2021 CCAPS RFA Informational Webinar
Frequently Asked Questions (FAQs)

Can funding awarded from this RFA be used for research?

Applications proposing research projects, including randomized controlled trials (RCTs), implementation or expansion of programs lacking a strong evidence base, and expansions that are aimed solely at increasing staff in a current program will not be considered for funding.

Are projects limited to opioid focused work?

No, funded projects can focus on other substances such as cocaine, methamphetamine, and the combination known as polysubstance use.

What is the project period?

The project period shall begin upon both parties’ full execution of the contract and will end July 31, 2022. Contingent on CDC approving a no cost extension, the project may continue (with a contract modification) with an end date of July 31, 2023.

Are there resources applicants are encouraged to review before applying for this funding opportunity?

Applicants are encouraged to review Evidence-Based Strategies for Preventing Opioid Overdose: What’s Working in the United States for guiding principles and a general overview of current best practices.

Applicants should also reference the CDC-developed resource, Preventing Adverse Childhood Experiences (ACEs): Leveraging the Best Available Evidence, which can help states and communities use the best available evidence to prevent ACEs from occurring, as well as lessen harms when ACEs do occur. This resource features six strategies drawn from the CDC Technical Packages to Prevent Violence.
When will the RFA close?

All applications are due by October 13th, 2021. Incomplete applications will not be considered.

Are street-based harm reduction projects with the unhoused within the scope of this grant?

Yes. All projects that meet the project requirements are eligible for funding.

Are collaborations with for-profit agencies permitted?

Yes, some project participants may find work with consultants, subcontractors, and/or other for-profit agencies beneficial. However, NACCHO does ask a significant portion of the budget remain with fiscal agent organization due to the administrative tasks required for this grant.

Where can I access the required application attachments, templates, and forms?

All required documents are included in the RFA and are also available through the online application portal.

Is overdose prevention or ACEs prevention the focus of this funding opportunity?

Both overdose prevention and ACEs prevention are areas of focus. Projects should address and respond to both areas.

What level of evaluation is expected from applicants?

Applicants are required to submit a logic model to be considered for funding. If selected, funded sites will work with NACCHO to develop an evaluation plan. During the project period, there will be ongoing check ins related to the implementation of the evaluation plan. At the end of the project period, funded sites are expected to complete a final evaluation report.

Can you describe the restriction on funding for direct services and treatment? What are some examples of things that would be excluded?

Funding awarded from this RFA cannot be used for direct medical service, such as residential treatment or the purchasing of naloxone.
What is the page limit for the application?

The narrative, not including the budget, should be no more than 10 pages. The application should be uploaded to the NACCHO portal.

Is this funding opportunity suitable for state health departments or is it more specifically targeting LHDs and local non-profits?

Yes, if the state agency can work within the budget and meet the criteria outlined in the RFA.

How many awards will be funded through this RFA?

NACCHO will select and fund up to seven (7) awards. Applicants may request up to $450,000 to support project activities outlined in the application and cross-cutting activities with CDC, NACCHO, and the other selected sites.

Should the budget be written for 18 months? What is the budget percentage recommended to remain with the applying organization?

Yes, the budget should be written for 18 months. NACCHO requires that a minimum of 20% of the budget stay with the applying organization.

Can the workplan include prevention activities around alcohol and marijuana in addition to opioids?

Yes, project work does not have to be specific to opioids.

Can multiple people access, edit, and forms in the portal?

All application materials must be submitted to the portal through the same log in. Only those with access to the log in information will be able to access or edit application materials.

In the statement of need, there is wording regarding “disproportionately affected populations”. What populations are defined to be served?

The RFA is purposefully non-prescriptive in defining these populations—they should be tailored and relevant to the applicant’s community. Page 3 of the RFA offers some examples of disproportionately affected populations.
Though research is not permitted for funding, am I able to use funding for a biostatistician?

Yes.

Are all application attachments required?

Required application components are denoted with a star. Only completed applications will be considered.

Can the fiscal agent set a fee for service with agencies to provide services?

Work with paid consultants is permissible if services do not include medical services.

Can a proposal from a grassroots CBO with an operating budget under $250,000 be competitive?

Yes, organizations with lower operating budgets have applied to RFAs in the past. There may be additional administrative work required to confirm the organization understands the CFR process and can support a grant of this size. NACCHO will work directly with any organization that falls into this category.

Would trauma therapy services for children and families be excluded as clinical care or direct service if services are provided by a subcontractor?

Trauma therapy services are an allowable expense if coupled with substance use disorder intervention.

Is peer support considered direct services?

Peer support is permissible.

Are prevention trainings considered direct service? For example, ACES trainings to community, or youth suicide prevention trainings to youth?

Prevention trainings are permissible.

Does NACCHO / CDC offer any guidance on the effectiveness of arts programming on ACEs intervention?

If the programming can be tied to one or more of the outlined ACE prevention strategies, arts programs are permissible.
Are there specific regions across the US that you are focusing on funding?

Regions targeted for funding should have an exhibited need that is thoroughly explained in the statement of need.

Is post treatment addiction recovery peer support a permissible service?

Yes, this is permissible.

Am I required to provide confirmation of registration with the System for Award Management?

Yes, there will be a place in the application to list the SAM number. Applicants are also asked to include a screenshot or PDF showing an “active” status.

Is the contract reimbursement-based?

The original organization managing the grant will receive a cost reimbursement contract. Funded sites can have consulting contracts with subcontractors.

Can funding be used to purchase naloxone?

No, this is not permissible.

Could the funding be used for Contingency Management rewards or incentives?

No, this is not permissible. Some incentives, such as gift cards, may be allowed on a case-by-case basis.

Would the purchase of fentanyl testing strips for a syringe services program be an allowable expense?

Yes, this is permissible. However, the purchase of supplies (i.e. syringes) is not permitted.

Can some equipment (e.g., video equipment to create messages for the anti-stigma campaign) be purchased with grant funds?

Yes, this is permissible.

Our organization is committed to a mutual aid model. Given that these hires are compliant with a harm reduction model and are community leaders, can current drug users and sex workers be hired as outreach workers using CDC funds?

Yes, if it is approved by the contracting organization and is included in the budget.