Boulder County Community Services

Opioid Abatement Funds 2025

Request for Applications (RFA) Guide

Applications Open: 8/15/2024 at 8:00 am

Applications Due: 10/10/2024 by 4:30 pm

All communications regarding this application shall only be through the designated Boulder County staff. No communication is to be directed to any other County personnel. Please be advised that only general inquiries and confirmation of receipt requests may be answered by staff. Questions regarding the RFA and RFA process must be submitted using the **form link**. Questions will be collected and answered during the scheduled assistance sessions and posted on the **website**. Any attempt to gain additional information that may be used as a competitive advantage may result in a rejection or disqualification of the application.

Table of Contents

Application Summary

Boulder County uses the Foundant online application system.

Access the Opioid Settlement Funds Application on Foundant!

- ☐ Applicants must read this document in full and meet all criteria outlined to be considered for Opioid Settlement grant funding.
- ☐ Program Activities and Funding Request must align with Boulder County's Strategic Plan for Opioid Abatement.
- ☐ The application process will open on **8/15/24 at 8:00am** and will close on **10/10/24 at 4:30pm.** *Late or Incomplete applications will not be considered.*
- ☐ Questions regarding Boulder County's Opioid Settlement Funds should be submitted using the **Question Form**. Prior to submitting any questions, please review this RFA Guide and the **Opioid Settlement Funds Website**.
    - ☐ All questions must be submitted by **9/12/24 at 4:30 p.m.**
    - ☐ Answers will be posted in the FAQ on the website above.

Boulder County Staff

Tucker Eurman, Opioid Project Manager

teurman@bouldercounty.gov

Kelly Veit, Manager of Strategic Implementation

kveit@bouldercounty.gov

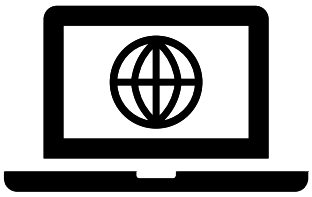
Q&A and Technical Assistance Sessions

Two virtual assistance sessions will be available to all applicants.

Spanish interpretation will be available at both meetings.

- **Pre-Register for Session One:** Strategic Plan Overview and Q&A for Applicants
  - Monday, August 12, 11AM – Noon
- **Pre-Register for Session Two:** Technical Assistance and Q&A for Applicants
  - Monday, August 26, 1–2:30 PM

Questions and Recording will be available to review on **Boulder County's website**.



Drop-In Hours for Technical Assistance will also be offered via Zoom from **9am-10am** on:

- September 9, 2024
- September 16, 2024
- September 23, 2024

All questions regarding Boulder County's Opioid Settlement grant should be submitted using the **Question Form**.

- All questions must be submitted by **9/12/24 at 4:30 p.m.**
- Answers will be posted in the FAQ on the **website**.

About Opioid Abatement Funds

The deceptive marketing and overprescribing of opioid painkillers beginning in the early-2000's has led to an addiction epidemic causing hundreds of thousands of deaths nationwide. Opioid overdoses and addiction have had a devastating effect in the community, and this crisis poses a serious threat to public health, safety, and the economy. Boulder County and its municipalities joined the State of Colorado and thousands of other state and local governments to file lawsuits against the manufacturers, distributors, and pharmacies responsible for this epidemic.

These lawsuits have resulted in settlements totaling more than $26 billion nationwide, with Colorado expecting to receive more than $750 million. The Boulder County Region, including the cities within, is anticipating more than $30 million in Opioid Settlement Dollars between 2022 – 2038 to address the harms caused by this prescription painkiller crisis.

The Colorado Attorney General's Office developed the Colorado Opioid Settlement Memorandum of Understanding ("Colorado MOU") and the Colorado Opioid Abatement Council ("COAC") to oversee the distribution and use of Opioid Settlement Dollars across the state. The Colorado MOU was established in 2021 and provides the framework for distributing and sharing these settlement proceeds throughout Colorado. More information, including a dashboard tracking the use of Opioid Settlement Dollars across the state can be found on the Colorado Attorney General's Office website: **coag.gov/opioids**. As a part of the Colorado MOU, 19 regions have been established across the state, with Boulder County identified as Region 6. All municipalities within Boulder County have currently opted to route their individual shares of Opioid Settlement Dollars into the Regional share, creating one large pool of available funds across the county.

As stipulated in the Colorado MOU, each Region is required to establish a formal Regional Council and identify a fiscal agent to oversee its regional share of Opioid Settlement Dollars. Boulder County facilitates the Boulder County Region Opioid Council (BCROC), the formal decision-making body for use of Opioid Settlement Dollars across the Boulder County Region. The BCROC is made up of elected officials, city council members, city managers, and leadership from key human service departments from across the county. The BCROC was

formed through an intergovernmental agreement ("IGA"), which outlines the group's bylaws and requirements. The BCROC hosts monthly public meetings discussing the regional use of Opioid Settlement Dollars. **Information about the BCROC can be found on its website**. The County also acts as the fiscal agent responsible for holding and distributing the Boulder County Region's share, including staffing to manage the planning and distribution of these dollars.

All Opioid Settlement Dollars must be used in accordance with approved uses listed in the national TEVA settlement, known as "**Exhibit E**". The approved uses span the substance use continuum of care including Prevention & Education, Harm Reduction, Treatment, and Recovery. As part of the oversight process, the COAC reviews and ensures all Opioid Settlement Dollars requested and spent by each Region align with these approved uses.

To establish local priorities based on the approved uses in Exhibit E, staff from the Boulder County Community Services Department tasked with managing the fund distribution process, with guidance from the BCROC and in accordance with the IGA, established an advisory group known as the Boulder County Opioid Operations Board ("Ops Board"). The Ops Board is made up of local subject matter experts and professionals working across the substance use continuum of care as well as community members with direct lived experience related to the opioid crisis. The Ops Board developed a strategic plan which identifies a regional vision, long-term community outcomes, short-term goals, and the individual strategies necessary to abate the harms caused by the opioid epidemic including priority populations and geographic focuses. **The full abatement plan can be viewed here.**

The abatement plan was approved by the BCROC on June 21, 2024, and the County is now prepared to fund specific strategies included in the plan.

Boulder County's Strategic Plan

Vision:

- The Boulder County Region envisions a future in which the community's quality of life is increased, the number of deaths by overdose is decreased, and a full spectrum of culturally responsive substance use/misuse services are available without stigma.

Long Term Goals (4-6 years):

- A reduction in drug-related deaths.
- Fewer substance-related overdoses.
- Fewer youth reporting substance use and/or a later onset of substance use.
- An increase in culturally representative, non-Western model services.
- An increase in services offered in languages other than English.
- More community members accessing services across the continuum.

Short Term Goals and Related Strategic Approaches:

Prevention & Education:

1) **The dangers of opioids and fentanyl are understood, use of opioids and other substances is reduced or delayed, and the amount and frequency of use is reduced (Youth, unhoused individuals, and older adults identified as priority populations).**
   A) Develop and strategically distribute substance use and opioid prevention education resources, including, but not limited to, the dangers of illicit fentanyl, with an emphasis on and messaging tailored to priority populations.
   B) Increase availability and access to programs with a demonstrated effectiveness of preventing the uptake, use, and misuse of substances and opioids with a specific focus on priority populations.
2) **Resources and approaches to prevent and respond to overdose are accessible (People who use drugs (PWUD), Loved ones and family members of PWUD, and the broader community identified as priority populations).**

A) Develop and disseminate training about overdose prevention and response such as the administration of overdose reversal drugs and contextual education including, but not limited to, good Samaritan laws with an emphasis on and messaging tailored to priority populations.
B) Develop and disseminate training about overdose prevention and response such as the administration of overdose reversal drugs and contextual education including, but not limited to, good Samaritan laws with an emphasis on and messaging tailored to first responders, medical professionals, school staff, and other frontline professionals.

Harm Reduction:

3) **Harm reduction services are easily accessible so that substance use occurs under safer conditions and the spread of communicable diseases is reduced (People who use drugs (PWUD), Loved ones and family members of PWUD, People who serve PWUD, and bystanders identified as priority populations).**
   A) Provide training in harm reduction strategies to priority populations and health care providers, students, peer support professionals, treatment and recovery professionals, and those who provide care to people who use drugs.
   B) Increase capacity of and access to peer support services, case management, resource navigation, and other efforts to increase connection to care for harm reduction program recipients.
   C) Increase access to and support the distribution of harm reduction supplies and services including syringe exchange, fentanyl test strips, and testing controlled substances or analogs for potentially dangerous adulterants.
   D) Increase the availability and access to naloxone, with a specific focus on priority populations.

Treatment:

4) **Recommended levels of opioid use disorder treatment, and co-occurring substance use disorder and mental health treatments are available, culturally and linguistically responsive, timely, affordable, and offered in varying modalities (People who use**

drugs, People with co-occurring SU & MH conditions, Mountain region identified as priority populations).

A) Increase capacity and access to treatment services for people who use opioids, or individuals with opioid use disorder and any co-occurring substance use disorder or mental health conditions with a focus on priority populations.

B) Support stigma reduction efforts and support for people who use opioids, or individuals with opioid use disorder and any co-occurring substance use disorder or mental health conditions, including, but not limited to, reducing the stigma on effective treatment.

C) Increase capacity of and access to peer support services, case management, resource navigation, and other efforts to increase connection to care for substance use treatment program recipients.

D) Increase comprehensive wrap-around services to people who use opioids, or individuals with opioid use disorder and any co-occurring substance use disorder or mental health conditions, including, but not limited to, housing, transportation, education, job placement, job training, or childcare.

5) **Medication Assisted Treatment (MAT) is available without barriers including ability to pay, geographic location, and justice system involvement (People who use drugs, People with co-occurring SU & MH conditions, Mountain region identified as priority populations).**

A) Increase availability of MAT for people who use opioids, or individuals with opioid use disorder and any co-occurring substance use disorder or mental health conditions with a focus on priority populations.

Recovery:

6) **Support is available and accessible for individuals in recovery from substance use and related mental health conditions, and those in their lives, in order to improve their health and wellness, live a self-directed life, and strive to reach their full potential (People who use drugs, Unhoused individuals, and Youth identified as priority populations).**

A) Increase the number and capacity of high-quality evidence-based recovery programs, including culturally responsive and linguistically appropriate recovery services.

B) Increase the capacity of and access to peer support services, case management, resource navigation, and other efforts to increase connection to care for individuals in recovery from opioid use disorder and any related co-occurring substance use disorder or mental health conditions with a focus on priority populations.
C) Increase comprehensive wrap-around services to individuals in recovery from opioid use disorder and any related co-occurring substance use disorder or mental health conditions with a focus on priority populations, including, but not limited to, housing, transportation, education, job placement, job training, or childcare.

Applicant Eligibility

Boulder County, on behalf of the Boulder County Opioid Abatement Region, is seeking to provide funding to programs focused on reducing opioid use and the harms caused to the community by the unscrupulous marketing of prescription opioid painkillers. Funding aims to expand and enhance prevention & education, harm reduction, treatment, and recovery programming. This funding is open to all eligible entities interested in partnering with Boulder County to address the opioid epidemic.

The following eligibility requirements must be met by applicants:

- ✓ Applicant must provide services or engage in activities related to substance misuse and behavioral health support in alignment with Boulder County's strategic goal areas.
- ✓ Applicant, its officers, and employees are not currently debarred or suspended from doing business with the Federal Government, State of Colorado, Boulder County, or any other local government.
- ✓ Entities selected for funding must be able to participate in the evaluation of its proposed programming, including collecting demographic information of its participants and identified outcomes, unless otherwise stipulated in the funding agreement.
- ✓ Applicants do not need to reside in Boulder County, but the program's services related to Opioid Abatement funding must be completed primarily in and for Boulder County communities.

Application Questions

1. Pre-Qualification

a. Select your agency type.
    i. For-Profit Business
    ii. Governmental Agency
    iii. Non-Governmental Non-Profit
    iv. Sole Proprietor/Single-Member LLC
    v. Private Educational Institution
    vi. Public Educational Institution
    vii. Other:
        A. Provide details:

b. Does the agency provide services or engage in activities related to substance misuse and behavioral health support in alignment with at least 1 of Boulder County's 4 strategic areas for funding?
    i. Yes
    ii. No

c. Is the agency located in Boulder County?
    i. Yes
    ii. No

d. Will the agency be using Boulder County Opioid Abatement funding to provide services primarily in Boulder County?
    i. Yes
    ii. No

e. Non-Boulder County Agencies
    i. Is the agency established as a service provider in Boulder County?
        A. Yes, the agency is currently providing services in Boulder County.
        B. No, the agency wants to expand their services to Boulder County.
    ii. If your agency is not currently providing services to Boulder County, please describe the agency's plan to expand their services to this area.

Including, but not limited to, partnerships with agencies currently providing services, plans for community outreach to gain client base, etc.

2. Alignment with Boulder County's Strategic Areas

a. Select program alignment with Focus Area from Strategic Plan
b. Select program alignment with Short-Term Goal
    i. Choice of Goals depends upon which Focus Area was selected.
c. Select program alignment with Strategic Approach(es)
    i. Choice of Approaches depends upon which Short-Term Goal was selected.
d. Select program alignment with Priority Populations
    i. Choice of Populations depends upon which Short-Term Goal was selected.

3. Program Information

a. Program Name
b. Service Region
    i. City of Boulder
    ii. City of Longmont
    iii. East Boulder (Lafayette, Louisville, Erie, Superior)
    iv. Mountain Regions (Lyons, Nederland, Ward, Jamestown)
c. Funding Request
d. Program Description
    i. What is the program's mission and guiding values?
    ii. How will the program achieve the chosen goal using the associated approaches?
    iii. Does the program or agency provide any unique or non-traditional services?
    iv. Are there historical or current inequities that are being addressed, and how? *If applicable.*
e. Target Population

i. Which underserved population(s) will you target with your program?
ii. How do you define your priority population(s), if any, that you will target with your program?
iii. How many individuals do you predict your program will be able to serve during the funding period?

f. Centering Race
i. What percent of the population that your program targets includes Black, Indigenous, or People of Color (BIPOC)?

g. Outreach and Engagement
i. How will your program reach and engage with BIPOC individuals, if it isn't already doing so?
ii. What evidence does the program have that this is/will be an effective model for the target population(s)?

h. Evaluation
i. How is program evaluation designed and implemented?
ii. How do you know the program is likely to make progress and achieve its Opioid Abatement goal?
iii. Is your program able to collect demographic information? If not, explain.

i. Additional Information *(Optional)*

4. **Scope of Work**

a. Scope of Work
i. Activities #1-5
ii. Output(s)
iii. Timeline

b. Budget
i. Download **Budget Template**, Complete, and Upload
ii. Budget Narrative (Optional)

5. **Agency Information**

a. Primary Contact Name:
i. Email:

ii. Phone Number:

b. Secondary Contact Name:
    i. Email:
    ii. Phone Number:
c. Upload Non-Profit Determination Letter *(if applicable)*
d. Letter(s) of Support *(optional)*

6. Racial Equity, Diversity, and Inclusion

a. Does your agency have racial equity, diversity, and inclusion goals reflected in your missions, vision, goals, and workplans?
b. What policies and practices, if any, do you have to support racial equity, diversity, and inclusion?
    i. Upload documentation of Policies and/or Procedures (if applicable)
c. How does the program consider race (center race) in its service delivery?
d. How does the program/agency consider (center race) in its outreach efforts? How will the program meaningfully engage clients or participants in the design, implementation, and evaluation of the program?
e. How does the program/agency actively draw upon racially diverse perspectives in the community during the planning process?
f. What steps do you plan to take in 2025 to strengthen your agency/program's racial equity, diversity, and inclusion?
g. If available, provide details on any current racial equity, diversity, and inclusions partnerships or training that you are engaged in.

Example Exhibit A: Use of Funds

Background

Summary of program and alignment with Boulder County's strategic plan.

Population Served

Summary of alignment with Boulder County's Priority Populations and Racial Equity principles.

Allocation of Funds

[Example budget table on following page.]

Payment Schedule

January 15, 2025 or Upon Execution of Contract: $

April 1, 2025: $

July 1, 2025: $

October 1, 2025: $

January 1, 2026: $

April 1, 2026: $

July 1, 2026: $

October 1, 2026: $

Example Exhibit B: Administrative Requirements

Reporting

Quarterly impact and fiscal reconciliation reports are due:

April 15, 2025	April 15, 2026
July 15, 2025	July 15, 2026
October 15, 2025	October 15, 2026
January 15, 2026	January 15, 2027

Quarterly impact reports include programmatic details based on the individual use of funds, as well as information about clients served, challenges encountered in service provision, and assistance that might be needed to maintain compliance. Impact reports will be reviewed for compliance to use of funds. Boulder County reserves the right to discontinue funding based upon terms listed in the funding agreement.

Terms and Conditions

I. Applicants are expected to review and understand the Opioid Abatement RFA Manual, Boulder County's Strategic Plan for Opioid Abatement, Terms and Conditions for funding, and all application instructions. Failure to do so will be at the applicant's risk.

II. Proposed programs must identify the opioid abatement goal their program most closely aligns with (e.g., Overdose Prevention & Response). Programs may select multiple strategies within the goal that their program activities achieve, if applicable.

III. Organizations with programs that achieve multiple goals are required to submit individual applications for each goal *(e.g., An organization must submit one application for providing case management for its harm reduction program participants and a* separate *application for its prevention education programming as they fall under different goal areas)*.

IV. Programming must align with approved uses for opioid settlement dollars listed within **Exhibit E of the national TEVA settlements**.

V. Each applicant will furnish all information required in the Request for Application (RFA).

VI. Late or unsigned applications will not be accepted or considered. It is the responsibility of applicant to ensure that the application has been submitted by 10/10/2024 at 4:30pm.

VII. Applications must be submitted using Foundant; application packages will not be accepted by email, fax, or physical mail.

VIII. Boulder County reserves the right to reject any or all applications and to waive informalities and minor irregularities in applications received, and to accept any portion of or all items proposed if deemed in the best interest of Boulder County.

IX. Funds will be awarded based on a proposed project's alignment with the RFA, price, and ultimate benefit to the people of Boulder County, among other factors. Boulder County, within its sole discretion, will select awardees from any, all, or none of the targeted goal areas, limited by the available funding in this period.

    a. The reviewing committee, Boulder County, and the Boulder County Region Opioid Council will determine if the amount requested in the application is in alignment with the overarching goals identified in the Region Opioid Abatement Plan.

b. The goal of this RFA is to sufficiently fund as many strategic approaches and achieve as many goal areas as possible. As such, entities requesting large portions of the Opioid Settlement Dollars must adequately explain the benefit and outcomes associated with the size of the request.

X. The proposed funding amount will be exclusive of any Federal or State taxes from which Boulder County is exempt by law.

XI. All work performed as a result of this solicitation must comply with all applicable provisions of sections 24-85-101 through 24-85-104, C.R.S., including the Accessibility Standards for Individuals with a Disability, as established by the Office of Information Technology pursuant to section 24-85-103(2.5), C.R.S.; all State of Colorado technology standards related to technology accessibility; and with Level AA of the most current version of the Web Content Accessibility Guidelines (WCAG), incorporated in the State of Colorado technology standards. For more information, applicants can review the Vendor Accessibility Guidelines and Checklist.

XII. Confidential/Proprietary Information: Bids submitted in response to the “Request for Application” and any resulting funding agreements are subject to the provisions of the Colorado Open Records Act, 24-72-201 et seq., C.R.S., as amended. Any restrictions on the use or inspection of material contained within the application or resulting funding agreement should be clearly stated in the bid and contract itself. Confidential/proprietary information should be readily identified, marked and/or separated from the rest of the application. Co-mingling of confidential/proprietary and other information is NOT acceptable. Vendors must answer whether line-item pricing information submitted with an application is confidential or closely held. Applications that do not identify confidential/proprietary information may be released in their entirety. Pricing totals contained in an application are not considered confidential. Boulder County retains sole authority for determining whether the Colorado Open Records Act requires or permits the County to disclose proposal or application documents, or any information contained therein, pursuant to an open records request.

XIII. Contracting

a. Awardees will enter into a two-year funding agreement for services to be completed between January 1, 2025, to December 31, 2026.

b. A signed funding agreement or MOU furnished to the successful applicant results in a binding contract without further action by either party.
c. All awardees will be required to follow Boulder County's funding agreement or contracting process which may take up to 8 weeks to complete. As such, it is recommended that this be kept in mind regarding timelines for goals, objectives, or deliverables.
d. It is recommended that applicants not include goals, objectives, or deliverables before a start date of January 1, 2025.

XIV. Subcontracts

a. Due to the nature of the funding source, applicants acknowledge that they may not provide any of the funding awarded as part of this RFA to any other organization without the express approval of the Boulder County Region Opioid Council.
b. Any subcontracts related to the work outlined in the application must be included in the work plan and budget, even if a subcontractor has not yet been determined.
c. The Boulder County Region Opioid Council reserves the right to deny requests that are missing information related to the need to subcontract work.

XV. Partnerships:

a. To best serve the Boulder County community, organizational partnerships are highly recommended, with clear evidence of close interaction and responsible partnership among the participants.
b. It is the applicant's responsibility to ensure all partners, including subcontractors, meet the eligibility requirements outlined in this RFA.
c. Partnering organizations should only submit one application and identify one entity to serve as the applicant. This should be the entity that will receive the grant award and be responsible for funds management and submitting required reporting.
d. Applicants applying as a partnership must explain in detail the breakdown of activities, outputs, outcomes, and budget related to each organization.

XVI. Multiple Funding Requests from the Same Entity:

a. Entities may submit more than one response to this RFA. The following requirements are placed on entities submitting more than one application:
    i. Entities that are applying for funds in order to (a) hire new employees to perform work associated with this application or (b) supplement the wages of an existing employee may not use multiple awards from this RFA to fund the same employee.
    ii. Scopes of Work submitted by the same entity under different responses may not have overlapping activities as part of each individual work plan.
    iii. It is highly encouraged that entities submitting multiple applications work internally to ensure that there is no overlap in activities or time commitments. As such, it is also recommended that organizations partner with other entities.

XVII. Approved Uses for Awarded Funds

a. Program operating costs including, but not limited to:
    i. Treatment Services: Funds may be used for levels one (outpatient) and two (IOP/HIOP) in the ASAM Criteria Continuum of Care for Adult Addiction Treatment. See **ASAM website** for more information. Funds may also be used for treatment programs that provide holistic care including counseling as well as other community informed, culturally appropriate types of treatment shown effective for substance use.
    ii. Hiring additional staffing support, labor, or personnel.
    iii. Reasonable transportation costs, and expenses for supplies and materials with appropriate justification.
    iv. Program evaluation (including staff time for data collection and costs to compensate and incentivize community members to participate in data collection efforts).
    v. Program outreach and community engagement (including language translation and interpretation costs).
    vi. Federal Benefit enrollment assistance.
    vii. Program marketing costs (including printing, paid advertising, etc.).
b. Staff support including, but not limited to:

i. Technical assistance, capacity building, mentorship.
ii. Professional development and training.
iii. Infrastructure enhancements including, but not limited to:
    1. Facility infrastructure upgrades, such as plumbing, electrical, or renovations to improve the efficiency of operations, warehousing, and food storage, loading or packaging equipment, software, and other equipment or materials.
    2. Equipment (may include vehicles and vehicle maintenance) and capital infrastructure costs.
    3. Value chain management improvements (such as trucks, bikes, communications, routing systems or software to improve distribution routes or efficiency, etc.).
    4. Transportation or loading improvements such as purchasing or leasing trucks, or other vehicles, or pallet jacks, forklifts, carts, conveyer belts etc.

c. Other uses, including, but not limited to:
    i. Sub-awards or sub-grants (including contracts to hire experts in an area related to the proposal, including evaluation and quality improvement through surveys, focus groups, etc.).
    ii. No more than 10% of the amount requested is allowed for indirect costs.
    iii. No more than 10% of the amount requested is allowed for administrative costs.

XVIII. Disapproved Uses

a. Funds may not be used to supplant existing funding from other sources.
b. Funds may not be used for services billable elsewhere, such as Medicaid or private insurance.
c. Treatment Services: Funds may not be used for levels three (residential) and four (inpatient) in the ASAM Criteria Continuum of Care for Adult Addiction Treatment. See **ASAM website** for more information.
    *i. *Note: Further investigation is currently being conducted to identify funding needs for these higher acuity treatment approaches.*

d. Legislative policy and advocacy; IRS-defined lobbying; political activities or partisan causes; one-time events; annual appeals; membership drives; underwriting or fundraising events; endowments; loans or debt reduction
e. Funds cannot be used to support religious practices, such as religious instruction, worship, or prayer. Faith-based organizations are eligible to apply and may offer such practices, but at a separate time and location as the program applying for funding.
f. Funds cannot be used for purchasing insurance of any kind.

XIX. Reporting Requirements

a. Impact and reconciliation reports will be due on a quarterly basis. Dates will be identified in individual funding agreements.
b. Payment may be withheld if reports are not received by due dates.
c. Impact reports capture progress on program outputs and outcomes outlined in individual scopes of work. Impact reports will be submitted to an identified County program manager.
d. Reconciliation reports track use of funds and are submitted to an identified County fiscal contact.

Evaluation

Each application will undergo a technical review to ensure it meets the minimum requirements. Incomplete applications or those that do not follow instructions will not be accepted and will be automatically disqualified. There is no guarantee that submission of an application will result in review, or funding at the requested level.

- A review committee will be assembled consisting of experts related to the four Goal Areas: Prevention & Education, Harm Reduction, Treatment, and Recovery.
- Reviewers will not represent programs applying for Opioid Settlement Dollars.
- The award(s) will be made to the Applicant(s) whose proposal meets the requirements of the RFA and is determined to be most responsive, responsible, and best value to the county, in accordance with the provided scoring criteria, and community needs.
- County staff will present the funding recommendations for consideration and formal approval by the Boulder County Region Opioid Council. The Boulder County Region Opioid Council meeting will be public.
- Boulder County reserves the right to conduct negotiations with one or more applicants.
- All application decisions are final. Boulder County reserves the right to make smaller discretionary awards to support specific portions of a proposal that is not being considered for fully proposed funding.
- Qualified respondents may be invited to enter into an agreement with Boulder County. Any award(s) provided to selected respondents shall be contingent upon the execution of an appropriate funding agreement.

Scoring Criteria:

Final evaluation and application selection may be based on, but is not limited to, any or all the following listed:

- ✓ Cultural Responsiveness and Commitment to Racial Equity: Assessment of the agency's ability to plan, increase, and, or maintain inclusive and culturally appropriate service delivery.

- ✓ Need, Timeline, Outcomes, and Evaluation: Assessment of the program's alignment with Boulder County's strategic plan including its service plan, intended outcomes, and ability to measure impact.
- ✓ Population Focus: Evaluation of the program's ability to meaningfully engage and serve a population negatively impacted by opioids.
- ✓ Funding Requested: The amount of funding requested is reasonable and appropriate for the proposed services.

Awards

- All applications go through a formal evaluation and scoring process.
- Final award determinations will be reviewed and approved by the BCROC.
- Awards are dispensed in equal amounts on a quarterly basis.
- The distribution of award funds could be delayed depending on when regional disbursement of funds occurs.
- There is no minimum funding request. The maximum funding request is $150,000 per year for a total maximum funding request of $300,000 over a two-year period.
- Quarterly progress and fiscal reconciliation reports will be required using a provided template.
- Awardees will enter into a two-year funding agreement for services. Funding agreements will be reviewed annually for overall compliance and program impact. Boulder County reserves the right not to extend second-year funding based on noncompliance.

Glossary of Terms

Substance Use Prevention & Education: Refers to strategies and activities designed to stop substance use before it starts or to mitigate its harmful effects if it does occur, as well as providing information and resources to help individuals understand the effects and risks of substance use to promote informed decision-making.

- Example programming includes but is not limited to: School-based programs, media campaigns, public drug take-back events, community-based coalitions, community and family intervention programs, and education programs tailored to specific populations.

Harm Reduction: Strategies and approaches aimed at minimizing the negative health, social, and legal impacts associated with drug use, without necessarily requiring individuals to stop using drugs.

- Example programming includes but is not limited to: training programs tailored to specific populations, syringe service programs, substance testing, testing for infectious diseases, and naloxone distribution.

Treatment: A comprehensive set of services and interventions designed to help individuals overcome their dependency on drugs, improve their health and functioning, and achieve long-term recovery. Treatment approaches must be tailored to address each patient's drug use patterns and drug-related medical, psychiatric, environmental, and social problems.

- *Note: Please see the Approved and Disapproved Uses for Awarded Funds section for further information about specific treatment modalities eligible for funding in this RFA.*

Recovery: A dynamic and ongoing process through which individuals achieve improvements in their overall health, well-being, and quality of life. It involves making positive changes to reduce or eliminate substance use, managing symptoms, and striving for a balanced and fulfilling life.

- Example programming includes but is not limited to: Peer recovery services, recovery programs that focus on specific populations, and 12 step programs.

Case Management: Appears as an approach within the Harm Reduction, Treatment, and Recovery goal areas. A collaborative process that helps individuals navigate and access various services and support. Case management assists a community member transition between different providers or levels of care.

- *Note: While case management services are effective across the entire continuum of care, this RFA is looking to fund case management services specifically related to supporting individuals to be successful through harm reduction, treatment, and recovery programming.*

Wrap-around Services: Appears as an approach within the Treatment and Recovery goal areas. Refers to a comprehensive, individualized approach to address a person's overall needs from multiple angles. It's designed to "wrap" the person with a coordinated network of support that goes beyond traditional care.

- *Note: While wrap-around services are effective across the entire continuum of care, this RFA is looking to fund wrap-around care specifically related to supporting individuals to be successful in treatment and recovery programming.*
- Example programming includes but is not limited to: supporting access to food, transportation, educational support, childcare, employment services, legal assistance, and social connection.

Bystanders: Identified as a priority population within the Harm Reduction goal area with the intention to reduce community stigma. "Bystanders" may be members of the community who have developed stigma or have negative preconceived notions towards individuals who use drugs. For example, these might be people who do not understand the importance of harm reduction programs.

Foundant FAQ

- How to create a New User Account
- How to Update Account Information for an Existing User
- Formatting Text in a Narrative Box
- Uploading a Document within the Grant Application
- How to Copy a Request to Submit Multiple Applications

Please submit all questions to the Opioid Settlement Funds Question Form