EXPANDING TREATMENT SERVICES:

Comprehensive Opioid, Stimulant, and Substance Abuse Site-based Program

This program provides funding to develop, implement, or expand programs in response to the overdose crisis and impacts of illicit opioids, stimulants, or other substances with the objectives to reduce overdose deaths, promote public safety, and support access to prevention, harm-reduction, treatment, and recovery services in the community and justice system.

ELIGIBLE ENTITIES:

Category 1: Local or Tribal Applications

- City or township governments, county governments, city, township, or county governments in rural areas (as defined below), Native American tribal governments (federally recognized)
- Jurisdictions without a county or local governmentbased substance use service system may designate the state administering agency (SAA) to serve as the primary applicant in Category 1. Applicants should ensure they apply under the appropriate subcategory below, based on the population of the proposed project area:

Subcategory 1b — A suburban area or medium-size county with a population between 100,000 and 500,000.

Subcategory 1c — A rural area or small county or tribal area with a population of fewer than 100,000 or a federally recognized American Indian tribe.

Category 2: State Applications

State Governments

WHAT CAN BE FUNDED?

Grant funds may be used to develop, implement, or expand a combination of the allowable use activities described below, or be concentrated on one so long as the proposed budget is appropriate and justified.

 Identifiable and accessible take-back programs for unused controlled substances found in the home and/or used by hospitals and long-term care facilities. **Total Available Funding**: \$132 million

Anticipated Number of Awards: 83

Anticipated Award Amount:

- Category 1: Local or Tribal Applicants
- Subcategory 1a: Up to \$1,600,000
- Subcategory 1b: Up to \$1,300,000
- Subcategory 1c: Up to \$1,000,000
- Category 2: State Applicants:
 Up to \$6,000,000

Length of Project: Up to 3 years

Cost Sharing/Match Required?

Sample Solicitation from FY 2022: Comprehensive Opioid, Stimulant, and Substance Abuse Site-based Program Solicitation

- Law enforcement and other first responder deflection and diversion programs.
- Comprehensive, real-time, regional information collection, analysis, and dissemination that promote the use of data for real-time and comprehensive planning and response to overdoses and emerging drug trends.
- · Naloxone for law enforcement and other first responders.
- Education and prevention programs to connect law enforcement agencies with K-12 students.

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- Pre-booking or post-booking treatment alternative-to-incarceration programs, such as pretrial, prosecutor, and court diversion or intervention programs, that serve individuals at high risk for overdose or substance use disorder.
- Court programming to prioritize and expedite treatment and recovery services for individuals at high Court programming to prioritize and expedite treatment and recovery services for individuals at high risk for overdose, as well as services for children and youth impacted by their parents' or other family members' substance use.
- Evidence-based substance use disorder treatment related to opioids, stimulants, and other illicit drugs, such as medication-assisted treatment (MAT), as well as harm reduction activities for and recovery support service engagement with the pretrial and post-trial populations leaving local or regional jails or secure residential treatment facilities.
- · Transitional or recovery housing and peer recovery support services.
- Embedding social workers, peers, and/or persons with lived experience at any intercept of the Sequential Intercept Model to assist persons in the criminal justice system and their families navigate the justice system and increase their connection to treatment and recovery support services. Social workers, peers, and/or persons with lived experience may be embedded within law enforcement, pretrial and probation agencies, prosecutor-led programs, legal defense agencies, child welfare agencies, courts, and jails to support community reentry.
- Field-initiated projects that bring together justice, behavioral health, and public health practitioners
 to implement new or promising practices, which may not yet have a research base in addressing
 the impact of opioids, stimulants, and other substances on communities as a whole and
 individuals at risk of or with justice system involvement. This includes the application of evidencebased strategies from other fields that have not yet been fully examined in the justice context.
 Applications for field-initiated projects must include a research partner.

Category 2 applicants can implement one or more of the allowable activities detailed under Category 1. The grantees must support a robust planning period for the sites as well as support for implementation efforts, cross-site training, and peer-to-peer learning. State grantees must conduct an evaluation of all grant-funded activities and provide a copy of the annual, interim, and final evaluation reports prior to the close of the grant period, in collaboration with an independent researcher.