



Maryland's Office of Overdose Response

FY 2025 Competitive Grant Program Information Session

February 9, 2024

Overview of MOOR

Maryland's Office of Overdose Response (MOOR) promotes collaboration across all state and local agencies working to address substance use and overdose in the state. MOOR identifies gaps in local substance use disorder resources and disseminates best practices and state resources to fill those gaps. MOOR leads the collaborative process of drafting the state's interagency coordination plan for addressing overdose. All of MOOR's activities align with the State of Maryland policy priorities of Prevention, Harm Reduction, Treatment, Recovery and Public Safety.

Eligibility & Requirements

The following entities are eligible to apply:

- state agencies;
- local government entities (including local school systems); and
- private and not-for-profit community-based partners.
 - Must be a Maryland partners benefitting Maryland residents *Recovery residences must admit consumers who are receiving Medications for Opioid Use Disorder (MOUD) in order to be considered for funding.

All project proposals must address the overdose crisis via Prevention, Harm Reduction, Treatment, Recovery and Public Safety. Additionally, funding will be prioritized for projects that fall within MOOR's priority projects. The funding available for MOOR's Competitive Grant Program is approximately \$6 million.

MOOR Strategic Priorities

Prevention

Prevention efforts include strategies and interventions that seek to prevent current and future substance use. Prevention interventions aim to reduce individual and environmental risk factors while increasing protective factors to prevent or delay the onset of drug use

Harm reduction

Programs that engage directly with people who use drugs to prevent overdose, reduce infectious disease transmission, and improve the physical, mental, and social well-being of those served.

Treatment

Treatment services, interventions, and care settings tailored to provide individuals with the greatest opportunity for successful outcomes. Individuals should be able to access all levels of substance use treatment, ranging from outpatient services to medically managed, intensive residential care. Offering low-threshold options for treatment is especially important, so that people can engage in services when they are ready without facing additional barriers.

MOOR Strategic Priorities

Recovery

Like treatment, there is no one-size-fits-all recovery strategy, and resources need to be individualized. Various recovery efforts can help reduce the risk of relapse and overdose by increasing access to fundamental supportive factors, such as counseling, housing, transportation, employment, etc.

Public Safety

Public safety officials are often the first to come into contact with individuals who use drugs and individuals in crisis, and they have the opportunity to connect individuals to essential treatment and recovery services. Public safety partners can help create pathways for individuals to receive care rather than entering the criminal-legal system. They can also provide access to treatment and recovery services for incarcerated individuals.

Priority Projects

- **Evidence-based and promising practices for early childhood prevention interventions**
 - In-home, for new parents/families
 - Addressing Social Determinants of Health
 - Preventing Adverse Childhood Experiences and interrupting intergenerational transmission of trauma and substance use disorder
- **Expanding access to evidence based treatment and harm reduction services for at-risk populations.**
- **Transportation to treatment, harm reduction, recovery services, employment and essential government service**

Priority Projects

- **Peer programs in libraries and other community settings.**
 - Placement and employment of peers at public libraries and other community settings to connect people to treatment and recovery services.
- **Supporting employment in recovery**
 - Including, but not limited to, projects focused on supporting workforce development and job training for people in recovery, and creating recovery friendly workplaces
- **Recovery Housing - Extension of time in certified recovery residences**
 - For MCORR Certified Recovery Residences only. Recipients must demonstrate proof of certification, proof that MDRN funding is expended for the period (for residences that are also MDRN certified). Recovery Residences must also allow residents being treated with MOUD to be eligible for funding.
 - MCORR certification is a requirement for funding for recovery residences. CARF 3.1 level certification is not a replacement for recovery residences.

Application Form Instructions (FAQs)

- Applicant FEIN: Please supply the Federal Employer Identification Number for the organization. This is used by MOOR during grant reimbursement.
- Main Objective: While the project may address more than one objective, please select the primary objective of the project: Prevention, Harm Reduction, Treatment, Recovery and Public Safety.
- Priority Project: If the project largely addresses one of the priority projects outlined above, please select the priority from the given list.

Application Form Instructions (Cont.)

- Checklists: As indicated on page 9, all nongovernmental organizations are required to provide certain organizational information, including:
 - financial statements (profit & loss statement and balance sheet from prior fiscal/calendar year);
 - company description including the number of employees, EIN, and form of organization;
 - most recent financial audit (if audited);
 - Statement of Good Standing from the Maryland State Department of Assessments & Taxation (must be dated within 60 days of this application);
 - current copies of any licensures/certifications necessary to operate in the State of Maryland. Please also disclose any investigations that your organization may be undergoing (licensure or otherwise);
 - current copies of any licensures/certifications necessary to operate in the State of Maryland for all service contractors. Please also disclose any investigations that these organizations may be undergoing (licensure or otherwise); and
 - Internal Revenue Service (IRS) nonprofit determination and IRS form 990 (if applicable).

Budget Form FAQs

- Positions which are not full time, not 100% to the project, or not 100% to the period of performance (eg 6 months) should be noted on the grant. Because of the breadth of situations available, a few are described below.
 - For example a 20hr per week employee would be considered part time, but could still be 100% to the grant.
 - Conversely, a 40hr per week employee would be considered full time (1.0FT), but may only be working on the grant project for 6 months out of the grant period.
 - Finally, a Full time employee could be only spending 50% of their time on the grant project, making them a .50 FTE.

Budget Form FAQs

- **Fringe** is limited to 30% of budgeted salaries included in the grant project. Fringe and salaries are reimbursed to actual expenditures.
- **Contractors and Contractual Services** should be monitored responsibly, and held to the same standards of agreement and documentation as the grantee.
- **Materials & Supplies** should be described as accurately as possible, within reasonable groups.
- Please review the [Allowable/Unallowable Costs reference](#), and contact us with any questions. This document can be found on our website.

Budget Form FAQs: Indirect Costs

Indirect Costs: Indirect costs may not exceed 10 percent of direct project costs.

If an applicant requests indirect costs on that budget section, items which are considered indirect costs may not be otherwise requested as part of the project.

For example, if an applicant specifies 10% of direct costs as an indirect costs budget line, specific indirect expenditures, such as rent, administrative services, payroll expense, office supplies, utilities, etc. may not be included elsewhere in the budget. During reimbursement, indirect costs will be reimbursed at a rate consistent with request.

Budget Form FAQs: Indirect Costs

- In the below example, total direct costs equal \$100,000. The applicant has requested \$10,000 in indirect costs, up to the maximum per project of 10% of direct costs
- However, the applicant also included accounting services, which is considered an indirect cost. This is not appropriate, as it effectively increases the indirect costs for the project to \$15,000, which exceeds the 10% allowable maximum

H. Other (Please Specify)			
Other	- \$	-	
Other	- \$	-	
Accounting Svcs	- \$	5,000.00	Unallowable, due to requested indirect percentage below
Total Direct Costs	\$	100,000.00	
Indirect Costs Requested*	\$	10,000.00	Maximum of 10% of Direct Costs (.10*100,000)
Total Project Cost	\$	110,000.00	

Budget Form FAQs: Indirect Costs

- Indirect Costs and Reimbursement - If indirect costs are requested as a single line item below total project costs, then the indirects will be reimbursed at a rate consistent with that amount. This is substantiated by the grant agreement, which provides the supporting documentation for that reimbursement. No further documentation will be required in that instance.
- If indirect costs are, instead, requested in explicit lines throughout the budget, the total for all indirect costs will still be limited to no more than 10% of direct costs, but documentation will be required for reimbursement to substantiate the costs.

Accounting Svcs	- \$ 5,000.00	Documentation Required
Total Direct Costs	\$ 100,000.00	
Indirect Costs Requested*	\$ 10,000.00	No Documentation Required, 10% reimbursement of Direct Costs is allowable
Total Project Cost	\$ 110,000.00	

Award Stage

- Initial Qualification
 - Perform preliminary review to ensure application package is complete (prior to deadline).
 - Submit Questionnaire to local Health Departments and Local Behavioral Health Authorities to assess community partnership
- Grants Scoring Committee
 - Comprised of subject matter experts from various local and state agencies and local organizations that have a demonstrated expertise in and commitment to combating the overdose crisis.
- Evaluation and Scoring
 - Scored based on seven different criteria.
- Award letters and grant agreements are then prepared.

Scoring Criteria

- PROJECT SUMMARY & PROBLEM STATEMENT: Project shows alignment with MOOR Strategic Priorities, has evidence-basis/innovation or promising practices, fills a gap, is well defined, and demonstrates coordination with other local/regional entities
- PROJECT AUDIENCE/EQUITY: Project shows jurisdictional equity, racial/ethnic equity, or project serves a particularly difficult to reach audience group
- PERFORMANCE MEASURES: Specific and measurable, significant - with respect to budget and time frame, relates to the Strategic Priority
- TIMEFRAME: Reasonable and detailed break down of time that shows individual project steps, using the provided template

Scoring Criteria

- BUDGET/SPEND PLAN: Budget line justifications are sufficiently detailed to understand how the funds will be used, and aligns with project goals. Positions, time, and pay are reasonable for the project tasks. Other services and purchases are explained and directly in line with the scope of the project. Applicant will demonstrate additional financial commitment either internally or from other funding sources.
- ORGANIZATIONAL/FINANCIAL CAPACITY/VIABILITY: Organization has conducted similar programs, and has appropriate resources to manage grant and budget. Organization has demonstrated fiscal responsibility for projects of this scope.
- PAST GRANTEE PERFORMANCE: Prior projects were completed on schedule with minor modifications, reasonably planned budgeted, reasonable and fair performance measures, timely and correct reports and reimbursement requests, and accurate budget justifications. *

* Non-prior grantees receive and automatic score of 7/10 for this section):

Post-Award Stage

- Reimbursement requests and reporting are submitted by grantees on a quarterly basis.
 - Quarterly Reporting

<u>Period of Performance</u>	<u>Reporting Deadline</u>
July-September	October 30
October-December	January 30
January-March	April 30
April-June	July 30

- Budget modifications are received regularly (generally January through May).

Questions?