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CHALIS

CHA Low-Income Services

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Board of Directors

Bob Hutton, Chair
Robin Wenneker, Vice-Chair
John French
Max Lewis
Rigel Oliveri

Executive Director

Randy Cole

Board of Directors Meeting Agenda

Date: Thursday, May 6, 2021

Time: 3:00 p.m.

Place: Due to the COVID-19 pandemic, this will be a virtual meeting held through the Zoom video conferencing application. Those with computers with cameras may join with video and audio. Those without video access may listen in using computer audio or telephone. To receive an invitation to participate in the meeting send an email request to: columbiaha.info@gmail.com at least four (4) hours prior to the start of the meeting.

- I. Call to Order
- II. Roll Call
- III. Approval of Agenda
- IV. **Resolution 120:** To Authorize the Submission of a Drug-Free Communities Support Program grant application to the Department of Center of Disease Control and Prevention, to establish and strengthen collaboration in communities to prevent substance use among youth and authorizing the execution of the contract award agreement and implementation of the program as described in the funding application.
- V. Public Comment
- VI. Commissioner Comment
- VII. Adjournment

If you wish to participate in the meeting and require specific accommodations or services related to disability, please contact Ms. Charline Johns, Executive Assistant at (573) 443-2556, extension 1122, at least one working day prior to the meeting. (Email: www.columbiaha.info@gmail.com)

Media Contact: Randy Cole, Executive Director
Phone: (573) 443-2556
E-mail: www.columbiaha.info@gmail.com

A complete agenda packet is available for review at all CHA offices during regular business hours and posted on the CHA web site at: www.ColumbiaHA.com.



Housing Authority of the City of Columbia, Missouri

CHALIS Board Resolution Staff Memo

To: CHALIS Board of Directors

From: Randy Cole, Executive Director

Date: May 06, 2021

RE: **Resolution 120:** To authorize the submission of a Drug-Free Communities Support Program grant application to the Department of Center of Disease Control and Prevention, to establish and strengthen collaboration in communities to prevent substance use among youth and authorizing the execution of the contract award agreement and implementation of the program as described in the funding application.

The Department of Center for Disease Control and Prevention (CDC), Substance Abuse and Mental health Services Administration has announced the availability of funds for new FY2021 Drug Free Communities Support Program (DFC) grants.

The DFC grant program is a collaborative initiative sponsored by Office of National Drug Control Policy (ONDCP) in partnership with the Department of Center for Disease Control and Prevention (CDC), in order to achieve two major goals:

- Establish and strengthen collaboration among communities, private nonprofit agencies, and Federal, State, local, and tribal governments to support the efforts of community coalitions to prevent and reduce substance abuse among youth.
- Reduce substance abuse among youth and, over time, among adults by addressing the factors in a community that increase the risk of substance abuse and promoting the factors that minimize the risk of substance abuse.

CHA Low-Income Service's request will be for approximately \$625,000 over five years to fund the activities of the Boone County Coalition to Prevent Substance Use, a new coalition formed in 2015 to combine the work of the Youth Community Coalition with newly developing efforts in five additional Boone County Communities.

Staff Recommendation: Adopt Resolution #120 authorizing the Executive Director to submit a Drug-Free Communities grant application to the Department of Health and Human Services on behalf of the Boone County Coalition to Prevent Substance Use; and to act as paid fiscal agent for the duration of the contract award.



Housing Authority of the City of Columbia, Missouri

CHALIS

CHA Low-Income Services, Inc.

RESOLUTION # 120

To authorize the submission of a Drug-Free Communities Support Program grant application to the Department of Centers for Disease Control and Prevention (CDC) to establish and strengthen collaboration in communities to prevent substance use among youth and authorizing the execution of the contract award agreement and implementation of the program as described in the funding application.

WHEREAS, CDC Drug Free Communities Support Program works to establish and strengthen collaboration among communities, private nonprofit agencies, and Federal, State, local, and tribal governments to support the efforts of community coalitions to prevent substance use among youth (anyone under age 18); and

WHEREAS, These services should enable communities to reduce substance abuse among youth, and, over time, among adults by addressing the factors in a community that increase the risk of substance abuse and promoting the factors that minimize the risk of substance abuse; and

WHEREAS, As fiscal agent, CHA Low Income Services, Inc. will seek approximately \$625,000 over five years to fund the activities of the Boone County Coalition for Prevention of Substance Use, a county-wide coalition combining the efforts of the Youth Community Coalition with new efforts in five additional Boone County communities;

NOW, THEREFORE, BE IT RESOLVED that the Board of Commissioners of CHA Low-Income Services, Inc. of the City of Columbia, Missouri adopts Resolution #120 authorizing the Executive Director to prepare and submit documents which are necessary in applying for an estimated \$625,000 payable over five years to fund the salary, benefits, training, strategy implementation and administrative costs of the Boone County Coalition to Prevent Substance Use; and authorizing CHA Low-Income Services, Inc., as paid fiscal agent for the duration of the award, to complete the execution of the contract award agreement as described in the funding application.

Bob Hutton, Chair

Randy Cole, Secretary

Adopted May 07, 2021



Centers for Disease Control and Prevention

NATIONAL CENTER FOR INJURY PREVENTION AND CONTROL

Drug-Free Communities (DFC) Support Program – Competing Continuation
CDC-RFA-CE20-2004CC21
05/26/2021

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Part 1. Overview Information

Federal Agency Name:

Federal Centers for Disease Control and Prevention (CDC)

Notice of Funding Opportunity (NOFO) Title:

Drug-Free Communities (DFC) Support Program – Competing Continuation

Announcement Type:

Competing Continuation - Type 2

Agency Notice of Funding Opportunity Number:

CDC-RFA-CE20-2004CC21

Assistance Listings Number:

93.276

Key Dates:

Due Date for Applications 05/26/2021

05/26/2021

Application must be successfully submitted to Grants.gov by 11:59 pm Eastern Standard Time on the deadline date.

Additional Overview Content:

Executive Summary

The Drug-Free Communities (DFC) Support Program was created by the Drug-Free Communities Act of 1997 (Public Law 105-20). The Executive Office of the President, Office of National Drug Control Policy (ONDCP), and the Department of Health and Human Services (HHS), Centers for Disease Control and Prevention (CDC), National Center for Injury Prevention and Control (NCIPC) are accepting applications for Fiscal Year (FY) 2021 Drug-Free Communities (DFC) Support Program grants. The purpose of the DFC Support Program is to fund community-based coalitions addressing youth substance use that have previously received a DFC grant, but have experienced a lapse in funding or have concluded the first five-year funding

cycle and are applying for a second five-year funding cycle (Year 6). In accordance with the DFC Act, DFC Support Program has two goals:

- 1) Establish and strengthen collaboration among communities, public and private non-profit agencies, as well as federal, state, local, and tribal governments to support the efforts of community coalitions working to prevent and reduce substance abuse among youth (individuals 18 years of age and younger).
- 2) Reduce substance abuse among youth and, over time, reduce substance abuse among adults by addressing the factors in a community that increases the risk of substance abuse and promoting the factors that minimize the risk of substance abuse.

Measurable outcomes of the program will be in alignment with one (or more) of the following performance goal(s) for the NATIONAL CENTER FOR INJURY PREVENTION AND CONTROL

GPRA goal(s)

This NOFO supports the following public health priorities and strategies:

HHS Five-Point Opioid Strategy (<https://www.hhs.gov/opioids/about-the-epidemic/hhs-response/index.html>)

This announcement is only for non-research activities supported by CDC. If research is proposed, the application will not be considered. For this purpose, research is defined at https://www.govregs.com/regulations/title42_chapterI_part2_subpartD_section2.52. Guidance on how CDC interprets the definition of research in the context of public health can be found at <https://www.hhs.gov/ohrp/regulations-and-policy/regulations/45-cfr-46/index.html> (See section 45 CFR 46.102(d)).

Section I. Funding Opportunity Description

Statutory Authority

Drug-Free Communities Act, 21 USC 1531 et seq., P.L. 105-20

Background

Substance use is a global public health issue affecting individuals, families, and communities. Recent data indicate that 70,630 lives were lost to drug overdose in the United States in 2019. Further, provisional data indicate approximately 81,230 drug overdose deaths occurred in the United States in the 12-months ending in May 2020, with these deaths being driven largely by synthetic opioids, cocaine, and methamphetamines. These changes represent a worsening of the drug overdose epidemic during the COVID-19 pandemic and the largest number of drug overdoses for a 12-month period ever recorded. These troubling data underline the need to implement primary prevention strategies designed to prevent substance use before it begins – for instance, by implementing programs, policies, and practices to prevent initiation of substance use among youth.

Prevention of initiation of and use of substances among youth is particularly important given that substance use during childhood and adolescence is associated with negative impacts on brain physiology, engagement in risky behaviors, and increased risk for harmful substance use and overdose later in life. Recent data from CDC’s Youth Risk Behavior Survey (YRBS) show

that more than 29% of high school students consumed alcohol, with almost 14% of high school students engaging in binge drinking. Tobacco use also remains common, with nearly 7 of every 100 middle school students (6.7%) and about 24 of every 100 high school students (23.6%) reporting current use of a tobacco product, mainly driven by e-cigarette use. Additionally, approximately 21.7% reported current marijuana use and 7.2% reported current prescription opioid misuse.

Addressing the root causes of and risk factors for youth substance use is critical. These can include exposure to adverse childhood experiences (ACEs), lack of parental involvement and positive parental attitudes towards substance use behavior, family rejection of sexual orientation or gender identity, lack of involvement or achievement in school, and anxiety, depression, or other mental health challenges. These conditions are also important to consider in the prevention of substance use among youth.

YRBS data from 2009 to 2019 show that both Black and Hispanic youth populations are significantly more likely to use prescription drugs, cocaine, and methamphetamines, while non-Hispanic White youth report higher rates of current alcohol use and binge drinking. Youth who identify their sexual orientation as lesbian, gay, bisexual, transgender, queer/questioning or are uncertain of their sexuality (LGBTQ+) report higher rates of substance use. Finally, higher rates of opioid-related deaths and opioid prescriptions have been recorded in rural areas than in urban areas.

Such an approach involves interventions that target individual, family, and community-level risk and protective factors and focuses on youth that are at the greatest risk of using substances. Thus, this funding opportunity is designed to continue to fund work focused on 1) establishing and strengthening collaboration among communities, public and private non-profit agencies, as well as federal, state, local, and tribal governments to support the efforts of community coalitions working to prevent and reduce substance use and misuse among youth and 2) reducing substance among youth and, over time, reduce substance use and misuse among adults by addressing the factors in a community that increases the risk of substance use and misuse and promoting the factors that minimize the risk of substance abuse.

Purpose

The purpose of the DFC Support Program is to establish and strengthen collaborations to support the efforts of community coalitions working to prevent and reduce substance use among youth by addressing the factors in a community that increase the risk of substance use and misuse and promoting the factors that minimize the risk of substance use.

This NOFO addresses the proposed Healthy People 2030 focus areas of [alcohol](#), [tobacco](#), [injury](#), [violence prevention](#), and [substance use](#).

Program Implementation

Recipient Activities

A. Background and Approach

The approach is described below within the DFC Framework and the Outcomes and Strategies and Activities sections. The Framework of the DFC Program (**Table 1**) outlines an approach that is implemented by a multi-sector community-based coalition. For the purposes of this NOFO and

the DFC Support Program, a coalition is defined as a community-based formal arrangement for cooperation and collaboration among groups or sectors of a community in which each group retains its identity, but all agree to work together toward a common goal of building a safe, healthy, and drug-free community. The recommended strategies and activities are based on the Seven Strategies for Community-Level Change (refer to the Funding Opportunity Description: Strategies and Activities section for additional information) and identify the intended short-term, immediate, and long-term outcomes for this NOFO. □ □

Table 1: DFC Framework

CDC-RFA-CE20-2004CC21 Drug-Free Communities (DFC) Support Program - Competing Continuation Framework			
Goal: Strengthen community coalitions and reduce/prevent youth substance use			
Strategies and Activities	Short-Term Outcomes	Intermediate Outcomes	Long-Term Outcomes
<p>Provide information to the general public and key stakeholders about youth substance use.</p> <p>Enhance skills among relevant stakeholders so youth/adults can engage in positive social and decision-making capabilities.</p> <p>Provide support to increase opportunities that increase involvement in drug-free/healthy alternative activities.</p> <p>Enhance access, reduce barriers, and improve connections between systems and services that help prevent youth substance use.</p> <p>Change consequences to incentivize positive practices and disincentivize negative practices.</p> <p>Change physical design of the community to enhance protection against or to reduce the risk for youth substance use.</p> <p>Educate and inform about modifying/ changing policies that</p>	<p>Improve knowledge regarding patterns of youth substance use.</p> <p>Improve knowledge of coalition efforts to address youth substance use in the community.</p> <p>Increase outreach to relevant sectors of the community to address youth substance use.</p> <p>□</p> <p>Increase the capacity of local agencies and/or organizations to address youth substance use.</p> <p>Increase intergovernmental cooperation, coordination, and collaboration to change the conditions that impact youth</p>	<p>Reduce factors in the community that increases the risk of substance use and misuse.</p> <p>□</p> <p>Increase the promotion of factors that minimize the risk of substance use and misuse.</p> <p>Increase the ease, ability, and opportunity for youth to access settings, such as programs emphasizing self-efficacy and learning skills that prevent substance use and misuse.</p> <p>Decrease the ease, ability, and opportunity for youth to access substances.</p>	<p>Establish and strengthen collaboration among community stakeholders and organizations to address youth substance use.</p> <p>Reduce substance use among youth, and over time, reduce substance use among adults.</p>

reduce access and availability to substances among youth.	substance use. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
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Purpose

The purpose of the DFC Support Program is to establish and strengthen collaborations to support the efforts of community coalitions working to prevent and reduce substance use among youth by addressing the factors in a community that increases the risk of substance use and misuse and promoting the factors that minimize the risk of substance use.

Outcomes

A series of short-term, intermediate, and long-term outcomes are expected to be achieved as a result of recipient efforts (shown in **Table 1 DFC Framework**) by the end of the period of performance. The short-term, intermediate, and long-term outcomes should be tailored to the work plan (aka 12-Month Action Plan) of strategies selected.

Strategies and Activities

Recipients are expected to work with leaders in their communities to identify and address local youth substance use problems and create sustainable community-level change through the implementation of evidence-based and practice-based prevention strategies. Such strategies seek to: (1) limit access to substances; (2) change the culture and context within which decisions about substance use are made; and/or (3) shift the consequences associated with youth substance use. Well-conceived strategies, activities, and policies at the local, state and national levels are powerful tools communities can reference and utilize to reduce youth substance use in their communities. Please see **Appendix B: Resources on Evidence-Based and Practice-Based Strategies and Activities** for more information.

Recipients are expected to propose strategies and activities that are comprehensive and that can be implemented during the period of performance (over the 5-year period). Recipients are expected to use the Seven Strategies for Community-Level Change, described below and outlined in the **DFC Framework (Table 1)** and the Strategic Prevention Framework to inform their approach.

Seven Strategies for Community-Level Change

The Seven Strategies for Community-Level Change include efforts that affect individuals as well as an entire community.

1. **Provide information** about youth substance use: Educational presentations, workshops or seminars, and data or media presentations (e.g., Public Service Announcements (PSAs), brochures, town halls, forums, web communication, including social media).

2. **Enhance skills** so youth/adults can engage in positive social and decision-making capabilities: Workshops, seminars, or activities designed to increase the skills of participants, members, and staff (e.g., training and technical assistance, parenting classes, strategic planning retreats, model programs in schools).
3. **Provide support** to increase opportunities that reduce risk or enhance protection for youth/adults: Creating opportunities for participation in activities that reduce risk or enhance protection (e.g., alternative activities, mentoring, referrals for service, support groups, youth clubs).
4. **Enhance access, reduce barriers, and improve connections** between systems and services that help prevent youth substance use: Improving systems/processes to increase the ease, ability, and opportunity to utilize those systems and services (e.g., assuring transportation, housing, education, safety, recreational facilities, and cultural sensitivity) in prevention initiatives.
5. **Change consequences** to incentivize positive practices and disincentivize negative practices: Increasing or decreasing the probability of a behavior (incentives/disincentives) by altering the consequences for performing that behavior (e.g., recognition programs for merchants who pass compliance checks; publicizing businesses non-compliant with local ordinances).
6. **Change physical design** of the community to reduce the risk for and enhance protection against youth substance use: Changing the physical design of the environment to reduce risk or enhance protection (e.g., re-routing foot/car traffic, adjusting park hours, alcohol/tobacco outlet density). **NOTE:** DFC federal funds cannot support landscape and lighting projects. As such, costs for these projects cannot be used as a match.
7. **Educating and informing about modifying or changing policies** that reduce access and availability to substances among youth: Change in written procedures, by-laws, proclamations, rules, or laws, to the extent applicable law and policies allow (e.g., workplace initiatives, law enforcement procedures, and practices, public policy actions, systems change).

For more information on the Seven Strategies for Community Change, visit <http://www.cadca.org/resources/coalition-impact-environmental-prevention-strategies>

In addition to using the Seven Strategies for Community Change, DFC-funded coalitions are expected to utilize SAMHSA's Strategic Prevention Framework (SPF) as the planning model to develop long-range plans. The SPF is a five-step evidence-based process for community planning and decision-making. Cultural competence and sustainability should be considered throughout all five steps of the process, which includes:

1. **Assessment:** Identify local youth substance use problems and the community conditions that contribute to the specifically identified issues.
2. **Capacity:** Mobilize/build capacity to change the conditions and address the youth substance use problems.
3. **Planning:** Develop a comprehensive 12-month Action Plan and multi-year Strategic Plan.
4. **Implementation:** Implement action and strategic plans with multiple objectives, strategies, and activities.

5. **Evaluation:** Monitor, sustain, improve, or replace prevention activities, efforts, and strategies.

For more information on the SPF, visit <https://www.cadca.org/sites/default/files/OverviewSPF.pdf> .

Community coalitions are encouraged to use the National Coalition Institute's (NCI) coalition logic model to address their local youth substance use problems, their related root causes, and local conditions. The results of that analysis are used to determine the strategies and activities that will be implemented in this grant to support the outcomes identified in the DFC Framework.

For more information on the DFC coalition logic model, visit https://www.cadca.org/sites/default/files/cadca_logic_model.pptx .

Submission of a coalition's logic model is not required.

Collaborations

a. With other CDC programs and CDC-funded organizations:

Recipients are **encouraged**, where applicable and appropriate, to collaborate with CDC programs that are implementing evidence-based and practice-based prevention strategies that align with the strategies identified in the Strategies and Activities Section of this NOFO.

Memorandums of Understanding (MOUs) or Memorandums of Agreement (MOAs) are not required. Examples of relevant CDC programs include, but are not limited, to:

- Overdose Data to Action (OD2A) <https://www.cdc.gov/drugoverdose/od2a/index.html>
- Opioid Response Strategy (ORS), High-Intensity Drug Trafficking Areas (HIDTA) Program <https://ahidta.org/content/overdose-response-strategy>
- Division of Adolescent and School Health <https://www.cdc.gov/healthyyouth/>
- Adverse Childhood Experiences, Division of Violence Prevention <https://www.cdc.gov/violenceprevention/aces/index.html>
- Suicide Prevention, Division of Violence Prevention <https://www.cdc.gov/violenceprevention/suicide/index.html>
- Office of Smoking and Health <https://www.cdc.gov/tobacco/about/osh/>

b. With organizations not funded by CDC:

Recipients receiving DFC funds are expected to collaborate with organizations and leaders in their communities. They will identify and address local youth substance use problems and create sustainable community-level change through the implementation of evidence-based and practice-based prevention strategies and use the Seven Strategies for Community-Level Change (refer to Strategies and Activities Section of this NOFO).

Memorandums of Understanding (MOUs) or Memorandums of Agreement (MOAs) are not required.

Target Populations

Applicants are expected to define the communities they propose to serve. The DFC Support Program does not prescribe the demographics or geographic location of DFC-funded coalitions. Applicants may use various geographic boundaries including neighborhoods, census tracts, zip codes, and school districts, as well as townships, counties, or parish lines, among others, to define their community. Applicants should carefully consider the size and population of the area in which the coalition is established so they will have the ability to create change. For example, choosing a community that is too large may be problematic due to the inclusion of multiple neighborhoods that have distinct problems or conditions that need to be addressed to affect change. Applicants must include the rationale for the selection of their chosen community and describe how their selection will help to achieve the program purpose of preventing and reducing substance use among youth (including use of alcohol, marijuana tobacco, and prescription drugs). Applicants should demonstrate specific consideration of population(s) of the highest risk when selecting a community to serve.

Health Disparities

As described in previous sections of this funding opportunity, applicants will focus efforts on youth (i.e., 18 years of age or younger), with an emphasis on promoting health equity, reducing disparities that impact youth substance use, and addressing the social determinants that negatively impact health outcomes in communities. Black, Hispanic, LGBTQ+, and rural populations are at higher risk for certain forms of substance use. Applicants should pay particular attention to populations at higher-risk for substance-abuse or misuse, as well as populations underserved by other programs, such as non-English speaking populations, people with limited health literacy, tribal populations, and other geographically underserved communities.

B. Evaluation and Performance Measurement Plan

Evaluation and Performance Measurement are tools used to (1) help demonstrate achievement of program outcomes; (2) build a stronger evidence base for specific program interventions; (3) clarify the applicability of the evidence base to different populations, settings, and context, and (4) drive continuous program improvement. Evaluation and performance measurement can also determine whether program strategies are scalable and effective at reaching the target or intended populations.

To meet the requirements outlined above, DFC grant award recipients will be required to:

- Participate in the DFC National Cross-Site Evaluation. The DFC National Cross-Site Evaluation is intended to measure the effectiveness of the DFC Support Program in reducing youth substance use. Recipients are required to provide data every two years on the following core measures for alcohol, tobacco, marijuana, and prescription drugs for three grades (6th-12th):
 - Past 30-day use.
 - Perception of risk or harm related to use.
 - Perception of parental disapproval of use.
 - Perception of peer disapproval of use.

- Describe a **Data Management Plan (DMP)** outlined in the Data Management Plan section. Applicants should describe:
 - the data to be collected or generated in the proposed project;
 - the standards to be used for the collected or generated data;
 - access to the data, including a description for protection of privacy, confidentiality, security, and intellectual property, or other rights;
 - a statement of the use of data standards that ensure all documentation that describes the method of collection, what the data represent, and plans for archiving and long-term preservation of the data or explaining why long-term preservation and access are not justified.

Not all of this information may be available or applicable at the time of application. □ Thus, applicants may include a DMP that is as complete as possible. □

Award recipients will receive additional training and technical assistance on developing a DMP, which must be submitted within the first 6 months of award, as described in the Reporting Section of this NOFO.

DFC grant recipients will also be responsible for submitting a semi-annual Progress Report. □ The Terms and Conditions of the grant award will specify how the data are to be submitted, and the schedule for □ Progress Report submissions.

Applicants are not required at the time of application to be in compliance with the DFC National Cross-Site Evaluation □ Requirements. However, recipients will be required to comply with the DFC National Cross-Site Evaluation Requirements once awarded a DFC grant. Prior to submitting core measures data, coalitions are required to submit any survey(s) used to collect these data for review and approval through the DFC □ Me □ (Management and Evaluation) system. □ The recipient will have two years from the time of award to report its first complete set of core measure data.

□ It will be the responsibility of the recipient to know the National Cross-Site Evaluation reporting schedule. An inability to supply the previously mentioned core measures in the specific increment (every two years) for the substances named from the grades required means a recipient is out of compliance with the Award Terms and Conditions. □ **Failure to comply with the Terms and Conditions of the DFC grant award may result in suspension or termination of the award.**

After funded, applicants may contact the current DFC Evaluation Team (dfc_evaluators@icf.com) for assistance in gathering the necessary information as it relates to the DFC National Cross-Site Evaluation.

C. Organizational Capacity of Recipients to Implement the Approach

Applicants are required to hire key personnel that will be responsible for implementing and managing the grant. These include:

- **Business Official (i.e. Authorized Organization Representative):** person authorized for overseeing the financial aspects of the grant. This is the individual who will receive the Notice of Award if funded. **The Authorized Representative or Business Official**

charged with financial oversight responsibilities for the DFC grant award must be an employee of the recipient organization.

- **Program Director (i.e. Program Director/Principal Investigator):** person designated to direct the project or program supported by the grant and accountable to officials of the recipient organization. **The PI/PD for the DFC grant award must be an employee of the recipient organization.**
- **Project Coordinator:** person who coordinates the work of the coalition and program activities, including training, coalition communication, data collection, and information dissemination. □ □ □

Staff selected to fulfill key personnel positions shall have skills in non-research program administration: program planning, program evaluation, performance monitoring, financial management and reporting, budget management and administration, personnel management, or project management. □ To demonstrate proficiency in these topic areas, applicants must submit resumes for positions currently filled (no more than 2 pages in length) and position descriptions for vacant positions (no more than 1 page in length) for key personnel outlined above. Resumes should be combined in one pdf with the title: **Attachment 10_Key Personnel Resumes**

For key personnel positions that are not filled, applicants can provide the position description, which should include:

- Title of key personnel position;
- Brief description of duties and responsibilities; and
- 1-2 sentences on how the applicant plans to fill the position, including the expected timeframe.

NOTE: Regarding financial management, applicants are required to demonstrate that they have a financial management system that will allow for proper funds management and segregation of funds by program and meet the requirements as stated in the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards found at https://www.ecfr.gov/cgi-bin/text-idx?node=pt45.1.75#se45.1.75_1302 (45 CFR 75.302). The financial system should permit the preparation of reports required by general and program-specific terms and conditions; and the tracing of funds to a level of expenditure adequate to establish that such funds have been used according to the federal statutes, regulations, and the terms and conditions of the federal award.

Applicants must demonstrate the capacity and data infrastructure to implement the DFC program as outlined in the statutory eligibility section of this NOFO. Applicants must describe their community coalition and they must demonstrate that members have worked together on substance abuse reduction initiatives for a period of not less than 6 months at the time of submission (Attachment 2_One Set of Coalition Meeting Minutes). Applicants must include the rationale for selecting the individuals who will serve on the coalition and how they meet the criteria to represent each required community sector (Attachment 1_12 Coalition Involvement Agreement). Required sectors include:

1. **Youth:** An individual 18 years of age or younger (must provide the age of youth).
2. **Parent:** An individual legally responsible for a child, grandchild, or foster child.
3. **Business:** A representative of a business-related organization.

4. **Media:** A representative of a communication outlet that provides information to the community.
5. **School:** A representative of the school system with influence in school policies and procedures.
6. **Youth-Serving Organization:** A representative of an organization that provides services to youth.
7. **Law Enforcement:** A representative of a law enforcement agency. The representative must be an active sworn law enforcement officer, not retired.
8. **Civic/Volunteer Group:** A representative of an organization that provides civic or volunteer activities that serves the community (not a coalition member). Examples include Lions Clubs, Rotary Clubs, etc.
9. **Religious/Fraternal Organization:** A representative of a faith-based organization or representative from a fraternal organization that is based on a common tie or pursuit of a common goal. The organization must have a substantial program of fraternal activities.
10. **Healthcare Professional:** An individual and/or organization licensed to provide physical, mental, or behavioral healthcare services.
11. **State/Local/Tribal Government:** A representative of a government-funded agency with a focus on substance use.
12. **Other Organization Involved in Reducing Substance Abuse:** A representative of a community organization that addresses substance abuse.

D. Work Plan

Applicants must prepare a detailed work plan for the first year of the award (**i.e., 12-Month Action Plan**) that outlines the proposed objectives, strategies, and activities during the period of performance from **September 30, 2021 – September 29, 2022**. The combination of objectives, strategies, and activities should align with the long-term outcomes of the DFC Framework. □

The work plan (aka 12-Month Action Plan) must, at a minimum, include:

- Period of performance;
- Activities that are in alignment with the proposed objectives and program strategies; and
- Objectives that are Specific, Measurable, Achievable, Realistic, and Time-bound (see Glossary section within this NOFO for further definition of each)

CDC may provide standard guidance to recipients to finalize the work plan (i.e., 12-Month Action Plan) post-award.

A work plan (i.e., 12-Month Action Plan) table should be developed for each goal of the DFC program. An example of a work plan table is provided below. If a particular activity leads to multiple goals or objectives, it should be described under each goal and/or objective.

Objectives should be Specific, Measurable, Achievable, Realistic, and Time-bound (SMART). SMART objectives indicate the type of change; how much change will occur including the specific amount of increase or decrease; the specific population to be addressed; include a specific date (Month/Year) by when the change will be accomplished; indicate how the change will be measured.

Examples of SMART objectives are provided below:

Regular Objective	SMART Objective
Reduce prescription drug misuse rates for children and adolescents.	By July 31, 2022, reduce the percent of 9th graders in Random County who have misused prescription drugs from 8% baseline to 7% as indicated in our annual youth survey.
Meet with 12 high schools to inform them about drug drop box programs.	Public Health Staff will meet with key stakeholders at all high schools in our jurisdiction resulting in 3 out of 4 high schools committing to work on educating about and implementing drug drop box programs by June 2022 as indicated in our annual school partner survey.

Table 2. 12-Month Action Plan (September 30, 2021 – September 29, 2022)

For each DFC Goal, applicants should provide one SMART objective and develop at least one specific strategy using the table below to outline what activities will support the objective, who will be responsible, and what the anticipated timeframe is (Month/Year). □

DFC Goal One: Establish and strengthen collaboration among community stakeholders and organizations to address youth substance use.

Objective 1: Provide a SMART objective

Strategy 1: Provide specific strategy

Activity	Who is Responsible?	By When?

Strategy 2: Provide specific strategy

Activity	Who is Responsible?	By When?

DFC Goal Two: Reduce substance use and misuse among youth and, over time, reduce substance use and misuse among adults by addressing the factors in a community that increases the risk of substance use and misuse and promoting the factors that minimize the risk of substance use.

Objective 2: Provide a SMART objective

Strategy 1: Provide specific strategy

Activity	Who is Responsible?	By When?

Strategy 2: Provide specific strategy

Activity	Who is Responsible?	By When?

CDC Activities

N/A

Funding Strategy

N/A

Section II. Award Information

Type of Award:

G (Grant)

CDC substantial involvement in this program appears in the Activities Section above.

Award Mechanism:

HD4

Fiscal Year Funds:

2021

Approximate Total Supplemental Funding:

\$ 12,500,000

This amount is subject to availability of funds. Includes direct and indirect costs.

Approximate Number of Awards:

100

Approximate Average Award:

\$ 62,500,000

This amount is for the budget period only and includes direct costs and indirect costs as applicable.

Floor of Individual Award Range:

\$ 0

Ceiling of Individual Award Range:

\$ 125,000

This ceiling is for a 12-month budget period.

Anticipated Award Date:

August 30, 2021

Budget Period Length:

12 month(s)

Period of Performance Length:

5 year(s)

If you are successful and receive a Notice of Award, in accepting the award, you agree that the award and any activities thereunder are subject to all provisions of 45 CFR Part 75, currently in effect or implemented during the period of the award, other Department regulations and policies in effect at the time of the award, and applicable statutory provisions.

Section III. Eligibility Information

Eligible Applicants

The following recipients may submit an application:

Eligibility Category:

12 (Nonprofits having a 501(c)(3) status with the IRS, other than institutions of higher education)

25 (Others (see text field entitled "Additional Information on Eligibility" for clarification))

99 (Unrestricted (i.e., open to any type of entity above), subject to any clarification in text field entitled "Additional Information on Eligibility")

20 (Private institutions of higher education)

11 (Native American tribal organizations (other than Federally recognized tribal governments))

07 (Native American tribal governments (Federally recognized))

06 (Public and State controlled institutions of higher education)

04 (Special district governments)

02 (City or township governments)

01 (County governments)

00 (State governments)

05 (Independent school districts)

Additional Information on Eligibility

Eligible applicants are community-based coalitions addressing youth substance use that have previously received a DFC grant but have experienced a lapse in funding or have concluded the first five-year funding cycle and are applying for a second five-year funding cycle (Year 6). **Statutory Eligibility Requirements, written into the DFC Act, are inherent in the language of the DFC Support Program.** Applicants should refer to **Table 3: Statutory Eligibility Requirements**, which contains a summary of the minimum documentation applicants **must** provide to meet these criteria. The table also specifies evidence required and where to place it in the application, e.g., as an attachment, in the Project Narrative, or in the Budget.

Failure to meet any single statutory eligibility requirement will cause the application to be deemed ineligible; in such case, it will not move forward to merit review. Should your application fail to meet the eligibility requirements, the person listed as the Business Official on the Application for Federal Assistance (SF-424) will receive a notification stating why the application was deemed ineligible. **No additional information may be added to an application after the application deadline.** The final authority lies with the DFC Administrator to determine the eligibility of an application.

All DFC applications will be jointly screened by ONDCP and CDC to determine whether an applicant meets all the DFC Support Program Statutory Eligibility Requirements identified in Table 3. Applications submitted by eligible coalitions that demonstrate they meet all requirements will then be scored through a merit review process according to the evaluation criteria described in Section V. Application Review Information of this NOFO. Each year, DFC recipients must demonstrate compliance with all of the Statutory Eligibility Requirements to be considered for continuation funding.

NOTE: Coalitions that have already received 10 years of DFC funding are not eligible to apply for this grant.

- A DFC legal applicant (an organization applying on behalf of a coalition, the coalition, or the applicant coalition) must reside within the United States and/or the U.S. territories. The intent of the DFC Support Program is to fund coalition activities in the United States and does not authorize the funding of organizations or activities outside the United States.

Table 3: Statutory Eligibility Requirements

Eligibility Requirement Item	Evidence Required and Where to Document
Requirement 1: 12 Sectors	Evidence Required
<p>The coalition must consist of one or more representatives from each of the following required 12 sectors:</p> <ol style="list-style-type: none"> 1. Youth (18 or younger) 2. Parent 3. Business 4. Media 5. School 6. Youth-serving organization 7. Law enforcement 8. Religious/Fraternal organization 	<p>A Coalition Involvement Agreement (CIA) for each of the 12 sector members. A CIA is an agreement signed by each sector representative to document the sector's involvement in the local coalition.</p> <p>Where to Document:</p> <ul style="list-style-type: none"> • Attachment 1: 12 CIAs and Sector Table. <p>For additional information, please refer to Section C. Eligibility Information and Attachment 1.</p>

<p>9. Civic/Volunteer groups (i.e., local organizations committed to volunteering, not a coalition member designated as a “volunteer”) <input type="checkbox"/></p> <p>10. Healthcare professional or organization (i.e., primary care, hospitals, etc.) <input type="checkbox"/></p> <p>11. State, local, or tribal governmental agency with expertise in the field of substance abuse (including, if applicable, the state agency with primary authority for substance abuse) <input type="checkbox"/></p> <p>12. Other organization involved in reducing substance abuse <input type="checkbox"/></p> <p>21 USC 1532(a)(2)(A) <input type="checkbox"/> An individual who is a member of the coalition may serve on the coalition as a representative of <input type="checkbox"/> not more than one sector category. <input type="checkbox"/> 21 USC 1532(a)(2)(C) <input type="checkbox"/></p>	<p>Note: Coalition members can not represent more than one sector category and paid staff (i.e., Program Director/Principal Investigator (PD/PI) and Project Coordinator) <input type="checkbox"/> cannot <input type="checkbox"/> serve as sector representatives. <input type="checkbox"/> Doing so will deem an application ineligible and the application <input type="checkbox"/> will not <input type="checkbox"/> proceed to peer review. <input type="checkbox"/> Be sure to provide a rationale for selecting the individual to represent each sector <input type="checkbox"/> on the Coalition Involvement Agreement.</p>
<p>Requirement 2: Six Month Existence</p>	<p>Evidence Required</p>
<p>The coalition <input type="checkbox"/> must <input type="checkbox"/> demonstrate that members have worked together on substance abuse reduction initiatives for a period of not less than 6 months at the time of submission of the application, acting through entities such as task forces, subcommittees, or community boards. <input type="checkbox"/> (21 USC 1532(a)(3)(A); P.L. 105-20) <input type="checkbox"/> §1032 (a)(3)(A) The coalition <input type="checkbox"/> must <input type="checkbox"/> also demonstrate substantial participation from volunteer leaders <input type="checkbox"/> in the community. <input type="checkbox"/> (21 USC 1532(a)(3)(B); P.L. 105-20 §1032 (a)(3)(B))</p>	<p>One set of coalition meeting minutes, proving coalition existence for at least 6 months.</p> <p>Where to Document: <input type="checkbox"/></p> <ul style="list-style-type: none"> • Attachment <input type="checkbox"/> 2: <input type="checkbox"/> Coalition minutes from one meeting that took place between January <input type="checkbox"/> 2020 <input type="checkbox"/> and the deadline for submission of this application. <input type="checkbox"/> • Attachment <input type="checkbox"/> 8: <input type="checkbox"/> General Applicant Information. <input type="checkbox"/> <p>For additional information, please refer to Attachment <input type="checkbox"/> 2 and Attachment 8.</p>
<p>Requirement 3: Mission Statement</p>	<p>Evidence Required</p>
<p>The coalition <input type="checkbox"/> must <input type="checkbox"/> have as its principal mission the reduction of youth substance use, which, at a minimum, includes the use and abuse of drugs in a comprehensive and long-term manner, with a primary focus on youth in the community. <input type="checkbox"/> The mission must be clearly defined in the project narrative. <input type="checkbox"/> (21 USC 1532(a)(4)(A); P.L. 105-20 §1032 (a)(4)(A))</p>	<p>A Coalition Mission Statement.</p> <p>Where to Document: <input type="checkbox"/></p> <ul style="list-style-type: none"> • Project Narrative (not to exceed 15 pages), Background.

	<ul style="list-style-type: none"> • Attachment 8: General Applicant Information-Mission Statement and Multiple Drugs of Misuse. <p>For additional information, please refer to the Project Narrative Section in this NOFO and Attachment 8.</p>
<p>Requirement 4: Multiple Drugs of Misuse</p>	<p>Evidence Required</p>
<p>The coalition must have developed a 12-Month Action Plan to reduce substance use among youth which targets multiple drugs of misuse.</p> <p>Substances may include but are not limited to, narcotics, depressants, stimulants, hallucinogens, inhalants, marijuana, alcohol, and tobacco, where youth use is prohibited by federal, state, or local law. (21 USC 1532(a)(4)(D); P.L. 105-20 §1032(a)(4)(D))</p>	<p>12-Month Action Plan that identifies at least of misuse to be addressed by the coalition.</p> <p>Where to Document:</p> <ul style="list-style-type: none"> • Attachment 8: General Applicant Information - Mission Statement and Multiple Drugs of Misuse. • Project Narrative (not to exceed 15 pages), Approach, Workplan.
<p>Requirement 5: Evaluation and Performance Measurement Plan</p>	<p>Evidence Required</p>
<p>The coalition must establish a system to measure and report outcomes, established and approved by the DFC Administrator, to the federal government. 21 USC 1532(a)(6)(A)</p> <p>Applicants are not required at the time of application to be in compliance with the DFC National Cross-Site Evaluation Requirements.</p> <p>If awarded a grant, the coalition will have two years from the time of award to report its first complete set of core measure data.</p>	<p>Applicants must provide an evaluation and performance measurement plan that demonstrates how the recipient will fulfill the requirements described in the CDC Evaluation and Performance Measurement and Project Description sections of this NOFO.</p> <p>Where to Document:</p> <ul style="list-style-type: none"> • Attachment 3: DFC Program Evaluation Requirements. • Project Narrative (not to exceed 15 pages), Evaluation, and Performance Measurement.

	<p>For additional information, please refer to the Evaluation and Performance Measurement subsection in the Review and Selection Process Section of this NOFO and Attachment 3.</p> <p>Applicants must describe a system to measure and report outcomes.</p>
<p>Requirement 6: Entity Eligible to Receive Federal Grants</p>	<p>Evidence Required</p>
<p>The applicant must demonstrate that the coalition is an ongoing concern by demonstrating that the coalition is a non-profit organization or has made arrangements with a legal entity that is eligible to receive federal grants. (21 USC 1532(a)(5)(A); P.L. 105-20 §1032 (a)(5)(A))</p> <p>Organizations eligible to receive federal funds as DFC grant recipients must be legally recognized domestic public or private nonprofit entities. For example, state and local governments, federally recognized tribes, state-recognized tribes, urban Indian organizations (as defined in P.L. 94-437, as amended), public or private universities and colleges, professional associations, voluntary organizations, self-help groups, consumer and provider services-oriented constituency groups, community- and faith-based organizations, and tribal organizations.</p>	<p>Statement of Legal Eligibility.</p> <p>Where to Document:</p> <ul style="list-style-type: none"> • Attachment 4: Signed Assurance of Legal Eligibility or Memorandum of Understanding (MOU) between the applicant coalition and legal applicant/grant award recipient. • Proof of 501(c)(3) Status if applicable. <p>For additional information, please refer to Section C. Eligibility Information and Attachment 4.</p>
<p>Requirement 7: Substantial Support from Non-Federal Sources</p>	<p>Evidence Required</p>
<p>The coalition must have a strategy to solicit substantial financial support from non-federal sources to ensure that the coalition is self-sustaining. (21 USC 1532(a)(5)(B)(C); P.L. §1032 (a)(5)(B)(C))</p>	<p>Budget narrative which describes matching funds.</p> <p>Where to Document:</p> <ul style="list-style-type: none"> • SF-424, SF-424A • Budget Narrative <p>For additional information, please refer to the Budget Narrative and Cost Sharing or Matching Sections of this NOFO.</p>
<p>Requirement 8: Federal Request</p>	<p>Evidence Required</p>

<p>The applicant must not request more than \$125,000 in federal funds per year. (21 USC 1532 (b)(1)(A)(iv); P.L. 109-469 §803)</p>	<p>The budget may not exceed \$125,000/year.</p> <p>Where to Document:</p> <ul style="list-style-type: none"> SF-424A Budget Narrative <p>For additional information, please refer to Part I. Overview, Section B. Award Information, and the Budget Narrative Section of this NOFO.</p>
<p>Requirement 9: Zip Code Overlap</p> <p>Two DFC-funded coalitions may not serve the same zip code(s) unless both coalitions have clearly described their plan for collaboration in their application and each coalition has independently met the eligibility requirements. (21 USC 1532(b)(2)(C)(ii); §1032(b)(2)(C)(ii))</p>	<p>Evidence Required</p> <p>An applicant that proposes to serve a geographical area that overlaps with a community served by other applicant coalitions or existing DFC coalitions must provide a Letter of Mutual Cooperation between these coalitions acknowledging the geographical overlap and their efforts to collaborate.</p> <p>Where to Document:</p> <ul style="list-style-type: none"> Attachment 5: Letter(s) of Mutual Cooperation, signed by both coalitions, or a statement that there is no overlap between the applicant and other coalitions. Attachment 8: General Applicant Information. <p>For additional information, please refer to Target Populations Section of this NOFO and Attachment 5.</p>
<p>Requirement 10: One grant at a time</p> <p>Grant recipients may be awarded only one grant at a time through the DFC Support Program.</p>	<p>Evidence Required</p> <p>Applicants must sign and submit the Assurance of One DFC Grant at a Time.</p> <p>Where to Document:</p>

	<ul style="list-style-type: none"> • Attachment 6: Assurance of One DFC Grant at a Time. <p>For additional information, please refer to Attachment 6.</p>
Requirement 11: No more than 10 years of DFC funding	Evidence Required
In order to receive a DFC grant, coalitions may not have received 10 years of DFC funding. Coalitions that received funding for the first grant period (5 years) are eligible to apply for an additional 5 years of funding.	<p>Applicants must sign the Assurance of DFC 10-Year Funding Limit.</p> <p>Where to Document:</p> <ul style="list-style-type: none"> • Attachment 7: Assurance of DFC 10-Year Funding Limit. <p>For additional information, please refer to Attachment 7.</p>

Required Registrations

System for Award Management and Universal Identifier Requirements

An organization must be registered at the three following locations before it can submit an application for funding at www.grants.gov.

a. Data Universal Numbering System: All applicant organizations must obtain a Data Universal Numbering System (DUNS) number. A DUNS number is a unique nine-digit identification number provided by Dun & Bradstreet (D&B). It will be used as the Universal Identifier when applying for federal awards or cooperative agreements. The applicant organization may request a DUNS number by telephone at 1-866-705-5711 (toll free) or Internet at <http://fedgov.dnb.com/webform/displayHomePage.do>. The DUNS number will be provided at no charge. If funds are awarded to an applicant organization that includes sub-recipients, those sub-recipients must provide their DUNS numbers before accepting any funds.

b. System for Award Management (SAM): The SAM is the primary registrant database for the federal government and the repository into which an entity must submit information required to conduct business as a recipient. All applicant organizations must register with SAM, and will be assigned a SAM number. All information relevant to the SAM number must be current at all times during which the applicant has an application under consideration for funding by CDC. If an award is made, the SAM information must be maintained until a final financial report is submitted or the final payment is received, whichever is later. The SAM registration process usually requires not more than five business days, and registration must be renewed annually. Additional information about registration procedures may be found at <https://www.sam.gov/SAM/>.

c. Grants.gov: The first step in submitting an application online is registering your organization through www.grants.gov, the official HHS E-grant website. Registration information is located at the "Applicant Registration" option at www.grants.gov. All applicant organizations must register with www.grants.gov. The one-time registration process usually takes not more than five days to complete. Applicants must start the registration process as early as possible.

Cost Sharing or Matching

Cost Sharing / Matching Requirement:

Yes

The DFC authorizing legislation requires recipients to demonstrate that they have non-federal matching funds (“match”) from non-federal sources equivalent to or greater than federal funds requested from the DFC Support Program. Applicants must itemize the match separately in the budget and explain the match separately in the Budget Narrative. CDC budget preparation guidelines can be found at <https://www.cdc.gov/grants/documents/Budget-Preparation-Guidance.pdf>.

Applicants in Year Six of the DFC funding are required to have 100 percent match (1:1) from non-federal sources. □ Beginning in Year Seven, the percentage increases. □ The table below indicates the percentage of match required for DFC grant recipients in each year of the grant.

Table 4: Percentage of Match

Year of Funding Request	Matching Requirement
1-6	100%
7 - 8	125%
9 - 10	150%

Cash or in-kind support may be used for the match requirement. □ In-kind support includes the value of goods and services donated to the operation of the DFC coalition, including but not limited to office space, volunteer secretarial services, pro bono accounting services, and other volunteer services to support the coalition’s work. □ All match must follow federal cost principles (see Administrative and National Policy Requirements Section within the NOFO). □ Applicants cannot submit match that would not be an allowable expense of DFC funds. If an applicant has sufficient match to allow a budget request of the full \$125,000, the applicant should round up the final budget figures to equal \$125,000. A match level over the required amount will not result in a higher merit review score. All proposed match is an obligation on the part of the applicant.

Federal funds, including those passed through a state or local government, cannot be used toward the required match. The only exception in the DFC Support Program is in the case of a coalition that includes a representative of the Bureau of Indian Affairs, the Indian Health Service, or a tribal government agency with expertise in the field of substance use and misuse and serving a tribal community.

NOTE: □ As per both HHS/CDC and ONDCP guidelines, and applicable Anti-Lobbying

provisions, impermissible lobbying with federal dollars is not permitted. Additionally, such costs for impermissible lobbying cannot be used as match.

Other

If a funding amount greater than the ceiling of the award range is requested, the application will be considered non-responsive and will not be entered into the review process. The recipient will be notified that the application did not meet the eligibility requirements.

Special Requirements

Coalitions that have already received 10 years of DFC funding are not eligible to apply for this grant. In addition, coalitions that have received 10 years of DFC funding are not allowed to form a new coalition under a different coalition name, but still using the same staff and/or sector representatives to apply for new DFC funding.

Note: Title 2 of the United States Code Section 1611 states that an organization described in Section 501(c)(4) of the Internal Revenue Code that engages in lobbying activities is not eligible to receive Federal funds constituting a grant, loan, or an award.

Maintenance of Effort

Maintenance of effort is not required for this program.

Section IV. Application and Submission Information

Address to Request Application Package

Applicants must download the application package associated with this funding opportunity from Grants.gov.

If the applicant encounters technical difficulties with Grants.gov, the applicant should contact Grants.gov Customer Service. The Grants.gov Contact Center is available 24 hours a day, 7 days a week, with the exception of all Federal Holidays. The Contact Center provides customer service to the applicant community. The extended hours will provide applicants support around the clock, ensuring the best possible customer service is received any time it is needed. You can reach the Grants.gov Support Center at 1-800-518-4726 or by email at support@grants.gov. Submissions sent by email, fax, CD's or thumb drives of applications will not be accepted.

Content and Form of Application Submission

Unless specifically indicated, this announcement requires submission of the following information:

Provide a detailed table of contents for the entire submission package that includes all of the documents in the application and headings in the "Project Narrative" section. Name the file "Table of Contents" and upload it as a PDF file under "Other Attachment Forms" at www.grants.gov.

Project Abstract

A **Project Abstract** must be completed in the Grants.gov application forms. The Project Abstract must contain a summary of the proposed activity suitable for dissemination to the public. It should be a self-contained description of the project and should contain a statement of

objectives and methods to be employed. It should be informative to other persons working in the same or related fields and insofar as possible understandable to a technically literate lay reader. This abstract must not include any proprietary/confidential information.

Project Narrative

A Project Narrative must be submitted with the application forms. The project narrative must be uploaded in a PDF file format when submitting via Grants.gov. The narrative must be submitted in the following format:

- 15: Maximum number of pages
- Font size: 12 point unreduced, Times New Roman
- Single spaced
- Page margin size: One inch
- Number of all narrative pages; not to exceed the maximum number of pages.

Applicants should use the federal plain language guidelines and Clear Communication Index to respond to this Notice of Funding Opportunity (NOFO). Note that recipients should also use these tools when creating public communication materials supported by this NOFO. Failure to follow the guidance and format may negatively impact scoring of the application.

The narrative should address activities to be conducted over the entire Period of Performance and must include the following items in the order listed.

The Project Narrative must include all of the following headings (including subheadings): Background and Approach, Applicant Evaluation and Performance Measurement Plan, Organizational Capacity of Applicants to Implement the Approach, and Work Plan. The Project Narrative must be succinct, self-explanatory, and in the order outlined in this section. It must address outcomes and activities to be conducted over the entire period of performance as identified in the Funding Opportunity Description section.

A. Background and Approach

Background: Applicants must provide a description of relevant background information that includes the context of the problem.

Purpose: Specifically describe in 2-3 sentences how the applicant will address the public health problem.

Outcomes: Clearly identify the outcomes they expect to achieve by the end of the project period. Objectives should be measurable, achievable, realistic, and time-bound (SMART).

Strategies and Activities: Provide a clear and concise description of the strategies and activities the applicant will use to achieve the period of performance outcomes. Applicant must select existing evidence-based strategies that meet their needs and how they will be evaluated over the course of the project period.

Collaborations: Describe how the applicant will collaborate with programs and organizations that are either internal or external to CDC.

Health Disparities: Describe the specific target population(s) in their jurisdiction and explain how such a target will achieve the goals of the award and/or alleviate health disparities.

Applicants must also address how they will include specific populations that can benefit from the program.

B. Applicant Evaluation and Performance Measurement Plan

Applicants must provide an evaluation and performance measurement plan that describes:

- How the applicant will collect the performance measures, respond to the evaluation questions, and use evaluation findings for continuous program quality improvement. The Paperwork Reduction Act of 1995 (PRA): Applicants are advised that any activities involving information collections (e.g., surveys, questionnaires, applications, audits, data requests, reporting, recordkeeping and disclosure requirements) from 10 or more individuals or non-Federal entities, including State and local governmental agencies, and funded or sponsored by the Federal Government are subject to review and approval by the Office of Management and Budget. For further information about CDC's requirements under PRA [https://www.cdc.gov/os/integrity/reducepublicburden/index.htm#:~:text=The%20Paperwork%20Reduction%20Act%20\(PRA,collecting%20information%20from%20the%20public.](https://www.cdc.gov/os/integrity/reducepublicburden/index.htm#:~:text=The%20Paperwork%20Reduction%20Act%20(PRA,collecting%20information%20from%20the%20public.)
- How key program partners will participate in the evaluation and performance measurement planning processes.
- Available data sources, feasibility of collecting appropriate evaluation and performance data, and other relevant data information (e.g., performance measures proposed by the applicant)
- Plans for updating the Data Management Plan (DMP) as new pertinent information becomes available. If applicable, throughout the lifecycle of the project. Updates to DMP should be provided in annual progress reports. The DMP should provide a description of the data that will be produced using these NOFO funds; access to data; data standards ensuring released data have documentation describing methods of collection, what the data represent, and data limitations; and archival and long-term data preservation plans. For more information about CDC's policy on the DMP, see <https://www.cdc.gov/grants/additionalrequirements/ar-25.html>.
Where the applicant chooses to, or is expected to, take on specific evaluation studies, the applicant should be directed to:
 1. Describe the type of evaluations (i.e., process, outcome, or both).
 2. Describe key evaluation questions to be addressed by these evaluations.
 3. Describe other information (e.g., measures, data sources).

Applicants may contact the current DFC Evaluation Team (dfc_evaluators@icf.com) for assistance in gathering the necessary information as it relates to the DFC National Cross-Site Evaluation.

C. Organizational Capacity of Applicants to Implement the Approach: Applicants must address the organizational capacity requirements as described in the Funding Opportunity Description.

D. Work Plan

Prepare a work plan that integrates and delineates more specifically how the applicant plans to carry out achieving the period of performance outcomes, strategies and activities, evaluation and performance measurement.

Additional information may be included in the application appendices. The appendices must be uploaded to the "Other Attachments Form" of application package in Grants.gov. Note: appendices will not be counted toward the narrative page limit. This additional information includes:

Budget Narrative

Applicants must submit an itemized budget narrative. When developing the budget narrative, applicants must consider whether the proposed budget is reasonable and consistent with the purpose, outcomes, and program strategy outlined in the project narrative. The budget must include:

- Salaries and wages
- Fringe benefits
- Consultant costs
- Equipment
- Supplies
- Travel
- Other categories
- Contractual costs
- Total Direct costs
- Total Indirect costs

The budget can include both direct costs and indirect costs as allowed. Indirect costs could include the cost of collecting, managing, sharing and preserving data.

Indirect costs on grants awarded to foreign organizations and foreign public entities and performed fully outside of the territorial limits of the U.S. may be paid to support the costs of compliance with federal requirements at a fixed rate of eight percent of modified total direct costs exclusive of tuition and related fees, direct expenditures for equipment, and subawards in excess of \$25,000. Negotiated indirect costs may be paid to the American University, Beirut, and the World Health Organization.

If requesting indirect costs in the budget, a copy of the indirect cost rate agreement is required. Include a copy of the current negotiated federal indirect cost rate agreement or cost allocation plan approval letter.

The applicant can obtain guidance for completing a detailed justified budget on the CDC website, at the following Internet address: <https://www.cdc.gov/grants/documents/budget-preparation-guidance.pdf>

The amount requested in this original application for the four future years establishes the maximum amount that an applicant can receive in future years if awarded the grant.

CDC Assurances and Certifications: All applicants are required to sign and submit "Assurances and Certifications" documents indicated at <http://www.cdc.gov/grantassurances/>

[\(S\(mj444mxct51lnrv1hljjjmaa\)\)/Homepage.aspx](#).

Applicants may follow either of the following processes:

- Complete the applicable assurances and certifications with each application submission, name the file “Assurances and Certifications” and upload it as a PDF file with at www.grants.gov
- Complete the applicable assurances and certifications and submit them directly to CDC on an annual basis at [http://wwwn.cdc.gov/grantassurances/\(S\(mj444mxct51lnrv1hljjjmaa\)\)/Homepage.aspx](http://wwwn.cdc.gov/grantassurances/(S(mj444mxct51lnrv1hljjjmaa))/Homepage.aspx)

Risk Assessment Questionnaire Requirement

CDC is required to conduct pre-award risk assessments to determine the risk an applicant poses to meeting federal programmatic and administrative requirements by taking into account issues such as financial instability, insufficient management systems, non-compliance with award conditions, the charging of unallowable costs, and inexperience. The risk assessment will include an evaluation of the applicant’s CDC Risk Questionnaire, located at <https://www.cdc.gov/grants/documents/PPMR-G-CDC-Risk-Questionnaire.pdf>, as well as a review of the applicant’s history in all available systems; including OMB-designated repositories of government-wide eligibility and financial integrity systems (see 45 CFR 75.205(a)), and other sources of historical information. These systems include, but are not limited to: FAPIIS (<https://www.fapiis.gov/>), including past performance on federal contracts as per Duncan Hunter National Defense Authorization Act of 2009; Do Not Pay list; and System for Award Management (SAM) exclusions.

CDC requires all applicants to complete the Risk Questionnaire, OMB Control Number 0920-1132 annually. This questionnaire, which is located at <https://www.cdc.gov/grants/documents/PPMR-G-CDC-Risk-Questionnaire.pdf>, along with supporting documentation must be submitted with your application by the closing date of the Notice of Funding Opportunity Announcement. If your organization has completed CDC’s Risk Questionnaire within the past 12 months of the closing date of this NOFO, then you must submit a copy of that questionnaire, or submit a letter signed by the authorized organization representative to include the original submission date, organization’s EIN and DUNS. When uploading supporting documentation for the Risk Questionnaire into this application package, clearly label the documents for easy identification of the type of documentation. For example, a copy of the Procurement policy submitted in response to the questionnaire may be labeled using the following format: Risk Questionnaire Supporting Documents _ Procurement Policy.

Duplication of Efforts

Applicants are responsible for reporting if this application will result in programmatic, budgetary, or commitment overlap with another application or award (i.e. grant, cooperative agreement, or contract) submitted to another funding source in the same fiscal year. Programmatic overlap occurs when (1) substantially the same project is proposed in more than one application or is submitted to two or more funding sources for review and funding consideration or (2) a specific objective and the project design for accomplishing the objective are the same or closely related in two or more applications or awards, regardless of the funding source. Budgetary overlap occurs when duplicate or equivalent budgetary items (e.g.,

equipment, salaries) are requested in an application but already are provided by another source. Commitment overlap occurs when an individual's time commitment exceeds 100 percent, whether or not salary support is requested in the application. Overlap, whether programmatic, budgetary, or commitment of an individual's effort greater than 100 percent, is not permitted. Any overlap will be resolved by the CDC with the applicant and the PD/PI prior to award.

Report Submission: The applicant must upload the report in Grants.gov under "Other Attachment Forms." The document should be labeled: "Report on Programmatic, Budgetary, and Commitment Overlap."

Additional information submitted via Grants.gov must be uploaded in a PDF file format, and should be named:

_____ : Maximum number of allowable electronic attachments

Submission Dates and Times

This announcement is the definitive guide on application content, submission, and deadline. It supersedes information provided in the application instructions. If the application submission does not meet the deadline published herein, it will not be eligible for review and the recipient will be notified the application did not meet the submission requirements.

This section provides applicants with submission dates and times. Applications that are submitted after the deadlines will not be processed.

If Grants.gov is inoperable and cannot receive applications, and circumstances preclude advance notification of an extension, then applications must be submitted by the first business day on which grants.gov operations resume.

Application Deadline Date

Due Date for Applications 05/26/2021

05/26/2021

Explanation of Deadlines: Application must be successfully submitted to Grants.gov by 11:59 pm Eastern Standard Time on the deadline date.

All applicants are strongly encouraged to attend the Drug-Free Communities (DFC) Support Program - Competing Continuation Applicant Workshop Webinar on April 12, 2021, from 2:30pm - 4:00pm EDT. Please register in advance using the following link: <https://twworldwide.com/events/ondcp/2021/DFC/210412/>

Pilot Program for Enhancement of Employee Whistleblower Protections

All applicants will be subject to a term and condition that applies the terms of 48 CFR section 3.908 to the award and requires that recipients inform their employees in writing (in the predominant native language of the workforce) of employee whistleblower rights and protections under 41 U.S.C 4712.

Copyright Interest Provisions

This provision is intended to ensure that the public has access to the results and accomplishments of public health activities funded by CDC. Pursuant to applicable grant regulations and CDC's Public Access Policy, Recipient agrees to submit into the National Institutes of Health (NIH)

Manuscript Submission (NIHMS) system an electronic version of the final, peer-reviewed manuscript of any such work developed under this award upon acceptance for publication, to be made publicly available no later than 12 months after the official date of publication. Also at the time of submission, Recipient and/or the Recipient's submitting author must specify the date the final manuscript will be publicly accessible through PubMed Central (PMC). Recipient and/or Recipient's submitting author must also post the manuscript through PMC within twelve (12) months of the publisher's official date of final publication; however the author is strongly encouraged to make the subject manuscript available as soon as possible. The recipient must obtain prior approval from the CDC for any exception to this provision.

The author's final, peer-reviewed manuscript is defined as the final version accepted for journal publication, and includes all modifications from the publishing peer review process, and all graphics and supplemental material associated with the article. Recipient and its submitting authors working under this award are responsible for ensuring that any publishing or copyright agreements concerning submitted articles reserve adequate right to fully comply with this provision and the license reserved by CDC. The manuscript will be hosted in both PMC and the CDC Stacks institutional repository system. In progress reports for this award, recipient must identify publications subject to the CDC Public Access Policy by using the applicable NIHMS identification number for up to three (3) months after the publication date and the PubMed Central identification number (PMCID) thereafter.

Federal Funding Accountability and Transparency Act of 2006 (FFATA), P.L. 109–282, as amended by section 6202 of P.L. 110–252 requires full disclosure of all entities and organizations receiving Federal funds including awards, contracts, loans, other assistance, and payments through a single publicly accessible Web site, www.USASpending.gov.

Compliance with this law is primarily the responsibility of the Federal agency. However, two elements of the law require information to be collected and reported by applicants: 1) information on executive compensation when not already reported through the SAM, and 2) similar information on all sub-awards/subcontracts/consortiums over \$25,000.

For the full text of the requirements under the FFATA and HHS guidelines, go to:

- <https://www.gpo.gov/fdsys/pkg/PLAW-109publ282/pdf/PLAW-109publ282.pdf>,
- https://www.fsrs.gov/documents/ffata_legislation_110_252.pdf
- <http://www.hhs.gov/grants/grants/grants-policies-regulations/index.html#FFATA>.

Funding Restrictions

Funding Restrictions:

Restrictions, which must be taken into account while writing the budget, are as follows:

- Recipients may not use funds for research.
- Recipients may not use funds for clinical care.
- Recipients may only expend funds for reasonable program purposes, including personnel, travel, supplies, and services, such as contractual.

- Recipients may not generally use HHS/CDC/ATSDR funding for the purchase of furniture or equipment. Any such proposed spending must be identified in the budget.
- The direct and primary recipient in a cooperative agreement program must perform a substantial role in carrying out project objectives and not merely serve as a conduit for an award to another party or provider who is ineligible.

Other than for normal and recognized executive-legislative relationships, no funds may be used for: publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body.

See [Additional Requirement \(AR\) 12](#) for detailed guidance on this prohibition and [additional guidance on lobbying for CDC recipients](#).

Additional Funding Restrictions:

- DFC grant funds **may not** be used to supplant current funding of existing activities. “Supplant” is defined as replacing funding of a grant recipient’s existing program with funds from a federal grant.
- No more than **10 percent** of the total federal grant award may be used for data collection and evaluation purposes unless approved by the Project Officer and Grants Management Specialist.
- DFC grant funds **may not** be passed through by contract or any other method to another entity to conduct the programmatic work on the DFC Program. The funded grant recipient and coalition are expected to perform the substantive role and manage the efforts carried out by this grant.
- DFC grant funds **may not** be used to provide funding to community organizations through mini-grants, including one coalition funding another coalition.
- DFC grant funds **may not** be used for stipends, as defined in the HHS Grants Policy Statement (GPS).
- The Authorized Representative or Business Official charged with financial oversight responsibilities for the DFC grant award **must** be an employee of the recipient organization and identified in the ‘Salaries and Wages’ budget category. **NOTE: The Program Director/Principal Investigator (PD/PI) and Business Official cannot be the same individual.**
- The Program Director/Principal Investigator (PD/PI) **must** be an employee of the recipient organization, overseeing the day to day operations of the grant, and **must** be identified in the ‘Salaries and Wages’ budget category as either federal or non-federal.

DFC Support Program grant funds may not be used to fund the following (not a fully exhaustive list):

- Youth Sports Programs
- Purchase of naloxone/Narcan
- Treatment services/programs/facilities

- Construction
- Landscaping/neighborhood revitalization projects, including lighting or community gardening efforts
- Law enforcement equipment, drug courts, drug search detection canines, or related training

Special considerations:

- Food is **generally unallowable**. Exceptions within the DFC Support Program may include food used as a small incentive (not to exceed \$3.00 per person) to encourage participation in a community-wide event. Food costs are not allowable for general coalition or subcommittee meetings.
- The costs of promotional items are **generally unallowable**. However, the exception would be for program outreach, and other specific purposes necessary to meet the requirements, goals, and objectives of the federal grant award.

The recipient can obtain guidance for completing a detailed justified budget on the CDC website, at the following Internet

address: <http://www.cdc.gov/grants/interestedinapplying/applicationprocess.html>

Other Submission Requirements

Application Submission

Submit the application electronically by using the forms and instructions posted for this funding opportunity on www.Grants.gov.

Note: Application submission is not concluded until successful completion of the validation process. After submission of your application package, recipients will receive a "submission receipt" email generated by Grants.gov. Grants.gov will then generate a second e-mail message to recipients which will either validate or reject their submitted application package. This validation process may take as long as two (2) business days. Recipients are strongly encouraged check the status of their application to ensure submission of their application package is complete and no submission errors exists. To guarantee that you comply with the application deadline published in the Notice of Funding Opportunity, recipients are also strongly encouraged to allocate additional days prior to the published deadline to file their application. Non-validated applications will not be accepted after the published application deadline date.

In the event that you do not receive a "validation" email within two (2) business days of application submission, please contact Grants.gov. Refer to the email message generated at the time of application submission for instructions on how to track your application or the Application User Guide, Version 3.0 page 57.

Electronic Submission of Application:

Applications must be submitted electronically by using the forms and instructions posted for this notice of funding opportunity at www.grants.gov. Applicants can complete the application package using Workspace, which allows forms to be filled out online or offline. All application

attachments must be submitted using a PDF file format. Instructions and training for using Workspace can be found at www.grants.gov under the "Workspace Overview" option.

Applications submitted through www.Grants.gov, are electronically time/date stamped and assigned a tracking number. The Authorized Organizational Representative (AOR) will receive an e-mail notice of receipt when HHS/CDC receives the application. The tracking number serves to document submission and initiate the electronic validation process before the application is made available to CDC for processing.

If the recipient encounters technical difficulties with Grants.gov, the recipient should contact Grants.gov Customer Service. The Grants.gov Contact Center is available 24 hours a day, 7 days a week. The Contact Center provides customer service to the recipient community. The extended hours will provide recipients support around the clock, ensuring the best possible customer service is received any time it's needed. You can reach the Grants.gov Support Center at 1-800-518-4726 or by email at support@grants.gov. Submissions sent by e-mail, fax, CD's or thumb drives of applications will not be accepted.

After consulting with the Grants.gov Support Center, if the technical difficulties remain unresolved and electronic submission is not possible to meet the established deadline, organizations may submit a request prior to the application deadline by email to the Grants Management Specialist/Officer for permission to submit a paper application. An organization's request for permission must: (a) include the Grants.gov case number assigned to the inquiry, (b) describe the difficulties that prevent electronic submission and the efforts taken with the Grants.gov Support Center (c) be submitted to the Grants Management Specialist/Officer at least 3 calendar days prior to the application deadline. Paper applications submitted without prior approval will not be considered.

Section V. Application Review Information

Eligible recipients are required to provide measures of effectiveness that will demonstrate the accomplishment of the various identified objectives of the CDC-RFA-CE20-2004CC21 Measures of effectiveness must relate to the performance goals stated in the "Purpose" section of this announcement. Measures of effectiveness must be objective, quantitative and measure the intended outcome of the proposed program. The measures of effectiveness must be included in the application and will be an element of the evaluation of the submitted application.

Criteria

Eligible recipients will be evaluated against the following criteria:

i. Approach

Maximum Points: 55

Background and Approach (30 points):

The extent to which the applicant:

1. Briefly describes the specific purpose, history, and mission of the coalition in addressing youth substance use, the challenges and successes it has experienced in becoming a viable coalition, and its impact on youth substance use in the community it serves. Applicants new to DFC may indicate their intended impact.
2. Explains the rationale for selecting the two substances the coalition will address, including:

- a. How these substances have contributed to problems among youth in the community (e.g., school dropout rates, school suspensions, juvenile court data, emergency room data, or other applicable data);
 - b. The nature and scope of the problem these substances introduce within the community context (i.e., how they contribute to morbidity and mortality, youth rates of use within the community, and availability and access to the substances within the community).
3. Outlines how the coalition will recruit, retain, and integrate a broad range of sectors to achieve its goals, including a description of how the coalition will recruit and retain youth and will ensure that youth membership is representative of the community the coalition serves; describes how the coalition will collaborate with community organizations, leaders, or programs internal or external to CDC.
 4. Documents how the coalition’s efforts will address health disparities.

Workplan (i.e., 12-Months Action Plan) (25 points):

The extent to which the applicant:

1. Develops a detailed 12-Month Action Plan based on the template provided in the Workplan section addressing youth substance use and misuse in the community.
2. Outlines the specific objectives, strategies, and activities the coalition will use to achieve their outcomes to reduce substance use, as well as impact community norms and attitudes related to substance use. Strategies and activities must be specific to the substances and each substance must have a separate specific, measurable, achievable, realistic, and time-bound (SMART) Objective.
3. Addresses at least two named substances (e.g., alcohol, tobacco, marijuana, and/or prescription drugs). The strategies and activities must be specific to the substances the coalition will be addressing.
4. Utilizes existing frameworks, such as the SPF and Seven Strategies for Community-Level Change outlined in the Strategies and Activities Section, especially to foster community-level change by including a combination of DFC goals, as well as objectives, strategies, and activities.

This is included in the 15-page limit of the Project Narrative. This section has a maximum of 55 out of 100 points.

Budget

Maximum Points: 0

Reviewed, but not scored. Although the budget is not scored recipients should consider the following in development of their budget. Is the itemized budget for conducting the project, and justification reasonable and consistent with stated objectives and planned program activities?

If the recipients requests indirect costs in the budget, a copy of the indirect cost rate agreement is required. If the indirect cost rate is a provisional rate, the agreement should be less than 12 months of age. The indirect cost rate agreement should be uploaded as a PDF file with “Other Attachment Forms” when submitting via Grants.gov.

ii. Evaluation and Performance Measurement

Maximum Points: 25

The extent to which the applicant:

1. Describes how the coalition will monitor and evaluate the effectiveness of the 12-month Action Plan, including plans to collect and analyze data needed to measure the effectiveness of the Plan.
2. Describes how the coalition will participate in the DFC National Cross-Site Evaluation and collect data every two years on the following core measures for alcohol, tobacco, marijuana, and prescription drugs:
 - Past 30-day use.
 - Perception of risk/harm of use.
 - Perception of parental disapproval of the use.
 - Perception of peer disapproval of the use.
3. Describes how the coalition will ensure all segments of the community will receive the evaluation information/results.

This is included in the 15-page limit of the Project Narrative. This section has a maximum of 25 out of 100 points.

iii. Applicant's Organizational Capacity to Implement the Approach

Maximum Points: 20

The extent to which the applicant demonstrates:

1. Provides an overview of the make-up of the coalition, including how the multiple sectors have been involved in achieving the coalition's goals.
2. Demonstrates the coalition's adequate capacity and data infrastructure to implement the project and achieve the project outcomes.
3. Provides evidence of appropriate staff member experiences and resumes (e.g. key coalition sector representatives are encouraged to submit their resumes).
4. Describes clearly defined roles for the staff member.

This is included in the 15-page limit of the Project Narrative. This section has a maximum of 20 out of 100 points.

Measures of Effectiveness Special Note:

Maximum Points: 0

The measures of effectiveness requirement outlined in **Section V. Application Review Information** - do not apply to the DFC program. Please carefully review the information outlined in **Section V. Application Review Information/ 1. Criteria** for the evaluation criteria.

Review and Selection Process

Review

Eligible applications will be jointly reviewed for responsiveness by NATIONAL CENTER FOR INJURY PREVENTION AND CONTROL and Office of Grants Services (OGS). Incomplete applications and applications that are non-responsive will not advance through the review process. Recipients will be notified in writing of the results.

An objective review panel will evaluate complete and responsive applications according to the criteria listed in Section V. Application Review Information, subsection entitled "Criteria".

Applications will be reviewed as follows:

Phase I Review

Part 1: All applications will be initially reviewed by the CDC Office of Grants Services to determine that the entity is eligible based on the criteria stated in the NOFO. Non-responsive applications will not advance to Phase I Part 2 review. Applicants will be notified that their applications did not meet published submission requirements.

Part 2: Complete applications will advance for the statutory eligibility review conducted by ONDCP and CDC Program Officials to determine whether applicants meet all Statutory Eligibility Requirements outlined in **Table 2**. Ineligible applications will not advance to Phase II review. Applicants will be notified that their applications were deemed ineligible.

Phase II Review

A merit review process will evaluate complete, eligible applications in accordance with the criteria outlined below and provided in more detail within the Criteria section of this NOFO

i. Approach

ii. Evaluation and Performance Measurement

iii. Applicant's Organizational Capacity to Implement the Approach

Selection

In addition, the following factors may affect the funding decision:

Phase III Review

Upon full completion of the statutory eligibility review process and review of final scores, ONDCP begins funding with the highest scoring application until all funds are exhausted. ONDCP may also take into consideration factors relating to rural, American Indian/Alaska Native, and economically disadvantaged communities. Final authority lies with the DFC Administrator to determine the eligibility of an application. CDC's National Center for Injury Prevention and Control (NCIPC) will serve as the day-to-day administrator of DFC grant programs.

CDC will provide justification for any decision to fund out of rank order.

Anticipated Announcement and Award Dates

Successful applicants will be notified in writing by CDC Office of Grant Services at least 30 days prior to award date.

Section VI. Award Administration Information

Award Notices

Successful recipients will receive a Notice of Award (NoA) from the CDC Office of Grants Services. The NoA shall be the only binding, authorizing document between the recipient and CDC. The NoA will be signed by an authorized Grants Management Officer and e-mailed to the program director. A hard copy of the NoA will be mailed to the recipient fiscal officer identified in the application.

Unsuccessful recipients will receive notification of the results of the application review by mail.

Administrative and National Policy Requirements

Administrative and National Policy Requirements, Additional Requirements (ARs) outline the administrative requirements found in 45 CFR Part 75 and the HHS Grants Policy Statement and

other requirements as mandated by statute or CDC policy. CDC programs must indicate which ARs are relevant to the NOFO. Recipients must then comply with the ARs listed in the NOFO. Do not include any ARs that do not apply to this NOFO. NOFO Recipients must comply with administrative and national policy requirements as appropriate. For more information on the Code of Federal Regulations, visit the National Archives and Records Administration: <https://www.archives.gov/federal-register/cfr>. For competing supplements, ARs remain in effect as published in the original announcement.

Continuing Continuations -

The full text of the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards, 45 CFR 75, can be found at:

<https://www.ecfr.gov/cgi-bin/text-idx?node=pt45.1.75>

Reporting

Federal Funding Accountability and Transparency Act of 2006 (FFATA), P.L. 109–282, as amended by section 6202 of P.L. 110–252 requires full disclosure of all entities and organizations receiving Federal funds including awards, contracts, loans, other assistance, and payments through a single publicly accessible Web site, <http://www.USASpending.gov>

Compliance with this law is primarily the responsibility of the Federal agency. However, two elements of the law require information to be collected and reported by applicants: 1) information on executive compensation when not already reported through the SAM, and 2) similar information on all sub-awards/subcontracts/consortiums over \$25,000.

For the full text of the requirements under the FFATA and HHS guidelines, go to:

- <https://www.gpo.gov/fdsys/pkg/PLAW-109publ282/pdf/PLAW-109publ282.pdf>,
- https://www.frs.gov/documents/ffata_legislation_110_252.pdf
- <http://www.hhs.gov/grants/grants/grants-policies-regulations/index.html#FFATA>.

Each funded recipient must provide CDC with an Annual Performance Report (APR) submitted via www.Grantsolutions.gov:

1. The interim progress report is due no less than 120 days before the end of the budget period. The Interim Progress report will serve as the non-competing continuation applications, and must contain the following elements:

- a. Standard Form (“SF”) 424S Form.
- b. SF-424A Budget Information-Non-Construction Programs.
- c. Budget Narrative.
- d. Indirect Cost Rate Agreement.
- e. Project Narrative.

2. Annual Performance Report (APR) (required): The recipient must submit the APR via www.Grantsolutions.gov 120 days before the end of the budget period.

3. Federal Financial Report (FFR)(SF425): (Required) The annual FFR form (SF-425) is

required and must be submitted through the Payment Management System (PMS) 90 days after the end of the budget period.

4. The Final Performance Report is due 90 days after the end of the period of performance. The Final FFR is due 90 days after the end of the period of performance and must be submitted through the Payment Management System (PMS).

Termination

CDC may impose other enforcement actions in accordance with 45 CFR 75.371- Remedies for Noncompliance, as appropriate.

The Federal award may be terminated in whole or in part as follows:

- (1) By the HHS awarding agency or pass-through entity, if the non-Federal entity fails to comply with the terms and conditions of the award;
- (2) By the HHS awarding agency or pass-through entity for cause;
- (3) By the HHS awarding agency or pass-through entity with the consent of the non-Federal entity, in which case the two parties must agree upon the termination conditions, including the effective date and, in the case of partial termination, the portion to be terminated; or
- (4) By the non-Federal entity upon sending to the HHS awarding agency or pass-through entity written notification setting forth the reasons for such termination, the effective date, and, in the case of partial termination, the portion to be terminated. However, if the HHS awarding agency or pass-through entity determines in the case of partial termination that the reduced or modified portion of the Federal award or subaward will not accomplish the purposes for which the Federal award was made, the HHS awarding agency or pass-through entity may terminate the Federal award in its entirety.

Reporting of Foreign Taxes (International/foreign projects only)

A. Valued Added Tax (VAT) and Customs Duties – Customs and import duties, consular fees, customs surtax, valued added taxes, and other related charges are hereby authorized as an allowable cost for costs incurred for non-host governmental entities operating where no applicable tax exemption exists. This waiver does not apply to countries where a bilateral agreement (or similar legal document) is already in place providing applicable tax exemptions and it is not applicable to Ministries of Health. Successful applicants will receive information on VAT requirements via their Notice of Award.

B. The U.S. Department of State requires that agencies collect and report information on the amount of taxes assessed, reimbursed and not reimbursed by a foreign government against commodities financed with funds appropriated by the U.S. Department of State, Foreign Operations and Related Programs Appropriations Act (SFOAA) (“United States foreign assistance funds”). Outlined below are the specifics of this requirement:

- 1) Annual Report: The recipient must submit a report on or before November 16 for each foreign country on the amount of foreign taxes charged, as of September 30 of the same year, by a foreign government on commodity purchase transactions valued at 500 USD or more financed with United States foreign assistance funds under this grant during the prior United States fiscal year (October 1 – September 30), and the amount reimbursed and unreimbursed by the foreign

government. [Reports are required even if the recipient did not pay any taxes during the reporting period.]

2) Quarterly Report: The recipient must quarterly submit a report on the amount of foreign taxes charged by a foreign government on commodity purchase transactions valued at 500 USD or more financed with United States foreign assistance funds under this grant. This report shall be submitted no later than two weeks following the end of each quarter: April 15, July 15, October 15 and January 15.

3) Terms: For purposes of this clause:

“Commodity” means any material, article, supplies, goods, or equipment;

“Foreign government” includes any foreign government entity;

“Foreign taxes” means value-added taxes and custom duties assessed by a foreign government on a commodity. It does not include foreign sales taxes.

4) Where: Submit the reports to the Director and Deputy Director of the CDC office in the country(ies) in which you are carrying out the activities associated with this cooperative agreement. In countries where there is no CDC office, send reports to VATreporting@cdc.gov.

5) Contents of Reports: The reports must contain:

- a. recipient name;
- b. contact name with phone, fax, and e-mail;
- c. agreement number(s) if reporting by agreement(s);
- d. reporting period;
- e. amount of foreign taxes assessed by each foreign government;
- f. amount of any foreign taxes reimbursed by each foreign government;
- g. amount of foreign taxes unreimbursed by each foreign government.

6) Subagreements. The recipient must include this reporting requirement in all applicable subgrants and other subagreements.

Section VII. Agency Contacts

CDC encourages inquiries concerning this announcement.

For **programmatic technical assistance and general inquiries**, contact:

First Name:

Wendy

Last Name:

Heirendt

Project Officer

Department of Health and Human Services

Centers for Disease Control and Prevention

Street 1:

Street 2:

City:

State:

Zip:

Telephone:

Email:

DFC_NOFO@cdc.gov

For **financial, grants management, budget assistance and general inquiries**, contact:

Address:

First Name:

Valencia

Last Name:

Williams

Grants Management Specialist

Department of Health and Human Services

Office of Grants Services

Street 1:

Street 2:

City:

State:

Zip:

Telephone:

Email:

DFC_OGS@cdc.gov

Section VIII. Other Information

Other CDC Notice of Funding Opportunities can be found at www.grants.gov.

Following is a list of acceptable attachments **applicants** can upload as PDF files as part of their application at www.grants.gov. Applicants may not attach documents other than those listed; if other documents are attached, applications will not be reviewed.

- Project Abstract
- Project Narrative
- Budget Narrative
- CDC Assurances and Certifications
- Report on Programmatic, Budgetary and Commitment Overlap
- Table of Contents for Entire Submission
- SF424
- SF424A
- Funding Preference Deliverables

Optional attachments, as determined by CDC programs:

- Indirect Cost Rate, if applicable
- Non-profit organization IRS status forms, if applicable

Required attachments:

- Project Narrative limited to 15 pages only.
- Risk Questionnaire and supporting documentation (please see **Section IV: Application and Submission Information, CDC Assurances and Certifications** for more information).

Additionally, please include the attachments cited in the table below:

Table 5: Required Attachments		
Attachment Reference	Attachment Name	Naming convention to upload as a PDF to www.grants.gov
Attachment 1	Coalition Involvement Agreement	Name the file “Attachment 1_ Coalition Involvement Agreement”
Attachment 2	One Set of Coalition Meeting Minutes	Coalition meeting minutes must be from between January 2020 and the date this application is due. Name the file “Attachment 2_ Meeting Minutes”
Attachment 3	DFC Program Evaluation Requirements	Name the file “Attachment 3_ DFC Program Evaluation Requirements”
Attachment 4	Assurance of Legal Eligibility	Name the file “Attachment 4_ Assurance of Legal Eligibility”
Attachment 5	Letter of Mutual Cooperation	Name the file “Attachment 5_ Letter of Mutual Cooperation”
Attachment 6	Assurance of One DFC Grant at a Time	Name the file “Attachment 6_ Assurance of One DFC Grant at a Time”
Attachment 7	Assurance of 10-Year Funding Limit	Name the file “Attachment 7_ Assurance of 10-Year Funding Limit”
Attachment 8	General Applicant Information	Name the file “Attachment 8_ General Applicant Information”
Attachment 9	Congressional Notification	Name the file “Attachment 9_ Congressional Notification”

Attachment 10	Key Personnel Resumes	Name the file “Attachment 10_Key Personnel Resumes”
Attachment 11	Disclosure of All Prior DFC Funding	Name the file “Attachment 11_Disclosure of All Prior DFC Funding”

NOFO-specific Glossary and Acronyms

Achievable (related to outcomes): Attainable within a given timeframe and with available project resources.

Allocability (cost principle): A cost is allocable to a specific grant, function, department, or other component, known as a cost objective, if the goods or services involved are chargeable or assignable to that cost objective in accordance with the relative benefits received or other equitable relationship.

Allowable cost: A cost incurred by a recipient that is:

- i. Reasonable for the performance of the award;
- ii. Allocable;
- iii. In conformance with, or incorporated by reference, any limitations or exclusions set forth in the federal cost principles applicable to the organization incurring the cost or the Notice of Award (NOA) as to type or amount;
- iv. Consistent with regulations, policies and procedures of the recipient that apply uniformly to both federally supported and other activities of the organization;
- v. Determined in accordance with generally accepted accounting principles; and Not included as a cost in any other federally supported award (unless specifically authorized by statute).

Authorized Organization Representative: The individual(s), named by the applicant/recipient organization, who is authorized to act for the applicant/recipient and to assume the obligations imposed by the federal laws, regulations, requirements, and conditions that apply to grant applications or awards.

Business Official: The individual identified in the application as being the primary party responsible for overseeing the financial aspects of the grant (i.e., Authorized Organization Representative). This is the individual who will receive the Notice of Award if funded and the merit review summary statement.

Coalition Involvement Agreement: A single, mutual agreement between the coalition and each one of its 12 sector members establishing the minimum expectations and contributions to be leveraged on behalf of the community, the coalition, and the implementation of the award.

Community-level Change: Change that occurs within the overall population of the community.

Community Readiness: The degree to which a community is prepared to take action on an issue.

Congressional District: An electoral division of a state entitled to send one member to the U.S. House of Representatives (federal congressional district).

Consistency (cost principle): Regulations regarding cost assignment must be consistent for all work of the organization under similar circumstances, regardless of the source of funding, to avoid duplicate charges.

DFC Me: DFC’s Management and Evaluation system used for grant communications and progress reporting in concert with CDC’s grants management system GrantSolutions. DFC Me is

also used as a learning center for award recipients.

Economically Disadvantaged Area: An area with 20 percent or more children living in households below the poverty line as defined by the U.S. Census Bureau.

Key Personnel: Individuals, in addition to the principal investigator/program director (PI/PD), identified by the OPDIV in the Notice of Award (NOA) that are considered critical to the project (i.e., their removal or absence from the project would have a significant impact on the project). The PI/PD is always considered both a “key person” and a “principal.” Other key personnel generally are not considered “principals” for purposes of suspension and debarment.

Level of Effort: Direct time spent by an individual on program-related work. Across all projects/grants/positions, the level of effort for an individual may not exceed 100 percent.

Measurable (related to outcomes): How much change is expected. It must be possible to count or otherwise quantify an activity or its results. It also means that the source of and mechanism for collecting measurement data can be identified and that collection of the data is feasible for the project. A baseline measurement is required to document change (e.g., to measure the percentage of increase or decrease). If an applicant plans to use a specific measurement instrument, it is recommended that the instrument is incorporated into the outcome.

Objectives: What is to be accomplished during a specific period of time to move toward achievement of a goal. Measurable objectives **must** include the following elements:

- The type of change;
- How much change will occur, including the specific amount of increase or decrease;
- The specific population to be addressed (if population is youth, the ages of youth or grade level **are** identified);
- A specific date (month/year) by when change will be accomplished; and Indicates how change will be measured.

Other Sources of Support: Funds or resources, whether federal, non-federal, or institutional, available to the Program Director, Principal Investigator, or Project Coordinator in direct support of their activities through grants, cooperative agreements, contracts, fellowships, gifts, prizes, and other means.

Pass-through Program: A program where the recipient’s role is to select subrecipients that are expected to provide the services that are the purpose of the grant, coordinating and overseeing their activities, and providing the administrative support needed to meet OPDIV requirements. Recipients under the DFC Support Program are not permitted to run their program as a pass-through program.

Program Director/Principal Investigator (PD/PI): The individual(s) designated by the recipient to direct the project or program being supported by the grant. The PD/PI is responsible and accountable to officials of the recipient organization for the proper conduct of the project, program, or activity.

Project Coordinator: An individual who coordinates the work of the coalition and program activities, including training, coalition communication, data collection, and information dissemination. The Project Coordinator will be listed on the DFC website if the grant is awarded.

Reasonableness (cost principle; including necessity): A cost if it does not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost.

Realistic (related to outcomes): Within the scope of the project and propose reasonable programmatic steps that can be implemented within a specific timeframe.

Recipient: Conduct the day-to-day operations of the grant program.

Rural: According to the Drug-Free Communities Act of 1997, rural is defined as a county with a population that does not exceed 30,000 individuals.

Social Indicator Data: Numerical measures that describe the well-being of individuals or communities. Indicators are comprised of one variable or several components combined into an index. They are used to describe and evaluate community well-being in terms of social, economic, and psychological welfare. Community-level social indicators can be useful in community assessments for different purposes. An assessment to identify community issues and problems, for instance, might rely on such indicators as the incidence of a disease or medical condition either in the community at large, or in a particular social, ethnic, or geographic group.

Specific (related to outcomes): Includes the “who” and “what” of program activities. Use only one action verb to avoid issues with measuring success.

Strategy: An overarching strategic plan, action, initiative, or policy approach designed to achieve a key or primary aim or objective the coalition intends to achieve intended results.

Supplement not supplant: A form of maintenance of effort requirement that specifies that federal funds received may not be used to replace existing state, local, or agency funds with federal funds. Federal funds may be used to supplement existing activities. Existing state, local, or agency funds for a project, may not be replaced by federal funds and reallocated for other organizational expenses. The baseline for a supplement-not-supplant requirement may be the recipient’s previous fiscal year or another baseline year or period.

Time-bound (related to outcomes): Provide a timeframe indicating when the outcome will be measured or a time by when the outcome will be met.

Urban: According to the Census Bureau classifies as all territory, population, and housing units located within an urbanized area (UA) or urban cluster (UC). It delineates UA and UC boundaries to encompass densely settled territory, which consists of Core Census block groups or blocks that have a population density of at least 1,000 people per square mile and surrounding census blocks that have an overall density of at least 500 people per square mile.