Grant Request for Application

Kansas Prevention Collaborative-Community Initiative (KPCCI)

**Substance Abuse Prevention Planning Grant-Cohort VII**



Kansas Behavioral Health Services Commission Mission

“Partnering to promote prevention, treatment, and recovery to ensure

Kansans with behavioral health needs live safe, healthy, successful and self-determined lives in their communities”.

**Request for Application Timeline**

|  |  |
| --- | --- |
| Release of Request for Application | April 20, 2022  (Update May 20,2022) |
| Applications Due | June 1, 2022 |
| Grant Phase | July 1, 2022 – June 30, 2023 |

Submit application and questions to: Submit application and questions to: [KDADS.Prevention@ks.gov](mailto:KDADS.Prevention@ks.gov)

Cc: [Stephanie.Rhinehart@.ks.gov](mailto:Stephanie.Rhinehart@.ks.gov)  [chris.bush@ks.gov](mailto:chris.bush@ks.gov) & [lindsey.spoonergabaldon2@ks.gov](mailto:lindsey.spoonergabaldon2@ks.gov)

# 

# Overview

The Kansas Department for Aging and Disability Services (KDADS), Behavioral Health Services Commission, announces the release of a Request for Applications (RFA) for planning grant (Cohort V) that will allow eligible applicants to engage in a comprehensive community-based strategic plan that will result in community driven strategies to reduce underage drinking, youth marijuana use, health disparities, shared risk and protective factors to produce sustainable systems change.

* **Behavioral health disparities** pose a significant threat to the most vulnerable populations in our society. Whether manifesting themselves as elevated rates of substance misuse among American Indian/Alaska Natives, high rates of suicide among LGBTQ youth, or reduced access to prevention services among people living in rural areas, these disparities threaten the health and wellness of these populations and of our society as a whole. To overcome systemic barriers that may contribute to disparities, planners must be culturally competent. They must recognize and value cultural differences—such as those in the health beliefs, practices, and linguistic needs of diverse populations. They must develop and deliver prevention programs and practices in ways that ensure members of diverse cultural groups benefit from their efforts.

This Kansas Prevention Collaborative-Community Initiative (KPCCI) is intended to reduce underage drinking, youth marijuana use, health disparities, shared risk, and protective factors and produce sustainable systems change. and prevent substance abuse in identified communities and enrich prevention efforts across the state through the implementation and sustainability of evidence-based strategies, and culturally competent prevention strategies. Grantees will be supported by each of the Kansas Prevention Collaborative partners. You can find out more about each of these partners at https://kansaspreventioncollaborative.org/.

With the use of Substance Abuse Block Grant funds, the Kansas Prevention Collaborative has a primary objective to help communities plan, implement, and evaluate activities that prevent and treat substance abuse. Integration of other identified priority behavioral health areas is encouraged when possible to supplement substance abuse prevention. These funds are intended for the focus of **primary prevention** efforts directed at individuals not identified to be in need of treatment services.

This initiative will utilize the five steps of the SAMHSA Strategic Prevention Framework (SPF) with a focus on **Steps 1, 2, 3 & 5.** The SPF is a community-based approach to substance abuse prevention that cuts across existing programs and systems. SPF executes a data-driven, five-step process known to promote youth development, reduce risk-taking behaviors, build assets and resilience, and prevent problem behaviors across the life span. The SPF was initiated by SAMHSA and the Center for Substance Abuse Prevention (CSAP). The five steps of the SPF are designed to help states and communities build prevention competencies and infrastructure necessary to implement and sustain effective prevention policies, practices, and programs. An outline of the five-step process of the Strategic Prevention Framework is provided in the link. A general overview of each step is presented below.

Click <https://www.samhsa.gov/sites/default/files/20190620-samhsa-strategic-prevention-framework-guide.pdf> to learn more about the Strategic Prevention Framework.

**Step 1: ASSESSMENT--**

* The purpose of this step is to understand local prevention needs based on a careful review of data gathered from a variety of sources. These data help planners to identify and prioritize the substance misuse problems present in their community; clarify the impact these problems have on community members; identify the specific factors that contribute to these problems; assess readiness; and determine the resources required to address those factors. Ultimately, a thorough and inclusive assessment process helps to ensure that substance misuse prevention efforts are appropriate and on target.

**Step 2: CAPACITY BUILDING—**

* In this step, local resources are built and mobilized and the community’s readiness to address priority substance misuse problems is determined. In Step 1, planners took stock of what was available in their communities. In Step 2, they ensure the readiness of the community to buy into the prevention effort and take stock of the resources needed to tackle the problem and produce a positive change. A community needs both human and structural resources to establish and maintain a prevention system that can respond effectively to local problems. It also needs people who have the motivation and willingness—that is, the readiness—to commit local resources to address these problems.

**Step 3: STRATEGIC PLANNING—**

* Strategic planning increases the effectiveness of prevention efforts by ensuring that prevention planners select and implement the most appropriate programs and strategies for their communities. In an effective planning process, communities involve diverse stakeholders, replace guesswork and hunches with data-driven decisions, and create comprehensive, evidence-based prevention plans to address their priority substance misuse problems.

**Step 4: IMPLEMENTATION—**

* In this step, a community’s prevention plan is put into action by delivering evidence-based programs and practices as intended. To accomplish this task, planners will need to balance fidelity and adaptation and establish critical implementation supports.

**Step 5: EVALUATION-**

* In the SPF, evaluation is about enhancing prevention practice. It is the systematic collection and analysis of information about prevention activities to reduce uncertainty, improve effectiveness, and facilitate decision-making

The SPF is guided by two cross-cutting principles that should be integrated into each of the steps that comprise it:

* **Sustainability** - the capacity of a community to produce and maintain positive prevention outcomes over time. To maintain positive outcomes, communities will want to sustain an effective strategic planning process as well as those programs and practices that produced positive prevention results. Accomplishing these dual tasks requires the participation, resolve, and dedication of diverse community members and a lot of careful planning.

* **Cultural competence** - one of the SPF’s two guiding, cross-cutting principles and, as such, should be integrated into each step of the framework’s implementation. By considering culture at each step, planners can help to ensure that members of diverse population groups can actively participate in, feel comfortable with, and benefit from prevention practices.

## I. PURPOSE

The KPCCI Planning Grant is intended to reduce underage drinking, youth marijuana use, health disparities, shared risk and protective factors, produce sustainable systems change. Reduce and prevent substance abuse in identified communities and enrich prevention efforts across the state through the implementation and sustainability of evidence-based strategies, and culturally competent prevention strategies. The grant is intended for primary prevention only.

Community coalitions that are awarded this grant will be better prepared to apply for, and secure, other state and national resources to support the implementation and evaluation of their comprehensive plans and efforts to continue work with their communities. KDADS and the Kansas Prevention Collaborative will provide communities with support to make the best use of their efforts throughout the implementation phase.

Utilizing funding and technical assistance, community coalitions will analyze local data that is contributing to substance abuse within their identified geographic area. Resources and technical assistance will be provided to review the local assessment profile, logic model, and action plan to address these issues using the five-step SPF process (i.e., assessment, capacity building, planning, implementation, and evaluation). This will also include reviewing plans for sustainability, cultural competence, and evaluation.

**II. Eligibility**

Kansas Department for Aging and Disability Services invites applications from private, nonprofit, and/or community organizations.

Eligible applicants and their fiscal agents must be an existing community coalition or task force for at least the past six months and may include local government agencies, schools, public universities, and colleges, private and/or not-for-profit 501(c)(3) organizations based in the targeted community. Community coalitions shall be defined as a multiple sector partnership, mobilized at the local level to make their communities safer, healthier, and drug-free. Effective community coalitions must possess a stable and effective organizational structure with clearly defined roles, and responsibilities, and may include multiple geographic areas or school district boundaries that are efficiently and effectively able to work together (e.g., a rural, multi-county partnership).

Existing Community Defined:

* An established coalition that is already formed and can prove they have existed at least 6 months prior to the RFA release date. We asked that documentation be submitted to demonstrate that you are an existing coalition, providing minutes, names of members, meetings, and general functionable activities in place or plans in place for other work, etc. (Only send a copy of minutes for one month prior to December 2021)
* No group can be developed prior to the RFA by collaborating with others to meet the guidelines for the RFA, where no established work has not been done as a coalition earlier than 6 months.

**III. Outcomes/Goal(s)**

To reduce underage drinking, youth marijuana use, shared risk, and protective factors and produce sustainable systems change and prevent substance abuse in identified communities and enrich prevention efforts across the state through the implementation and sustainability of evidence-based strategies, culturally competent prevention strategies through the implementation and sustainability of effective, culturally competent and diverse prevention strategies. Implementation grantees will demonstrate progress made toward community assessment and readiness, building capacity, and addressing cultural competency, by developing a solid coalition infrastructure to create a comprehensive strategic plan that will make positive change in their community. This will be done by utilizing the Strategic Prevention Framework model. Emphasis will be placed on steps one, two, three, and five as planning grantees will **not** be implementing strategies during this grant phase but preparing for the implementation process.

\*\*\*Planning recipients are expected to implement some strategies (separate and different from those strategies in Stage 4 Implementation of the SPF). During the planning stage, recipients will increase their capacity/raise community readiness and all other prominent steps leading up to a successful transition to the implementation phase. Recipients will receive guidance, training, and technical assistance from a DCCCA specialist, and additional support from the KPC team. The following 4 out of 5 steps are listed below that will utilize in the planning phase (Step 4 - not included). As stated above these steps can be viewed in their entirety by accessing the provided link:

**IV. Terms of the Grant**

The award is for a 12- month planning year. Grantees successfully completing the planning grant year will be eligible for Implementation grant funds, based on performance, budget, and compliance. The awarded planning grantees will enter a binding legal agreement between the Kansas Department for Aging and Disability Services and the awarded recipient. The agreement requires the awarded grantee to comply with specific grant criteria, which include mandatory trainings, weekly reporting, quarterly reports, monthly fiscal reports, and data collection. Should a community coalition not meet these requirements, they will be placed on high-risk status which could delay expense reimbursement, and/or affect future funding opportunities provided by the Kansas Department for Aging and Disability Services.

**Transitioning from Planning Grantee to Implementation Grantee**

Over the course of the year planning coalitions work will be accessed by the KPC team monthly ensuring that work is being met. Coalitions that are meeting their goals and have met the expectations with approval from the KPC and final decision will be informed that they will proceed to move into year 1 for implementation. The awarded Implementation grantees will enter a binding legal agreement between the Kansas Department for Aging and Disability Services and the awarded recipient. The agreement requires the awarded grantee to comply with specific grant criteria, which include mandatory trainings, weekly reporting, quarterly reports, monthly fiscal reports, and data collection.

**Note:** *Additional coalition-specific training and technical assistance events,* *virtually or on-site, may be scheduled in coordination with individual coalitions to select ideal dates, times, and locations.*

**Deliverables and Reporting**

* Community coalitions will be required to collect and report relevant National Outcome Measures (NOMs) which is data required for the State to report to the Federal Government.
  + NOMs - The Substance Abuse and Mental Health Services Administration (SAMHSA) has identified 10 domains for National Outcome Measures (NOMs). The domains embody meaningful, real-life outcomes for people who are striving to attain and sustain recovery, build resilience, and work, learn, live, and participate fully in their communities. The NOMs matrix represents the beginning of a state-level reporting system that, in turn, will create an accurate and current national picture of substance abuse and mental health services.
* To assist the State’s compliance with federal and community level evaluation requirements, grantees will participate in the Kansas Communities That Care (KCTC) Student Survey and achieve a 60% participation rate.
* Community coalitions will be expected to assess school district(s) in the area to be served as to whether there is an agreed-upon plan for the administration of the KCTC Student Survey. If not, the Community coalition will work with the KPC to develop an Action Plan to increase participation.
* Community coalitions will participate in the evaluation and sense-making, as directed, through documentation in the Community Check Box which will be submitted weekly on Fridays at the end of business or 5:00 p.m.
  + **CCB documentation-**The community check box is a tool for coalitions to document their activities they are doing in the community. Upon receiving ongoing training in the CCB where coalitions will learn how to document, it will be expected each week that coalitions are documenting their community activities-where this is reviewed by the KPC to ensure documentation is being entered in the CCB.
  + **Identifying population with BH Disparities-** Coalitions will use data to identify additional gaps of at least one 'at risk' population within their community and implement prevention strategies to reduce risk among the identified at-risk population taking into account diversity and health disparities with the intended goal to take a deeper dive into identifying populations of other diversities and ethnic backgrounds.

* Community coalitions will be required to submit quarterly reports and monthly budget reports as specified in the Notification of Award.
* Designated coalition members must demonstrate an ability to participate in **all** required training and technical assistance provided by the Kansas Prevention Collaborative. Training may be offered virtually or face to face. Funds may be used to assist with travel to and from these events. **(see section IV)**

**V. OVERVIEW OF GRANT AWARDS**

Planning grants will be $15,050 per community for one-year grantees. The number of awards will be based on the funds available.

**KPCCI Planning Grantees Training Dates**

General Overview of Trainings

Trainings are scheduled throughout the year facilitated by the KPC Team members assigned to the training event to help coalitions to accomplish the goals expected in their grant deliverables. The training is mandatory where we ask at least one person from the coalition to be present, but strongly suggest two members be present if possible. Dates, times, and locations are subject to change due to many contributing factors such as weather, and other unforeseen circumstances. Coalitions will be notified in a timely manner of any changes.

**\*\*\* Grantees will be expected to attend 4 days of SAPTS training**

**and asked to complete pre-work before attending SAPTS training**

**KPCCI Planning - Cohort VII Grantees (Some Dates TBD) Note:** *Additional coalition-specific training and technical assistance events,* *virtually or on-site, may be scheduled in coordination with individual coalitions to select ideal dates, times, and locations.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Training Event** | **Quarter** | **Date** | **Method** |
| Orientation and CCB (in person)  *Audience: Planning Grantees Required* | July-Sept (Q1) | July 13, 2022 | In-person |
| Substance Abuse Prevention Skills Training (in person)  *Audience: Planning Grantees Required* | July-Sept (Q1) | TBD – 8/29-9/22 | In-person |
| SPF Quarterly Training (individualized)  *Audience: Planning Grantees* | July-Sept (Q1) | TBD | At grantee location |
| Behavioral Health Disparities and Cultural Competence  *Audience: Planning and Implementation Grantees* | July-Sept (Q1) | September 13, 2022 | virtual |
| Community Check Box  *Audience: Planning Grantees* | July-Sept (Q1) | September 27, 2022 | virtual |
| SPF Quarterly Training (individualized)  *Audience: Planning Grantees* | Oct-Dec (Q2) | TBD | At grantee location |
| Sustainability (individualized)  *Audience: Planning and Implementation Grantees* | Jan-Mar (Q3) | TBD | At grantee location |
| SPF Quarterly Training (individualized)  *Audience: Planning Grantees* | Jan-Mar (Q3) | TBD | At grantee location |
| SPF Quarterly Training (individualized)  *Audience: Planning Grantees* | Apr-June (Q4) | TBD | At grantee location |
| Data and Evaluation Workshop (in person)  *Audience: Planning Grantees, Implementation Cohort 6 (Required), and Other Implementation Grantees (optional)* | Apr-June (Q4) | April 20, 2023 | In-Person |
| Sense-Making  *Audience: Planning Grantees* | Apr-June (Q4) | April 6, 2023 | Virtual |

**Grant Deliverables/Key Components:**

|  |  |  |
| --- | --- | --- |
| **SPF Step** | **Milestone/Key Product** | **Supports** |
| Step 1: Assessment | * Completion of community needs assessment   + data will be provided by KPC   + local community data (optional)   + other data sources (optional) * Cultural competence assessment * Components of logic model * Identify target area and target populations considering diversity and health disparities. | * Data * Technical Assistance * Learning Events |
| Step 2: Capacity | * Assess Coalition and Describe Readiness and Capacity * Demonstrate participation of 12 key sectors and/or plan for recruiting representatives * Mission and Vision Statement * Clear organizational structure with formalized leadership * Build capacity for evaluation |  |
| Step 3: Planning | * Memoranda of understanding with school districts for the Kansas Communities That Care (KCTC) survey participation * Complete logic model and action plans * Selection of evidence-based strategies tied to identified needs |  |
| Step 5: Evaluation (plan development) | * Timeline for evaluation * Monthly use of community checkbox to document steps of planning |  |

*Although all five steps of the Strategic Prevention Framework will be implemented, grantees will not be expected to place emphasis on Step Four: Implementation during the planning process.*

**Figure 2**

**12 Key Community Sectors as identified in the Drug-Free Communities Support Program**

1. Youth (18 or younger)
2. Parents
3. Business
4. Media
5. School
6. Youth-serving organizations
7. Law-enforcement agencies
8. Religious or Fraternal Organizations
9. Healthcare Professionals (i.e. doctors, nurses, substance abuse treatment providers)
10. State, Local, or Tribal Government Entities
11. Civic or Volunteer groups
12. Other organizations involved in reducing substance abuse

Community Coalitions will be **required** to engage in a multidisciplinary partnership committed to collaboratively work through each of the five steps of the SPF process identified community. To ensure diverse representation within SPF community coalitions, KDADS has elected to align the SPF award process with the 12- key community sectors required through the national Drug-Free Communities Support Program. This approach ensures the involvement of representatives from key community organizations and institutions who provide varying perspectives and interests in substance abuse prevention and related consequences.

Alignment with federal grant program requirements prepare Kansas communities to obtain additional resources to support and

sustain local efforts. The 12 sector representatives required as member participants in each community coalition funded through the KPC are provided in Figure 2.

**Community Plan**

Each community will submit a comprehensive plan to address targeted substance use, shared risk and protective factors, diversity and health disparities which includes a broad array of prevention strategies directed at individuals not identified to be in need of treatment.

Each community’s plan will be required to contain at a minimum the following components: All of the components below are important, however as recipients move through phase 2 each step will be assessed, reviewed by your DCCCA specialist and supported by the KPC team ensuring each step is met with the goal to move to the next step before the implementation year 2 phase. The 8 components are in alignment of what you recipients are expected to fulfill in their deliverables:

* Demographics
* Staffing patterns/Organizing Structures
* Logic model to address underage drinking and/or youth marijuana use, health disparities, low perceived risk of harm from substance use, and other prioritized risk/protective factors
* Action Plans for evidence-based strategies
* Cultural competency assessment and integration into action plan
* Evaluation plan
* Capacity development plan
* Sustainability plan

Upon successful completion of this Implementation Grant, grantees will then be eligible for a continuation award contingent upon budget, compliance, and performance. Continued funding will allow communities to continue to execute strategies identified in their plans and evaluate outcomes.

**VI. NOTIFICATION OF GRANT AWARDS**

## Awarded grantees will be notified via email before the grant start date July 1, 2022. The Kansas Prevention Collaborative partners will work closely with each of the grantees to initiate the implementation process. Community mobilizers will be required to participate in the learning events (virtual and/or in-person as determined).

## In addition, technical assistance will be provided throughout the implementation process. Community plans and supporting documents will be expected to be completed and approved by the Kansas Prevention Collaborative.

## Training/Technical Assistance Support

Each community coalition will receive substantial support from the Kansas Prevention Collaborative partners.

* KDADS prevention team will provide support to the grantee regarding compliance and fiscal management.
* Grantees will receive community support from DCCCA specialists who will provide guidance on training and technical assistance.
* Grantees will receive support from Greenbush with data and evaluation tools.
* Grantees will receive support and training from KU on reporting and documenting community activities.
* Grantees will receive support with communication through the KPC from WSU, which includes training events, workshops, etc.

The Kansas Prevention Collaborative partners will assist with tools and resources to ensure a successful outcome. Grantees will also have additional opportunities to attend training events to strengthen their coalition. While it is not required, it is encouraged to budget travel to PreventionWorKS meetings that are held quarterly. In addition, several online tools and resources are available to grantees to provide assistance with the completion of project milestones and work documents.

## Kansas Prevention Collaborative Resources

**PreventionWorKS** is a statewide Behavioral Health Prevention Coalition led by members of local community coalitions. One of the goals of PreventionWorKS is to connect coalitions across the state in a way that allows them to be resources and supports to one another. Participation in PreventionWorKS is strongly encouraged. This statewide coalition provides an opportunity for local coalitions to connect, share successes and lessons learned to strengthen statewide efforts. This coalition of coalitions is led by a steering committee comprised of community coalition members and other professionals. This peer led committee incorporates local level needs into the resources provided during these quarterly events.

**Prevention TalKS** is a monthly podcast that is offered and led by experts who address a variety of topics around Behavioral Health issues and other factors associated to prevention and promotion. These are not mandatory but strongly recommended to attend some throughout the year.

The annual Kansas Prevention Conference will be held on October 26-28, 2022, with the pre-conference being held on the 20th in Wichita, Kansas. Scholarships will be made possible to grantees who would like to attend the conference.

**VII. Application Instructions**

***Submission Information***

Applications and required documents shall be submitted via email by 5:00 p.m. CST on June 1, 2022.

The application must be arranged in the order indicated in the “Application Checklist.”

Applications must include all the components described in this section. Failure to submit an application that contains all the specified information may negatively affect the review of the application.

Applicants are required to be registered with SAM.gov (System Award Management) and hold a DUNS number at time of submission. This is a unique nine-digit identification number provided by Dun & Bradstreet. It may be obtained at no cost at the following website: <https://fedgov.dnb.com/webform/pages/CCRSearch.jsp> or by calling 866-705-5711. Verification of the DUNS number must be submitted as part of the funding proposal.

**Application & Required Documentation**

* Completed Applicant Information- (Attachment A) This is a standard form used for submission of proposals and related information. The Application page must be signed by an official authorized to sign.

* 501(c)(3) Verification as appropriate
* Current list of board members
* Budget Worksheet- (Attachment B) outlining how funds will be allocated. *(These are estimates and can be revised if awarded)* The Budget Worksheet and justification should thoroughly and clearly describe every category of expenses listed.
* Program Narrative- The program narrative must include the following sections:
* Community Description *(20 points)*
  + Community Capacity for Collaboration and Planning *(20 points)*
  + Cultural Competency *(20 points)*
  + Organizational Description *(20 points)*
* Tax Clearance Certificate

All applicants must submit a “Tax Clearance.” This is a comprehensive tax account review to determine and ensure that the account is compliant with all primary Kansas Tax Laws administered by the Kansas Department of Revenue, Director of Taxation. Information pertaining to a Tax Clearance is subject to change(s), which may arise as a result of a State Tax Audit, Federal Revenue Agent Report, or other lawful adjustment(s). This may take up to 24 hours to obtain. This is not the same as an entity being tax-exempt. **DO NOT SUBMIT YOUR TAX-EXEMPT CERTIFICATE.**

To obtain a Tax Clearance Certificate, you must:

* Go to <http://www.ksrevenue.org/taxclearance.html>to request a Tax Clearance Certificate
* Return to the website the following working day to see if KDOR will issue the certificate
* If issued an official certificate, print it or save and attach it to your signed renewal document
* If denied a certificate, contact the Kansas Department of Revenue, Director of Taxation about why a certificate wasn’t issued
* It may take up to 24 hours to obtain the certificate/tax clearance and are only valid for 30 days
* **Please note this is not the same as tax-exempt status**

**Program Narrative *(No template provided)***

**Instructions-** The narrative should describe the target community and the coalition’s capability to engage in comprehensive community-based strategic planning that will result in a plan to address substance use disorder as it relates to prevention efforts and identifying shared risk and protective factors, diversity and health disparities that will produce sustainable systems change. The following guidance outlines the elements the narrative requests.

Please use 12-point font and standard 1-inch margins. Headings for each section (1-4) should be clearly labeled. Applicants should clearly and comprehensively respond to each bullet within each of the sections described below.

1. **Community Description**
   * + - * Describe and define the community/geographical area served by the coalition that will be targeted by the efforts of this award.
   * Describe the challenges that address underage alcohol, marijuana use, and/or ATOD presents in your community.
   * List the coalition membership by sector in Figure 2.
2. **Community Capacity, Readiness, Mobilization, and Planning Efforts**

Coalitions identified staff is required to dedicate their time for the entire work and expected to fulfill the requirements of the RFA. It is important that those identified who will be contributing part-time efforts to this project that they manage out time to complete the deliverables.

* + Describe the coalition’s capacity to engage in community organizing.
    - Describe the ability to build on partnerships during the planning process.
    - Who will participate in the planning process, and how or what role?
  + Discuss your community coalition’s experience utilizing data to inform the decision making;
    - Describe any community needs assessment that has been done.
    - Describe both the readiness and capacity of your coalition to begin the planning phase.
  + Discuss what activities have been implemented to increase readiness and capacity, and discuss how the capacity and readiness for implementation will be increased during the planning phase.
  + Describe the community mobilization that was required for the coalition to apply for this funding opportunity.
  + Describe the coalition’s experience working with grants and with strategic planning.
  + Discuss any anticipated challenges or barriers and describe how those may be addressed.
  + List any coalition needs for training or technical assistance.

1. **Cultural Competency & Sustainability**

* Briefly describe the community’s culture and its diversity.
* Describe how your community coalition represents the cultural groups in your community and what changes are needed to ensure cultural competence and diverse engagement.
* Describe what will be required to improve cultural competency during the Implementation phase.
* Discuss how long your coalition has been involved in prevention and what other sources of funding your community provides to the coalition’s prevention efforts.

1. **Organizational Description**

* If the coalition is not the fiscal agency for this application, please identify the fiscal agent and their role in the project.
* Describe how the community coalition intends to structure its staffing and resources to ensure completion of all planning deliverables, including how the coalition plans to address any challenges, barriers, etc.
* Describe experience and capability in ensuring compliance with grant requirements including fiscal and progress reporting.

**VIII. Selection Process**

Applications will be evaluated according to the demonstrable capacity of the community coalition to create and implement a plan that produces community change. The community coalition must articulate its understanding of the challenges posed in addressing community-level factors related to underage drinking and/or marijuana use as well as shared risk and protective factors. Selection will also be given to those who demonstrate the willingness to support this grant and all key players involved. The quality and strength of the application narrative will also be considered. Grant applications will be reviewed based upon the following criteria.

|  |  |
| --- | --- |
| **APPLICATION COMPONENT** | ***Points Possible*** |
|  | |
| **Applicant Information & Required Documentation (Attachment A)**   * 501(c)(3) Verification as appropriate * List of Board Members and a Board Member Conflict of Interest Statement if a 501(c)(3) | **5** |
|  | |
| **Narrative** | **80** |
| *Community Description* | *20* |
| *Community Capacity for Collaboration and Planning* | *20* |
| *Cultural Competency* | *20* |
| *Organizational Description* | *20* |
|  |  |
| |  |  | | --- | --- | | **Budget Request (Comments/Summary)** | **15** | | **15** |
| **\*\*\* No Match is Required on Budget\*\*\*** |  |
| **TOTAL** | **100** |

**Application Checklist**

The following sections must be submitted in this order, in a combined pdf format

*(one complete document):*

Applicant Information (Attachment A)

501(c)(3) verification as appropriate (Applicant provides)

List of Board Members (Applicant provides)

Budget Request Comments/Summary (Attachment B) – “Must justify the cost in comment sections”

\_\_\_ Project Narrative (Applicant provides)

Tax Clearance Certificate (Applicant provides)

*Kansas Department for Aging and Disability Services views KPCCI community grant applicants and grantees as learning partners; while specific guidance, consultation, and deliverables have been identified by federal and state partners, much will be learned as community leaders engage in building sustainable capacity within targeted populations to infuse a prevention mindset into multiple disciplines. This will have a direct impact on attitudes, beliefs, and actions related to substance abuse prevention specific to their community****.*** *The Kansas Prevention Collaborative is committed to working mutually with community coalitions to provide clarity through email, telephone, or in-person, as needed. As part of its commitment to lead and foster learning, KDADS will strive to create an environment in which the expertise of community stakeholders is honored and supported through competent support both face-to-face and virtual settings*

****

**Attachment A – Applicant Information**

1. **Applicant Agency**

|  |  |
| --- | --- |
| Name |  |
| Address |  |
| City, St. Zip |  |
| Telephone |  |
| Email |  |
| Signature |  |

1. **Type of Agency**

|  |
| --- |
| ☐Public ☐Private Non-Profit ☐Private Profit |

1. **Official Authorized to Sign Application**

|  |  |
| --- | --- |
| 1. Name |  |
| Address |  |
| City, St. Zip |  |
| Telephone |  |
| Email |  |
| Signature |  |

**D.** **Project Director**

|  |  |
| --- | --- |
| 1. Name |  |
| Address |  |
| City, St. Zip |  |
| Telephone |  |
| Email |  |
| Signature |  |

**E.** **Fiscal Agent**

|  |  |
| --- | --- |
| 1. Name |  |
| Address |  |
| City, St. Zip |  |
| Telephone |  |
| Email |  |
| Signature |  |

*.*