.

- Submit semiannual progress reports to be submitted to federal funders and ensure timely submission of all reporting elements.

3. **Commitment to collecting, sharing, and analyzing near-real-time data from—but not limited to—public health and public safety agencies to provide a rich understanding of the local drug environment and its impact on public safety and the health and well-being of the citizens in the applicant community. Applicants are encouraged to utilize as many relevant data sets as possible to achieve the goals and objectives of the initiative.**

4. **Willingness to use the data analysis findings to identify and prioritize public health, behavioral health, and public safety responses that can meaningfully reduce overdose deaths in the applicant community and achieve other public safety and public health goals. Jurisdictions will be required to use the tools and guidance developed by CDC/CDC Foundation on public health and public safety collaboratives.**

5. **Willingness to work directly with BJA; its federal partners, including the U.S. Department of Health and Human Services and the Centers for Disease**

Control and Prevention; and their consortium of national experts and technical assistance providers, to deepen our collective understanding of effective intervention strategies at the community level.

Allowable Activities

Each project will include a planning and implementation phase. A description of expected deliverables during each phase follows.

Planning Phase

Each site will have a planning phase of no longer than six months. For purposes of budgeting, $100,000 of the award will be released at the time of award to support activities during the planning phase, including support for the mandatory project coordinator. The balance of the award will not be released by IIR until all of the required components of the planning phase are completed and BJA has approved the detailed budget for the implementation phase. Selected sites will submit the revised budget and budget narrative and other planning documents to IIR at the completion of the planning phase.

During the planning phase, participating sites will be required to:

◂ Identify a project coordinator.

◂ Convene key staff and agency leaders from public safety, public health, behavioral health, criminal justice, and other relevant sectors. The organizational structure may vary somewhat from site to site, although the following structure is recommended:

- An executive leadership group that will provide strategic oversight and execute decision-making authority for this initiative. This group will typically meet monthly

- A data-focused workgroup composed of midlevel management staff and data analysts who will meet at least monthly to achieve the data analysis goals of the project

- A larger stakeholder group that will meet quarterly to ensure that community perspectives are considered in the project

◂ Participate in the first peer-to-peer convening of all sites selected in Washington, DC. This convening will likely occur in the fourth month of the project.

- Develop a catalogue of local and state data sets that can inform the initiative and establish or expand an information sharing structure that allows for the exchange of real-time public health and public safety data sets related to the opioid epidemic.

- Develop a shared understanding of current public safety, behavioral health, and public health practices related to substance abuse and misuse.

- Identify a set of discrete strategies, based on the data, that will be the initial priority focus of the workgroup.

- Establish a set of agreed-upon performance measures that will enable an objective, empirical evaluation of the achievement of the agreed vision and report them quarterly to BJA.

At the end of the planning phase, participating sites will have:

- Demonstrated engagement of local leaders in the planning process, including participation in key planning meetings, and ongoing commitment to the implementation process.

- Established an organizational structure to regularly review data and establish strategic direction and met at least four times locally. If a site is using an existing workgroup, this requirement may be modified post-award.

- Conducted a comprehensive analysis of available data and achieved consensus on new and established data sets that will be used to support the goals and objectives of the workgroup.

- Established preliminary areas of focus for the workgroup. This may involve interventions that prioritize a specific geographic area or an at-risk population.

- Received approval from BJA on a final budget. This final budget will include a budget and a budget narrative that details how the remainder of the budget will be spent supporting implementation.

Implementation Phase—Data Collection and Analysis

Applicants may propose a variety of approaches to collect and analyze timely data to inform decision making. However, the primary focus should be on data that is near-real-time (no more than one to two months old). Some applicants may need to build new partnerships and capabilities to gain timely access to data. This may include

both public safety data (e.g., drug arrest data, jail intake data, drug testing data, child welfare administrative data, drug-related prosecutions) or public health and behavioral health data (e.g., accidental overdose deaths, naloxone deployments, emergency department admissions for suspected overdoses, substance use disorder treatment admissions). Applicants may use funds to develop or enhance real-time data collection or data analysis. Examples of activities that could be considered can be found below. This list is intended to be illustrative of site-level interventions but not comprehensive.

- Establish an overdose fatality review team or enhance an existing overdose fatality review team. Local overdose fatality review teams have been used throughout the United States to examine the circumstances surrounding unintentional fatal drug overdoses providing additional context to the shared aggregate data. These reviews are used to identify missed opportunities for prevention and gaps in local service deliveries in order to identify and inform strategies and coordination needed to prevent future overdoses.

- Conduct rapid assessment to quickly gather data in response to a question or crisis requiring timely intervention, such as a spike in overdoses. Assessments may include semistructured interviews with service providers working with people who use drugs, public safety officials, treatment providers, emergency department staff members, and other stakeholders in targeted geographic areas.

- Conduct testing of drug paraphernalia such as syringes or glassine bags that are collected from syringe exchange programs or from public areas, where the syringe users are anonymous.

- Collaborate with medical examiners or coroners to expedite access to preliminary data on suspected overdose deaths prior to forensic toxicology data. Some communities have found that suspected counts of opioid overdose deaths may be obtained earlier because of the distinctive clinical and scene characteristics of opioid overdoses.

- Expedite toxicology analysis and utilize screening kits and new technology for potential novel or counterfeit drugs.

- Administer voluntary, anonymous interviews to and collect urine specimens from arrestees in a booking facility or jail on a monthly or quarterly basis to assess the dimension of the local substance abuse problem.

- Implement the Overdose Detection Mapping Application Program (ODMAP). ODMAP provides near-real-time suspected overdose data across communities to support public safety and public health efforts to mobilize an immediate response to a sudden increase, or spike, in overdose events. This tool is offered for free by the Washington–Baltimore High Intensity Drug Trafficking Area (HIDTA) program and is available only to government (state, local, federal, or tribal) agencies serving the interests of public safety and health.

- Implement systems to identify infants and children exposed to parental opioid use.

Implementation Phase—Implement Rapid Responses

The following list is provided as an example of the types of rapid responses that may be supported with funds. Applicants are not expected to define the responses that they anticipate implementing in their initial applications. The expectation is that the responses will largely be defined by the data collected during the planning phase and throughout the life of a project. The following list is provided as an illustrative example to enable applicants to understand the types of rapid responses anticipated. Responses may be shaped by de-identified data or identifiable data, depending on the local focus and priorities.

- Establish a coordinated rapid response team to respond to spikes in overdoses, overdose-related deaths, or emerging drug threats.

- Support outreach teams to follow up with individuals at risk of overdose, particularly those who have just experienced nonfatal overdoses. Such teams may include first responders or law enforcement officers, medical staff members, community health workers, and clergy. The appropriate composition of these teams will vary by community.

- Develop partnerships among public safety and first responders and school and/or community partners to identify risk from adverse childhood experiences, and leverage partnerships to connect individuals and families at risk with necessary prevention resources.

- Facilitate early and rapid identification of families who have been referred to CPS and are in need of services (within 10 days of CPS referral) and rapid access to substance use disorder treatment (within 48 hours of receiving a behavioral health assessment).

- Expand or enhance models of care that have demonstrated effectiveness in serving young children living in households with a history of substance misuse.

- Provide naloxone, education, and technical assistance to individuals in government agencies, homeless shelters, educational institutions, community-based and multiservice organizations, health-care institutions, public safety organizations, drug treatment programs, and syringe exchange programs.

- Create a strategic public health campaign for targeted populations or professions.

Selection Criteria

IIR is committed to ensuring a fair and open process for making awards. Submitting a project proposal does not guarantee project funding. BJA and IIR will evaluate all proposals submitted by the application due date to make award selections. Applications will be reviewed and scored by IIR staff members and peer reviewers, with final review and approval by BJA. All selection decisions are final. BJA reserves the right to make any final decisions regarding all subawards and any aspects of a subaward.

Applicants will be evaluated based on the following criteria:

Statement of the Problem (10 percent of score)

The applicant should describe its current drug environment based on existing data, the challenges motivating the community to participate in the demonstration project, the need for federal funds, and any alignment between the proposed project and existing strategic plans or initiatives.

Leadership and Commitment (30 percent of score)

The applicant should describe the lead agency (or agencies) for this initiative and why this agency is best suited to lead this effort.

Applicants should also describe how they will develop a multidisciplinary workgroup.

NOTE: Communities that demonstrate that they have an existing coordinating body, such as a criminal justice coordinating council, an opioid task force, or another planning body with demonstrated capacity and willingness

to plan across the criminal justice and behavioral health continuum, will receive priority consideration.

Applicants also should describe the proposed project coordinator position and the duties of this individual.

NOTE: Communities that propose a project coordinator who is already employed by the lead agency and experienced in leading multidisciplinary workgroups will be given priority consideration.

Finally, applicants should agree to work directly with BJA and other federal partners, including the CDC, and their consortium of national experts and technical assistance providers.

Project Plan (30 percent of score)

Applicants should describe their proposed plans for convening key staff members and agency leaders from the public safety, public health, behavioral health, criminal justice, and other relevant sectors. The organizational structure may vary somewhat from site to site, although the following structure is recommended:

- ◂ An executive leadership group that will provide strategic oversight and execute decision-making authority for this initiative. This group will typically meet monthly;

- ◂ A data-focused workgroup composed of midlevel management staff and data analysts that will meet at least monthly to achieve the data analysis goals of the project; and

- ◂ A larger stakeholder group that will meet quarterly to ensure that community perspectives are considered in the project.

Applicants also should describe the types of public safety and public health data they anticipate collecting and any potential barriers to implementation.

NOTE: Applicants that demonstrate their ability to access more than one data set that can be updated at least once a month, if not weekly or daily, as well as the ability to begin collecting this data within six months of project initiation, will be prioritized.

Data Collection and Analytic Capacity (20 percent of score)

Applicants should indicate their data collection and analytic capacity. This should include a description of each

applicant's infrastructure for information management and data collection, as well as the personnel resources available for data analysis.

Project Budget (10 percent of score)

Budgets should be complete, cost-effective, and allowable (e.g., reasonable, allocable, and necessary for project activities). Budget narratives should demonstrate cost-effectiveness in relation to potential alternatives and the goals of each project.

The budget submitted with an application is not expected to be a final budget with the full budget detail, since the appropriate rapid responses cannot be identified until data collection is complete. Applicants should follow the guidance below in developing an initial budget and a budget narrative:

Your initial budget also should include expenses to complete all of the activities required in the planning phase up to $100,000. Salary and benefits for the project coordinator during the planning phase is an allowable expense.

Your initial budget also should include support for six staff members to attend three face-to-face meetings of the selected demonstration sites over the course of the project. These meetings are anticipated to be three days in length, including travel time, and will be held in Washington, DC. Include all required travel expenses (e.g., airfare, taxi, hotel expenses, and food based on the allowable federal per diem rates for Washington, DC).

In addition to three meetings above, applicants also should budget for three staff members to attend two national meetings over the course of the project. For budgeting purposes, the two additional meetings should be budgeted for four days in length, including travel time, and should be budgeted based on the per diem associated with Washington, DC.

The balance of the budget (up to $600,000) should be noted in the "other" category of the budget as "reserved for rapid response activities."

IIR will initially release up to $100,000 of the $600,000 for allowable costs for the planning phase. Funding for activities outside the scope of the planning phase will be held until the planning phase is complete. Selected sites will submit

a revised detailed budget and budget narrative and other planning documents to IIR at the completion of the planning phase. The balance of the award will not be released by IIR until all of the required components of the planning phase are completed and BJA has approved the detailed budget for the implementation phase.

Mandatory Project Narrative

Responses to the project narrative question must be submitted via the attached PDF form (see page 11) by 5:00 p.m., ET, on July 15, 2019. All other required documents must be submitted via email to COAP@iir.com.

Additional Mandatory Application Requirements

Budget and Associated Documentation

The Budget Detail Worksheet and the Budget Narrative are now combined in a single document, collectively referred to as the Budget Detail Worksheet. The Budget Detail Worksheet is a user-friendly, fillable, Microsoft Excel-based document designed to calculate totals. In addition, the Excel workbook contains worksheets for multiple budget years that can be completed as necessary. All applicants should use the Excel version when completing the proposed budget in their applications, except in cases in which an applicant does not have access to Microsoft Excel or experiences technical difficulties. In such cases, the applicant should use the 508-compliant accessible Adobe Portable Document Format (PDF) version. Both versions of the Budget Detail Worksheet can be accessed at https://ojp.gov/funding/Apply/Forms/BudgetDetailWorksheet.htm.

The Budget Detail Worksheet should provide the detailed computation for each budget line item, listing the total cost of each and showing how it was calculated by the applicant. For example, costs for personnel should show the annual salary rate and the percentage of time devoted to the project for each employee paid with federal funds. The Budget Detail Worksheet should present a complete itemization of all proposed costs.

For questions pertaining to budget and examples of allowable and unallowable costs, see the DOJ Grants Financial Guide at https://ojp.gov/financialguide/DOJ/index.htm. The budget summary page must reflect the

amounts in the budget categories as included in the Budget Detail Worksheet. These amounts should mirror the amounts in the Budget Narrative.

Year 1 (12 months) is defined as September 1, 2019, to August 30, 2020. Year 2 (12 months) is defined as September 1, 2020, to August 30, 2021.

Applicants should budget for six staff members to attend three face-to-face meetings of the selected demonstration sites over the course of the project. These meetings are anticipated to be three days in length, including travel time, and will be held in Washington, DC.

In addition to three in-person demonstration site meetings, applicants should budget for three staff members to attend two national meetings over the course of the project. For budgeting purposes, the two additional meetings should be budgeted for four days in length, including travel time, and should be budgeted based on the per diem associated with Washington, DC.

This document should be emailed to COAP@iir.com.

Indirect Cost Rate Agreement (If Applicable)

Indirect costs may be charged to an award only if:

a. The recipient has a current (unexpired), federally approved indirect cost rate; or

b. The recipient is eligible to use, and elects to use, the "de minimis" indirect cost rate described in the Part 200 Uniform Requirements, as set out at 2 CFR 200.414(f).

An applicant with a current (unexpired) federally approved indirect cost rate must attach a copy of the indirect cost rate agreement to the application. An applicant that does not have a current federally approved rate may request one through its cognizant federal agency, which will review all documentation and approve a rate for the applicant entity, or, if the applicant's accounting system permits, the applicant may propose to allocate costs in the direct cost categories.

Certain OJP recipients have the option of electing to use the de minimis indirect cost rate. An applicant that is eligible to use the de minimis rate and wishes to use it should attach written documentation to the application that advises OJP of both (1) the applicant's eligibility to use the de minimis rate and (2) its election to do so. If an eligible applicant

elects the de minimis rate, costs must be consistently charged as either indirect or direct costs but may not be double charged or inconsistently charged as both. The de minimis rate may no longer be used once an approved federally negotiated indirect cost rate is in place. (No entity that ever has had a federally approved negotiated indirect cost rate is eligible to use the de minimis rate.) For the de minimis rate requirements (including information on eligibility to elect to use the rate), see the Part 200 Uniform Requirements at 2 CFR 200.414(f).

This document should be emailed to COAP@iir.com, if applicable.

Letters of Support and/or Memoranda of Understanding/Agreement (Required)

Applicants should attach letters of support and/or an interagency agreement between the partner agencies and offices to show commitment to participate in the project. The letters or interagency agreement should clearly articulate the level of involvement each agency will have in the proposed project. The letters should be combined into one document and emailed to COAP@iir.com.

Project Timeline (Required)

Attach a Project Timeline (with an estimated start date of September 1, 2019) with each project activity, expected completion date, and responsible person or organization. This document should be emailed to COAP@iir.com.

Applicant Certification (Required)

The applicant agency must provide a statement of assurance signed by the authorized representative of the applicant organization stating that:

Federal funds made available through this award will not be used to supplant state, local, or tribal funds but will be used to increase the amounts of such funds that would, in the absence of federal funds, be made available for the activities addressed in the application.

There has been appropriate coordination with all affected agencies.

The project coordinator will agree to work with BJA and its representatives as well as the selected BJA COAP training and technical assistance provider(s) and partner agencies.

This document should be emailed to COAP@iir.com.

Accounting System and Financial Capability Questionnaire (Required)

All applicants must download, complete, and submit this form: http://ojp.gov/funding/Apply/Resources/FinancialCapability.pdf.

Research and Evaluation Independence and Integrity (If Applicable)

If an application proposes research (including research and development) and/or evaluation, the applicant must demonstrate research/evaluation independence and integrity, including appropriate safeguards, before it may receive award funds. The applicant must demonstrate independence and integrity regarding both this proposed research and/or evaluation and any current or prior related projects.

Each application should include an attachment that addresses both i. and ii. below.

i. For purposes of this solicitation, each applicant is to document research and evaluation independence and integrity by including one of the following two items:

a. A specific assurance that the applicant has reviewed its application to identify any actual or potential apparent conflicts of interest (including through review of pertinent information on the principal investigator, any co-principal investigators, and any subrecipients), and that the applicant has identified no such conflicts of interest—whether personal, financial, or organizational (including on the part of the applicant entity or staff members, investigators, or subrecipients)—that could affect the independence or integrity of the research, including the design, conduct, and reporting of the research.

OR

b. A specific description of actual or potential apparent conflicts of interest that the applicant has identified—including through review of pertinent information on the principal investigator, any co-principal investigators, and any subrecipients—that could affect the independence or integrity of the research, including the design, conduct,

or reporting of the research. These conflicts may be personal (e.g., on the part of investigators or other staff members), financial, or organizational (related to the applicant or any subrecipient entity). Some examples of potential investigator (or other personal) conflict situations are 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 would not be given an award 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) because the organization in such an instance might 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, each applicant must address 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 actual or potential apparent conflicts of interest (personal, financial, or organizational) exist, then the applicant should provide a brief narrative explanation of how and why it reached that conclusion. The applicant also must include an explanation of the specific processes and procedures that the applicant has in place, or will put in place, to identify and prevent (or, at the very least, mitigate) any such conflicts of interest pertinent to the funded project during the period of performance. Documentation that may be helpful in this regard may include organizational codes of ethics/conduct and policies regarding organizational, personal, and financial conflicts of interest. There is no guarantee that the plan, if any, will be accepted as proposed.

   OR

   b. If the applicant has identified actual or potential apparent conflicts of interest (personal, financial, or organizational) that could affect the independence and integrity of the research, including the design, conduct, or reporting of the research, the applicant must provide a specific and robust mitigation plan to address each of those conflicts. At a minimum, the applicant is expected to explain the specific processes and procedures that the applicant has in place, or will put in place, to identify and eliminate (or, at the very least, mitigate) any such conflicts of interest pertinent to the funded project during the period of performance. Documentation that may be helpful in this regard may include organizational codes of ethics/conduct and policies regarding organizational, personal, and financial conflicts of interest. There is no guarantee that the plan, if any, will be accepted as proposed.

OJP will assess research and evaluation independence and integrity based on considerations such as the adequacy of the applicant's efforts to identify factors that could affect the objectivity or integrity of the proposed staff and/or the applicant entity (and any subrecipients) 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.

This document should be emailed to COAP@iir.com, if applicable.

Post-Award Requirements

Monthly Collaborative Calls

The recipient of the funds will be required to have the project coordinator participate in a monthly call with BJA policy advisors, CDC staff members, and the IIR project manager. These calls will last no more than 1.5 hours. Additional staff members may choose to participate.

Quarterly and Final Reporting

The recipient of funds under this solicitation will be required to submit monthly progress reports, quarterly financial reports, quarterly performance measures, final financial and progress reports, and, if applicable, an annual audit report in accordance with the Part 200 Uniform Requirements (https://ojp.gov/funding/Part200UniformRequirements.

htm) or specific award conditions. Future awards and fund drawdowns may be withheld if reports are delinquent.

Confidentiality and Human Subjects Protection

Any recipient of an award under this solicitation will be required to comply with the U.S. Department of Justice regulations on confidentiality and human subjects' protection. See Evidence, Research, and Evaluation Guidance and Requirements at https://ojp.gov/funding/Explore/SolicitationRequirements/EvidenceResearchEvaluationRequirements.htm. All funded applicants will be required to provide documentation of compliance with this requirement prior to commencing data collection.

Applicable Federal Laws and Regulations

All awards are subject to the availability of appropriated funds and to any modifications or additional requirements that may be imposed by law. Applicants selected for awards must agree to comply with additional legal requirements upon acceptance of an award. Additional information for each requirement can be found at https://ojp.gov/funding/index.htm.

Applicant Resources

Applicants interested in reviewing an established model of local, multidisciplinary efforts may find it useful to review the technical assistance manual for New York City's RxStat initiative at http://www.pdmpassist.org/pdf/RxStat.pdf.

Application Process

Apply online: http://s.iir.com/5QzJ7HbE

Applicant webinar: May 30, 2019, at 11:00 a.m., ET. Registration for the webinar is required. Please register for the webinar at http://s.iir.com/pkwDjJ3S and submit questions in advance of the webinar to COAP@iir.com no later than May 25, 2019. Emails containing questions should include the name and agency of the submitter, the email address, and the question(s).

Applications due: July 15, 2019, at 5:00 p.m., ET

Review of applications: June 27, 2019, through August 1, 2019

Notification of awards: No later than August 15, 2019

Projects begin: September 2019

Application Checklist

_____ Partnerships to Support Data-driven Responses to Emerging Drug Threats Application Form (page 11)

_____ Budget Detail Worksheet (see page 7)

_____ Indirect Cost Rate Agreement (if applicable; see page 7)

_____ Time/Task Plan (see page 8)

_____ Applicant Certification (see page 8)

_____ Accounting System and Financial Capability Questionnaire (see page 8)

_____ Letters of Support (see page 8)

_____ Research and Evaluation Independence and Integrity Statement (if applicable; see page 8)

All supporting documents and attachments should be emailed to COAP@iir.com.

Bureau of Justice Assistance's
Comprehensive Opioid Abuse Program

Partnerships to Support Data-driven Responses to Emerging Drug Threats Application

Submission Deadline

Applications for the Partnerships to Support Data-driven Responses to Emerging Drug Threats Grant Program are due by 5:00 p.m., ET, on July 15, 2019. Please submit the application by completing this form. By using Adobe Acrobat Reader, you will be able to submit your application directly through a button on the form. A free download for Adobe Acrobat Reader can be found here. If using another PDF program, please complete the form and save your responses. Then email a copy of the completed form, along with any required documents or attachments, to COAP@iir.com.

Questions

Should you have any questions about the application process or issues with submission, please send an email to COAP@iir.com, and we will do our best to respond promptly.

Applicant Information

Applicant agency

Applicant jurisdiction (local or tribal government name)

Employer Identification Number

Type of applicant
    County government
    City or township government
    Indian/Native American tribal government
    Other (explain)

Population of area to be served under this application (e.g., county population)

Primary Contact for Matters Related to This Application

First name

Last name

Job title

Phone number

Email address

Street address

City

State

ZIP code

Related-Project Funding

Please indicate the amount of any funding you currently receive from each of the following sources that is relevant to this application.

Federal funding   BJA grant funding

SAMHSA grant funding

CDC grant funding

State funding

Local funding

Philanthropic funding

Other funding

Please thoroughly answer the Project Narrative questions below. You may copy and paste your responses from other documents into the text boxes. There are no word limits for responses.

Statement of the Problem (10 percent of your score)

Question 1. Provide a description of your community including demographics, population size, and information about the current drug environment. Provide information that documents the impact of the opioid epidemic within the proposed service area and any changes noted in drug environment over the past one to two years.

Answer to Question 1:

Question 2. What challenges are motivating your community's interest in participating in this demonstration project? What makes now an opportune time to engage in this work as a system? Explain the inability to fund the proposed program without federal assistance, and describe any existing funding or resources that are being leveraged to support the proposed program.

Answer to Question 2:

Question 3. Identify existing strategic plans or proposed or existing initiatives in your community that are relevant to the program, and describe how the proposed initiative aligns with the existing plans or initiatives. Include the agencies that are involved.

Answer to Question 3:

Leadership and Commitment (30 percent of your score)

Question 4. What will be the lead agency (or agencies) for this initiative, and why is this agency best suited to lead this effort? Has this agency played a cross-agency leadership role in the past? If yes, please describe these leadership efforts, relevant outcomes, and any obstacles the agency encountered. If no, please explain why this agency is in the best position to lead your initiative.

Answer to Question 4:

Question 5. Does your community have an existing, interdisciplinary opioid task force and/or a criminal justice planning group (e.g., criminal justice coordinating council)? If so, how will this proposed project be integrated with that group's work? If your community does not have an existing opioid task force or interdisciplinary planning group, what strategies will the lead agency use to ensure the meaningful participation of the stakeholders? How will the project include collaboration with your state fusion center and any applicable HIDTAs?

NOTE: Applicants that demonstrate that they have an existing coordinating body such as a criminal justice coordinating council, an opioid task force, or another planning body with demonstrated capacity and willingness to plan across the criminal justice and behavioral health continuum will receive priority consideration for funding.

Answer to Question 5:

Question 6. Describe the background and current duties of the proposed project coordinator, if the project coordinator is an existing employee of the applicant community. If the project coordinator will be hired post-award, please provide a job description for the project coordinator position and a proposed timeline for hiring. If the project coordinator is to be hired post-award, please provide a plan for ensuring that the planning phase can be completed within six months.

NOTE: Communities that propose a project coordinator who is already employed by the lead agency and experienced in leading multidisciplinary workgroups will be given priority consideration for funding.

Answer to Question 6:

Question 7: Proposed Workgroup Members

All communities selected for this initiative must form an organization structure that includes a multidisciplinary team. This multidisciplinary team must include, at a minimum, public safety, public health, and behavioral health experts who agree to work collaboratively on the proposed project. Applicants are encouraged to use existing workgroups, where possible, such as local criminal justice coordinating councils, local opioid task forces, etc. and not to form new workgroups unless needed. The exact composition of a workgroup may vary by locality but will generally include representatives from local agencies, including:

- Department of health
- Department of behavioral health or county/city substance use treatment authority
- Department(s) of social and/or human services
- Prosecutor's office
- Law enforcement, (e.g., sheriff's office and/or police department)
- Jail or detention center
- Departments of probation, parole, and/or community corrections
- Public and/or private hospital system(s)
- Emergency medical services
- Child protective services
- Department of housing and/or homeless services
- Medical examiner's/coroner's office

Provide a list of your proposed workgroup members in the table below.

Agency Name	First and Last Name of the Representative	Title of Representative

Provide a list of your proposed workgroup members in the table below.

Agency Name	First and Last Name of the Representative	Title of Representative

Question 8. Indicate your willingness to collaborate with BJA and the CDC, BJA's training and technical assistance providers, and other federal agencies so that BJA can deepen its understanding of effective public safety, behavioral health, and public health collaboration strategies at the local level. In your answer, indicate your commitment to:

    a. Ensuring that the project coordinator participates in monthly calls with staff members from BJA, the CDC, IIR, and other selected TTA providers.

    b. Sending a team of six staff members to attend three face-to-face meetings of the selected demonstration sites over the course of the project.

Answer to Question 8:

Project Plan (30 percent of your score)

Question 9. Describe your proposed plan for convening an executive leadership group that will establish strategic oversight, a working group of midlevel management staff and data analysts that will meet at least monthly, and a larger stakeholder group that will meet quarterly.

Answer to Question 9:

Question 10. Describe the types of public safety, public health, and behavioral health data you anticipate collecting as well as the timeliness with which you anticipate being able to collect from each data source (e.g., will collect monthly, weekly, daily).

NOTE: Applicants that demonstrate their ability to access more than one data set that can be updated at least once a month, if not weekly or daily, as well as the ability to begin collecting this data within six months of project initiation, will be prioritized.

Answer to Question 10:

Question 11. Describe any potential barriers to implementing the project and the strategies that will be used to overcome those barriers.

Answer to Question 11:

Data Collection and Analytic Capacity (20 percent of your score)

Question 12. Please indicate the resources available for this project within each agency.

Agency	Do you anticipate collecting data from this agency?	Full- or part-time analyst, researcher, or epidemiologist to collect or analyze data	Nonresearch agency staff members who are responsible for collecting or analyzing data	Interns to collect data
Department of health	☐ Yes ☐ No (skip to the next agency)	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.
Department of behavioral health or county/city substance use treatment authority	☐ Yes ☐ No (skip to the next agency)	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.
Department of human or social services (includes child welfare services)	☐ Yes ☐ No (skip to the next agency)	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.

Agency	Do you anticipate collecting data from this agency?	Full- or part-time analyst, researcher, or epidemiologist to collect or analyze data	Nonresearch agency staff members who are responsible for collecting or analyzing data	Interns to collect data
Prosecutor's office	☐ Yes ☐ No (skip to the next agency)	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.
Law enforcement, including sheriff's office and/or police department	☐ Yes ☐ No (skip to the next agency)	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.
Jail or detention center	☐ Yes ☐ No (skip to the next agency)	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.
Departments of probation, parole, and/or community corrections	☐ Yes ☐ No (skip to the next agency)	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.

Agency	Do you anticipate collecting data from this agency?	Full- or part-time analyst, researcher, or epidemiologist to collect or analyze data	Nonresearch agency staff members who are responsible for collecting or analyzing data	Interns to collect data
Public or private hospital system(s)	☐ Yes ☐ No (skip to the next agency)	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.
Emergency medical services provider	☐ Yes ☐ No (skip to the next agency)	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.
Department of housing and/or homeless services	☐ Yes ☐ No (skip to the next agency)	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.
Medical examiner's/coroner's office	☐ Yes ☐ No (skip to the next agency)	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.	☐ This resource is currently available to support the project. ☐ We budgeted to provide support for this activity through the grant. ☐ We will not have this resource available during the project.

Visit the COAP Resource Center at **www.coapresources.org**.

About BJA

BJA helps to make American communities safer by strengthening the nation's criminal justice system: Its grants, training and technical assistance, and policy development services provide state, local, and tribal governments with the cutting-edge tools and best practices they need to reduce violent and drug-related crime, support law enforcement, and combat victimization. To learn more about BJA, visit www.bja.gov, or follow us on Facebook (www.facebook.com/DOJBJA) and Twitter (@DOJBJA). BJA is part of the U.S. Department of Justice's Office of Justice Programs.