**Extension of Funding: Adams County Opioid Abatement Grant Application**

**(Fall 2023)**

**Organizational Information**

* Primary Applying Organization Information:
	+ Organization Name
	+ Point of Contact Name
	+ Email
	+ Phone Number
	+ Address
* Since being awarded funding, has your organization gone through any major structural changes?

**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 how you plan to continue or expand the program or effort you are currently being funded for.
2. The Adams County Opioid Abatement Council recognizes that the timelines for this grant and the first grant cycle overlap, and your organization may be in the early stages of your work. Please describe the impact of the program to date, including any quantifiable results and success stories.
3. Are there any new collaborations or partnerships that will be established to support the continuation or expansion of your work? If so, how will these collaborations enhance the program's impact?