Rural Communities Opioid Response Program-Planning

HRSA-18-116

Technical Assistance Webinar

Friday, June 29, 2018 10am, ET



Disclaimer

The Rural Communities Opioid Response Program-Planning (RCORP-Planning) Notice of Funding Opportunity (NOFO) and HRSA's SF-424 Application Guide should be your primary resources for application instructions and guidelines. This webinar will merely provide a brief overview of the NOFO and answer any questions you might have at this stage in the process.



Background

- Authorized by Section 711 of the Social Security Act (42 U.S.C. 912), as amended
- Administered by HRSA's Federal Office of Rural Health Policy
- Part of a multi-year, \$130 million opioid-focused effort by HRSA
 - Additional funds to support grants and National Health Service Corps (NHSC) Loan Repayment Program awards in FY 2019 and beyond



Purpose of RCORP-Planning (pg. 1)

To support treatment for and prevention of substance use disorder, including opioid use disorder, in rural counties at the highest risk for substance use disorder





Goal of RCORP-Planning (pg. 1)

To reduce the morbidity and mortality associated with opioid overdoses in high risk rural communities by strengthening the organizational and infrastructural capacity of multi-sector consortiums to address one or more of the following focus areas:

Prevention

Treatment

Recovery



Funding Overview (pp. i; 3; 19-20)

- Approximately 75 grant awards
- Up to \$200,000 per award
- Cost sharing/match not required
- Period of performance:
 - September 30, 2018 to September 29, 2019 (one year)
- Funding restrictions—cannot use RCORP-Planning funds for the following purposes:
 - To acquire real property
 - For construction
 - To pay for any equipment costs not directly related to the purposes for which the grant was awarded
- More information can be found in <u>HRSA's SF-424 Application</u> Guide



Eligibility—Applicant Organization (pp. 3-4)

- Domestic public or private, non-profit or for-profit, entities
 - Includes community and faith-based organizations, tribes, and tribal organizations
 - Can be located in an urban or rural area
- Must be part of a group of four or more separately-owned domestic public or private entities that have committed to forming a consortium or are part of an established consortium
- All high risk rural communities eligible to apply, assuming they
 meet RCORP-Planning's other eligibility criteria. The applicant
 organization does not have to be located in one of the 220
 counties identified by the CDC as being at risk for HIV and
 Hepatitis C infections due to injection drug use (see Appendix A
 for list of 220 counties).



Eligibility—Consortium Requirements (pp. 4-5)

- Four or more separately-owned (i.e., different Employment Identification Numbers) entities that have committed to forming a consortium or are part of an established consortium
 - Applicant organization + 3 other separately-owned entities
- Consortium members should come from multiple sectors/disciplines
- If applicant organization is located in an urban area, at least two consortium members must be located in HRSA-designated rural areas
- Letters of commitment from proposed and/or existing consortium members required (Attachment 4)



Eligibility—Target Population (pg. 4)

Consortium members can be located in rural or urban areas, but all activities supported by RCORP-Planning must exclusively target populations residing in HRSA-designated rural areas, as defined by

https://datawarehouse.hrsa.gov/tools/analyzers/geo/ Rural.aspx



Question: Is it problematic if our consortium targets rural populations, but urban populations also happen to benefit?

Answer: Positive spillover effects are welcome, but your consortium should exclusively target rural





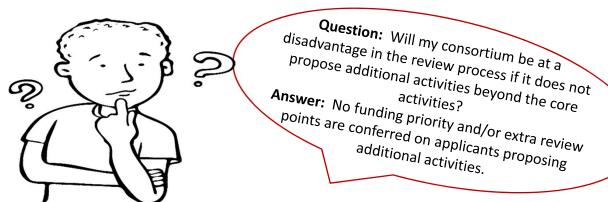
Five Core Activities (pg. 6)

- Developing a memorandum of agreement or understanding (MOA/MOU) that defines roles and responsibilities of each consortium partner
- Conducting a detailed analysis to identify opportunities and gaps in opioid use disorder prevention, treatment, and/or recovery workforce and services within target rural service area
- Developing a strategic plan that addresses gaps in opioid use disorder prevention, treatment, and/or recovery services identified in the analysis
- Developing a workforce plan that addresses gaps in opioid use disorder prevention, treatment, and/or recovery workforce identified in the analysis
- Completing a sustainability plan that identifies strategies for operationalizing the activities proposed in the strategic and workforce plans beyond the one-year grant period



Additional Activities (pp. 7-8)

- If additional capacity exists, consortiums may use RCORP-Planning grant funds to pursue additional capacity-building activities beyond the core activities
 - Examples of additional activities provided on pp. 7-8
- Applicant organizations proposing additional activities must provide justifications and detailed descriptions of the activities (pg. 11) and incorporate them into their work plans (pg. 12)







Overview of Application Components (pp. 8-19)

- Project Abstract
- Project Narrative
 - Introduction
 - Need
 - Methodology
 - Work Plan
 - Resolution of Challenges
 - Evaluation and Technical Support Capacity
 - Organizational Information
- Budget
- Budget Narrative
- Attachments



Project Abstract (pp. 8-9)

- One-page, single-spaced standalone summary of application
- Often used to provide information to the public and Congress
- Place the following at the top of the page:
 - Project title
 - Project focus area (prevention, treatment, and/or recovery)
 - Applicant organization name
 - Applicant organization address
 - Applicant organization facility type
 - Applicant organization website (if applicable)
 - Project Director name and title
 - Project Director contact information (phone and email)
 - How the applicant organization learned about RCORP-Planning
 - Cities, states, zip codes, and counties served by this project (table format highly recommended)
- See Section 4.1.ix of HRSA's <u>SF-424 Application Guide</u> for further instructions



Project Narrative (pp. 9-15)

- <u>Introduction:</u> Overview of project's goals and objectives; target population(s) and service area; and consortium members involved
- Need: Data and other information demonstrating needs of target population(s). Must provide justification for selection of target population. If unable to provide certain data/information, must detail plan for obtaining it during grant period.
- Methodology: Methods for fulfilling core activities (and any additional activities); disseminating program information; engaging with the target population; and maintaining consortium commitment
- Work Plan: Activities, staffing, and timeline associated with each element outlined in the methodology section
- Resolution of Challenges: Anticipated external and internal challenges to implementing work plan and proposed solutions for addressing them
- <u>Evaluation and Technical Support Capacity:</u> Process and outcome indicators for each work plan activity and plans for tracking indicators and disseminating evaluation result



Budget & Budget Narrative (pg. 16)

- Budgets and budget narratives must adhere to guidance outlined in Sections 4.1iv 4.1v of HRSA's <u>SF-424 Application</u> Guide
 - Note guidance around contractual/consultant costs (pg. 29) and indirect costs (pg. 30)
- Budget requests must not exceed \$200,000 for the one-year project period (inclusive of direct and indirect costs)
- HRSA may require grant recipients to travel to conference(s) and/or technical assistance workshop(s) during the grant period



Attachments (pp. 16-18)

- Attachment 1: Work Plan
- Attachment 2: Staffing Plan and Job Descriptions for Key Personnel
- Attachment 3: Resumes and/or Bio Sketches for Key Personnel
- Attachment 4: Letters of Commitment from Proposed and/or Existing Consortium Members
- Attachment 5: Organizational Chart of Proposed or Existing Consortium
- Attachment 6: List of Existing and/or Proposed Consortium Members
- Attachment 7: MOU/MOA, if applicable
- Attachment 8: Map of Target Rural Service Area
- Attachment 9: Letters of Support
- Attachment 10: Other Awards, if applicable (other HRSA awards and other RCORP-Planning applications the lead applicant is a part of)
- Attachment 11: Other Relevant Documents (e.g., indirect cost rate agreement)



Each Element of the Project Narrative is Linked to A Review Criterion

NARRATIVE SECTION	REVIEW CRITERIA
Introduction	(1) Need
Need	(1) Need
Methodology	(2) Response
Work Plan	(2) Response and (4) Impact
Resolution of Challenges	(2) Response
Evaluation and Technical Support Capacity	(3) Evaluative Measures and (5) Resources/Capabilities
Organizational Information	(5) Resources/Capabilities
Budget and Budget Narrative	(6) Support Requested



Review Criteria (pp. 21-25)

- Need (30 points)
- Response (25 points)
- Evaluative Measures (10 points)
- Impact (10 points)
- Resources and Capabilities (20 points)
- Support Requested (5 points)
- No funding priority points or preference

TOTAL: 100 possible points



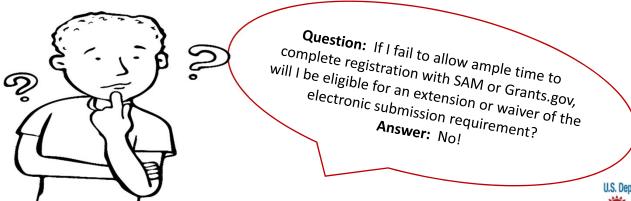
Application Logistics

- RCORP-Planning/HRSA-18-116 Notice of Funding Opportunity is available at the following link: https://apply07.grants.gov/apply/opportunities/instructions/opphRSA-18-116-cfda93.912-cidHRSA-18-116-instructions.pdf
- HRSA requires you to apply electronically
- Page limit: 80 pages
 - Inclusive of Project Abstract, Project and Budget Narratives, Attachments, and Letters of Commitment/Support
 - Standard OMB-approved forms and Indirect Cost Rate Agreements do not count towards the page limit
- Application deadline: July 30, 2018 at 11:59 p.m., ET



Application Logistics (cont.)

- The application process requires registration in three systems:
 - Dun and Bradstreet: https://www.dnb.com/duns-number.html
 - System for Award Management (SAM): https://sam.gov/portal/SAM/#1
 - Entities registering in SAM must submit a <u>notarized letter</u> appointing their authorized Entity Administrator
 - Grants.gov: http://www.grants.gov





Resources (pp. 32-35)

- List of resources to assist you in preparing your application available in Appendix B
 - Note that HRSA is not affiliated with all of the resources provided
- Resources can be used to gather data and information for the project narrative and identify potential planning and implementation approaches
- Your local health department, State Office of Rural Health, State Rural Health Association, State Primary Care Office, Single State Agency, and/or Primary Care Association may be valuable resources for acquiring relevant data and information for the application



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Grants.gov Assistance

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