



## Training & Education Sponsorship related to Opioid & Stimulant Use

The Department of Social Services, Division of Behavioral Health is offering sponsorship funding for training and education related to opioid and/or stimulant use. Funds may be used to support direct expenses associated with the planning and hosting of training events, speaker fees for subject matter experts, materials or supplies needed to support training event(s), and related expenses.

### SECTION I: SPONSORSHIP OVERVIEW

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The South Dakota Department of Social Services received funding from the Substance Abuse and Mental Health Services Administration (SAMHSA) to address the opioid crisis by increasing access to medication-assisted treatment for the treatment of opioid use disorder, reducing unmet treatment need, and reducing opioid overdose related deaths through the provision of prevention, treatment, and recovery activities for Opioid Use Disorder (OUD), including illicit use of prescription opioids, heroin, and fentanyl and fentanyl analogs. The funding also supports evidence-based prevention, treatment, and recovery support services to address stimulant use disorders.

#### APPLICATION INTENT

To provide South Dakota-based organizations with mini-grants to support training and education related to identifying and filling critical gaps in availability of treatment for OUD and stimulant misuse and use disorders. Training may support workforce development in strategies that can most rapidly and adequately address gaps in that system of care. The use of these funds requires that only evidence-based treatments, practices, and interventions be used for the prevention, treatment, and recovery support services for OUD and stimulant misuse and use disorders.

#### ELIGIBLE APPLICANTS

- South Dakota organizations or associations that provide direct services and support to populations affected by opioid and/or stimulant use, including but not limited to public, private, or tribal behavioral health care settings, medical clinics or health systems, and pharmacies.
- South Dakota organizations or associations that offer training and education to professionals or the general public regarding opioid and/or stimulant use, including but not limited to professional associations.

Note that contracts cannot be made to individuals. Organizations that do not have a tax identification number can apply for funding through a fiscal agent.

#### SUPPORTED ACTIVITIES

Supported training through this opportunity can address prevention, treatment, and recovery support services and practices that have a demonstrated evidence-base, and that are appropriate for the population(s) of focus. Education and awareness related to opioid or stimulant use must be provided by a subject matter expert with developed expertise in addiction via advanced degrees or rigorous continuous study in the field. While a subject matter expert's presentation may include personal testimony, speakers must primarily focus on the dissemination of technical information.

Funds may not be used for the following activities:

- Procurement of DATA waiver training, as this training is offered free of charge from SAMHSA.
- Incentives to any health care professional in exchange for completion or participation in supported training.
- Speaker honorariums.
- Purchase of food (beverages are allowable).
- Delivery of personal testimonials.

## AVAILABLE FUNDING AND CHECKLIST

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### Application Deadline:

Applications will be accepted on an ongoing basis but reviewed in alignment with the due dates listed below. Funding for this program is dependent on the availability of grant funds.

The Division of Behavioral Health may call or email the listed primary contact with clarifying questions during the review process. If follow-up information is needed, the award timeline may be delayed.

Application and Award Cycle	
Application Due Date	Anticipated Award/Contract Date
December 8 <sup>th</sup> , 2020	February 1 <sup>st</sup> , 2021
March 15 <sup>th</sup> , 2021	June 1 <sup>st</sup> , 2021
August 11 <sup>th</sup> , 2021	October 1 <sup>st</sup> , 2021
November 10 <sup>th</sup> , 2021	January 1 <sup>st</sup> , 2022
February 9 <sup>th</sup> , 2022	April 1 <sup>st</sup> , 2022

Sponsored activities may begin upon notice of award, but not before (see Application and Award Cycle above for Anticipated Award/Contract Dates). No pre-award costs will be eligible for reimbursement. Completion of activities is subject to the scope of what is being proposed, and to the continuation of federal funding supporting this program.

### Budget Limitations:

Applicants may apply for up to \$50,000. Applicants are invited to submit multiple applications for different events but are limited to \$50,000 in total award per applicant per state fiscal year.

### How to Submit an Application:

Send completed application form and required attachments (see below) to [DSSBH@state.sd.us](mailto:DSSBH@state.sd.us).

Please indicate in the subject line: “**Opioid Mini-Grant Application**”.

### Application Checklist:

The following documents should be provided to ensure your application is received as complete. Document templates (excluding a Cost Proposal template) are available at <https://dss.sd.gov/behavioralhealth/community/>.

- Completed, signed Application Form
- Cost Proposal
- W-9
- Subrecipient questionnaire
- FFATA Form

## ADDITIONAL QUESTIONS?

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Please contact Rachel Oelmann (email: [rachel@sageprojectconsultants.com](mailto:rachel@sageprojectconsultants.com)), contracted State Opioid Coordinator working on behalf of the Division of Behavioral Health with questions as you prepare your application, or to request a meeting to discuss your proposed approach prior to applying to see if it aligns with the state’s grant priorities and allowable costs.

# Application Form

## Training & Education Sponsorship related to Opioid & Stimulant Use

Instructions: Organizations seeking funding assistance for trainings and/or educational events related to the use, misuse and abuse of opioids or stimulants must complete all sections below. Applications must be submitted to the Division of Behavioral Health, [DSSBH@state.sd.us](mailto:DSSBH@state.sd.us), subject line: Opioid Mini-Grant Application.

### SECTION A: APPLICANT INFORMATION

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#### APPLICANT ORGANIZATION

ORGANIZATION NAME:

ADDRESS:

CITY/STATE:

ZIP:

E-MAIL:

PRIMARY CONTACT:

TELEPHONE NO:

FAX NO:

#### AUTHORIZED ORGANIZATION REPRESENTATIVE

NAME:

TITLE:

E-MAIL:

TELEPHONE NO:

The Authorized Organization Representative must be someone who has authority to sign a contract on behalf of the applicant. If additional individuals should be included on contract-related correspondence, please provide their contact information below.

#### FISCAL AGENT (IF APPLICABLE):

ADDRESS:

CITY/STATE:

CONTACT:

TELEPHONE NO:

E-MAIL:

## SECTION B: AGENCY CAPACITY

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Briefly describe your organization's relevant expertise in the area of training and education specific to substance use disorders.

## SECTION C: PROJECT IMPLEMENTATION PLAN

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**Event Title:**

**Event Date(s):**

**Location of Training / Event:**

**Describe your target population for the training and education, and your organization's approach to engaging and/or recruiting that population to participate in the training.**

**Describe the training to be offered and its alignment with the supported activities as noted in the project description.**

Responses should provide sufficient detail to demonstrate ability to rapidly mobilize grant resources to support your organizations' plan. Include information on activities that will be pursued, including who will be responsible for leading those activities. Include identification the specific evidence-based practices (EBPs) you intend to provide training on and rationale for use in the target audience identified above.

## PROJECT TIMELINE

Please provide narrative or a diagram depicting your anticipated project implementation timeline. If preferred, a timeline can be provided as an attachment to this application. Be sure to review the anticipated award timeline guidance in the program description as you develop your implementation plan.

## SECTION D: PROJECTED IMPACT

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### WHAT IS/ARE THE PROJECTED OUTCOME(S) FOR THE PROPOSED ACTIVITIES?

*Acceptable responses should include measurable projections for the project if implemented, and how you will measure or assess those outcome(s).*

## SECTION E: TERMS AND CONDITIONS

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By signing this application form, applicants understand and will adhere to the following terms:

- The State reserves the right to reject any or all proposals, waive technicalities, and make awards as deemed to be in the best interest of the State of South Dakota.
- The State, upon satisfactory review and notice of award to the Applicant, will execute a contract for services using its standard agreement terms and conditions (see attachments).
- If awarded, the Applicant acknowledges that it will submit for reimbursement of expenses as outlined in the executed contract on a monthly basis and that pre-payment for expenses is not allowable.

Date Application  
Submitted: \_\_\_\_\_

Organization's  
Authorizing Official  
Signature \_\_\_\_\_

## REQUIRED ATTACHMENT: COST PROPOSAL

Applicants must include a detailed cost proposal as a separate attachment (.pdf, .xlsx, or .docx) to this application form.

Costs should be itemized in the following categories and calculations/assumptions provided to allow the state full understanding of how requested funds are being calculated. Total costs should not exceed \$50,000.

The Cost Proposal must also include a detailed narrative providing justification for each item requested.

<b>Personnel</b>	Costs included must directly support the implementation plan and will be reimbursable per monthly invoices upon completion of work, based on actual hours/costs invoiced to the project. Personnel rates should be inclusive of any applicable fringe benefits.
<b>Travel</b>	Travel rates must align with your organization's established travel policies and/or align with State of South Dakota travel reimbursement rates.
<b>Materials &amp; Supplies</b>	Eligible expenses may include but are not limited to training materials/curriculum for trainees on selected evidence-based practices.
<b>Consultants / Contracts</b>	Cost justifications must include detailed description of what services will be provided and key personnel involved.
<b>Other Direct Expenses</b>	Other as identified by the applicant.

### SPECIAL CONSIDERATIONS

Applicants are encouraged to contact Rachel Oelmann (email: [rachel@sageprojectconsultants.com](mailto:rachel@sageprojectconsultants.com)), contracted State Opioid Coordinator working on behalf of the Division of Behavioral Health to discuss their budget and allowable/unallowable expenses. The review and scoring committee may follow-up with applicants to ask clarifying questions and may request cost proposals be modified to reflect any necessary adjustments prior to issuing a notice of award. Funds may not be used to procure equipment valued at \$5,000 or greater or for provider/staff incentives or bonuses for their participation in the program. Funds may also not be used for occupancy (e.g. rent/lease payments) or for indirect/F&A costs.