**Adams County Opioid Abatement Grant Application**

**(Fall 2023)**

**Organizational Information**

* Are you applying on behalf of one organization or is this a joint application with other entities?
* Primary Applying Organization Information:
	+ Organization Name
	+ Point of Contact Name
	+ Email
	+ Phone Number
	+ Address
* If there is more than one organization included in this proposal, please list the additional organization(s) included on the application
* This application is not limited to nonprofits. Identify the type of organization(s) included on the application

**Financial Health**

* Have there been findings from any audits in the last five years? **If so please attach those as a supporting document.**
* If applicable, have you made any corrective action to address those findings?

**Organizational Integrity and Compliance History**

**For the Organization:**

* Has your organization ever faced investigations, sanctions, or penalties related to financial misconduct, fraud, or ethical violations? If yes, please provide details, including nature, outcome, and actions taken.
* Is your organization currently under investigation by any government agency, regulatory body, or law enforcement entity for financial misconduct, fraud, or ethical violations? If yes, please provide details.

**For Leadership (Clinical and Administrative):**

* Regarding your organization's clinical and administrative leadership team:
	+ Have any members been subject to investigations for financial misconduct, fraud, or ethical violations in any professional capacity? If yes, please provide details.
	+ Are any members currently under investigation by government agencies, regulatory bodies, or law enforcement for such violations? If yes, please provide details.
	+ Have any members been found guilty or liable for financial or ethical violations in the past 5 years in any professional capacity? If yes, please provide details.
* Does your organization have policies, certifications, or accreditations in place to ensure ethical and financial compliance? If yes, please summarize.
* How does your organization monitor and enforce ethical and financial standards among its leadership team and staff?
* What internal controls or mechanisms does your organization use to prevent and detect financial misconduct, fraud, or ethical violations?

**About the Proposal**

* Total amount requested
* What amount of the total request falls within the possible categories? (*If multiple, please designated the specific amount of total funds being requested for each)*
	+ Treatment
	+ Recovery
	+ Prevention/Education
	+ Harm Reduction
	+ Criminal Justice
	+ Opioid Abatement in Rural Colorado
	+ Other
* Are you willing to accept a partial award?

**Project Overview**

1. Provide a brief description of the program or effort you are applying for funds to support and explain how it will address the opioid crisis in Adams County. Please explain what difference you are hoping to make for community members in Adams County and what specific populations you are focused on.

**Outcomes Focused and Accountability to Impact**

1. What outcome(s) in the [Interactive Dashboard](https://acyi.maps.arcgis.com/apps/MapSeries/index.html?appid=4cb3531cd5af4aa9acc26004f9f3bdcc) is this proposal tied to? If none, is there a proposed outcome measure you intend to impact and believe should be included in the dashboard? *(These can be found in the Current State Tab)*
2. Instead of only evaluating projects after the fact to determine if they were successful, the Council is interested in looking at data at regular intervals to understand if funded projects are on track to making their intended impact. What does success look like for this project? What goals and data will you track to measure progress in real time?

**Efficacy**

1. Describe how the proposal is informed by nationally recognized outcomes, best practices, is evidenced based, or supported by research. If the project is new or novel and is not yet supported by robust evidence, please describe why you believe it will be effective and how you plan to show beyond a reasonable doubt that it has been.

**Meeting the Needs of Adams County Together**

1. Why does our community need the program or project you're hoping to provide? *(i.e. what gaps in the community does this fill)*
2. What collaboration with any other organizations has happened or is ongoing? How do/will you coordinate services/ warm handoffs with other providers?
	1. If so, how and with whom?
	2. If none, why? Do you see an opportunity for collaboration?

**Organizational Stability and Cost Efficiency**

1. Are you building on or adapting something that already exists within your organization(s), or setting up a completely new program/project?
2. Some services or projects require organizational or individual licensing or organizational accreditation to legally operate. **If this applies to your proposal, please share what they are here and upload proof of accreditation or copy of license as a supplemental attachment to your application.***Examples of this are MAT programs, Inpatient treatment programs, Individual therapy provision. If you have an organizational accreditation such as CARF, The Joint Commission, or SAMHSA, you do not need to include individual provider licenses. If you are applying as an individual provider, please include a copy of your license from DORA to practice under the Mental Health Practice Act in Colorado (LAC, LMFT, etc.)*
3. Are there any licenses or accreditations your organization is in the process of receiving? If yes, please share which they are and where you are in the process.
4. Describe how your organization is incorporating industry best practices, including ethical considerations, in your operations, especially in relation to any relevant accreditations or certifications.
5. How has your organization(s) carried out projects of this scope and/or size and what has success looked like?
6. What is the timeline for the proposal and when do you expect to see the intended impact (even if this is beyond the one year scope of this grant cycle)?
7. Do you have access to the needed capacity and resources to move forward with this proposal? (for example staff, physical space, materials, etc.) If not, please explain how you plan to address this.
8. What other funding sources have you or will you pursue to support this program/project? How do you plan to sustain beyond this grant award?
9. The council recommends that administrative costs for any proposal do not exceed actual cost or 10% of the requested funds.
10. Will your proposal adhere to this requirement? If not, please provide your estimated administrative costs and a brief justification as to why you must exceed 10% of your total cost.