FY 2026 – 2028
Opioid Settlement Funds
&
Financially Assisted Agencies
Behavioral Health & Substance Use Disorder NOFO
Applicant Technical Assistance Conference

March 12, 2025

Palm Beach County
Community Services Department

WELCOME

Please put questions in the chat to everyone
This meeting is being recorded

Behavioral Health & Substance Use Disorders
NOFO Bidders Conference
March 12, 2025
9:00-11:00 am

AGENDA

Welcome, Introductions & Overview

       John Hulick, Senior Program Manager, CSD

Overview of 2026 NOFO Process and Guidance

       Michael R. Wright, Contracts Manager, CSD

       Elena Klimenko, Contracts/Grants Coordinator, CSD

Overview of Behavioral Health Categories & Strategies (OSF)

       John Hulick, Senior Program Manager, CSD

Overview of Behavioral Health Categories & Strategies (FAA)

       Dr. Joanna Enoise, Manager of Planning and Evaluation, CSD

Outcomes Overview of ROMA Logic Model

       Dr. Joanna Enoise, Manager of Planning and Evaluation, CSD

Fiscal Overview of NOFO Budgets

       Thomas Eaton, Fiscal Manager, CSD

       Ginger Barao-Lew, Financial Analyst II, CSD

Overview NOFO Tips

       Michael R. Wright, Contracts Manager, CSD

Application Website Overview

       Elena Klimenko, Contracts/Grants Coordinator, CSD

Questions & Answers

Adjournment & Distribution of NOFO Invitation Code

Palm Beach County
COMMUNITY SERVICES
Helping People Build Better Communities

Overview of Behavioral Health & Substance Use Disorders

John Hulick, Senior Program Manager CSD

ADVANCING A RESILIENCE AND RECOVERY ECOSYSTEM OF CARE
ONE INITIATIVE, ONE INDICATOR AT A TIME

Behavioral Health and Substance Use Disorder Plan 2024

Palm Beach County Advisory Committee on Behavioral Health, Substance Use and Co-Occurring Disorders

> It is time we … stopped focusing on brief episodes of biopsychosocial stabilization. It is time for national, state, and local initiatives to create recovery-oriented systems of care that can promote this model of sustained recovery management.
>
> William L. White, MA
> *Recovery Management and Recovery Oriented Systems of Care: Scientific Rationale and Promising Approaches*

A. Overarching Priority Recommendations	
2022	**Status**
1. BCC enactment of ordinance designating lead entity granting it leadership, budget, planning and monitoring authority. 2. Advocate for policies and legislation which advance person-centered, recovery-oriented systems of care and essential services that meet individual's needs and are readily accessible and integrated. 3. Identify and provide sustainable resources (essential services) for individuals re-entering the community such as those provided through the Community Services Department's federal grant research project, Comprehensive Opioid, Stimulant, Substance Abuse Program (COSSAP). (Housing and peer support, care coordination, flex funds). 4. Implement person-centered, recovery-oriented system of care that is readily accessible and integrated inclusive of Neutral Care Coordination; Care Provider Network and Recovery Supports to ease transitions and continuity of care, remove barriers and improve long-term recovery outcomes.	1. C 2. IP 3. IP 4. IP
2024	
1. Recommendation to BCC that the County lead and/or support comprehensive planning process between SEFBHN, HCD and other community partners to drive alignment, coordination, shared commitments, shared accountability, and clarify roles and responsibilities.	

Behavioral Health and Substance Use Disorder Plan 2024

Palm Beach County Advisory Committee on Behavioral Health, Substance Use and Co-Occurring Disorders

It is time we … stopped focusing on brief episodes of biopsychosocial stabilization. It is time for national, state, and local initiatives to create recovery-oriented systems of care that can promote this model of sustained recovery management.

William L. White, MA
Recovery Management and Recovery Oriented Systems of Care: Scientific Rationale and Promising Approaches

Mission

To ensure access to individualized person-centered, recovery-oriented care and supports through integrated and coordinated services using a "no-wrong door" approach for all Palm Beach County residents in need.

Vision

To have a fully integrated and coordinated person-centered, recovery-oriented system of care that employs neutral care coordination and recovery as well as peer supports that focus on:

- Individual needs and assessment of each person holistically.
- Evaluation of personal resiliency and risk factors utilizing recovery capital indexing.
- Strength-based, accessible and available services to any person seeking improved outcomes for mental illness, substance use and/or co-occurring disorders.

ADVANCING A RESILIENCE AND RECOVERY ECOSYSTEM OF CARE ONE INITIATIVE, ONE INDICATOR AT A TIME

- Programs and services provided within the County's Resilience and Recovery Ecosystem of Behavioral Health and Substance Use Disorder Care

- Emphasizes resilience and social determinants of health with the aim toward building resilient and recovery-ready individuals and communities

- Clear system of care path that is person-centered and recovery-oriented care.

- Focused on improved long-term recovery outcomes and increased resiliency rather than solely on acute- and crisis-centric care.
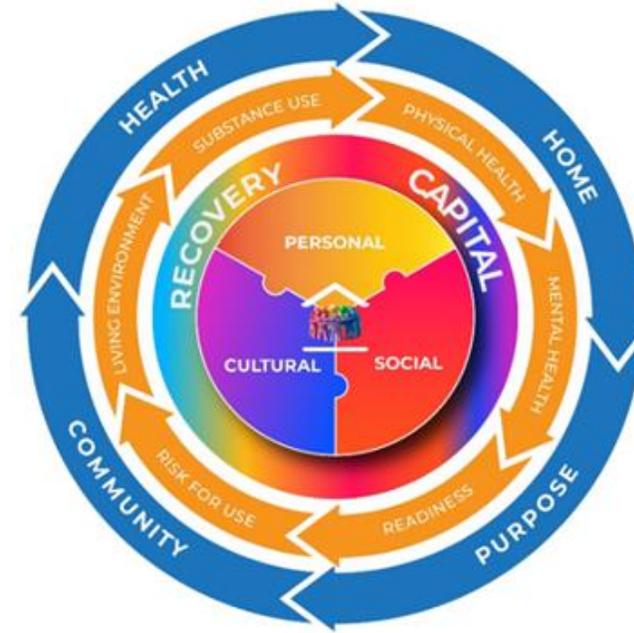
- **Macro level** is concerned with interaction and interdependence of individuals with their surrounding physical, social, and cultural systems.
- **Meso level** provides a non-conflicted entity serving as a single point of contact providing assessment, level of care determination.
- **Micro level** aims to increase an individual's recovery capital through network of "recovery hubs" and other support services providing nonclinical resources.

ADVANCING A RESILIENCE AND RECOVERY ECOSYSTEM OF CARE
ONE INITIATIVE, ONE INDICATOR AT A TIME

Personal Capital	Social Capital	Cultural Capital
General Health	Family Support	Beliefs
Mental Wellbeing	Significant Other	Spirituality
Nutrition	Social Support	Sense of Purpose
Employment	Social Mobility	Cultural Relevance
Education	Healthy Lifestyle	Sense of Community
Housing Situation	Access to Healthcare	Values
Transportation	Safety	
Clothing		
Financial		

5 Indicators of Resilience	Avg.
Sense of Purpose	79.0
Beliefs	74.36
Safety	70.27
Healthy Lifestyle	70.06
Values	69.64

5 Indicators of Risk	Avg.
Financial Wellbeing	39.87
Employment	48.46
Housing/Living Situation	50.42
Transportation	53.75
Access to Healthcare	54.98

Domains	Avg.
Cultural Capital	71.73
Social Capital	62.96
Personal Capital	55.26
Total RCI	63.32

Measure initiatives through a resilience and recovery capital framework because of its ability to capture resilience, health, well-being, social determinants of health, and risk factors.

- Social Capital domain shows the highest correlation with changes in Total RCI scores, suggesting that improvements in social relationships and support systems are strongly linked to overall recovery capital growth.
  - "Social Network" indicator is particularly influential,
- Personal Capital domain shows a high correlation with Total RCI changes, emphasizing the role of personal well-being, including mental and emotional health, education, and employment.

FAA NOFO Process
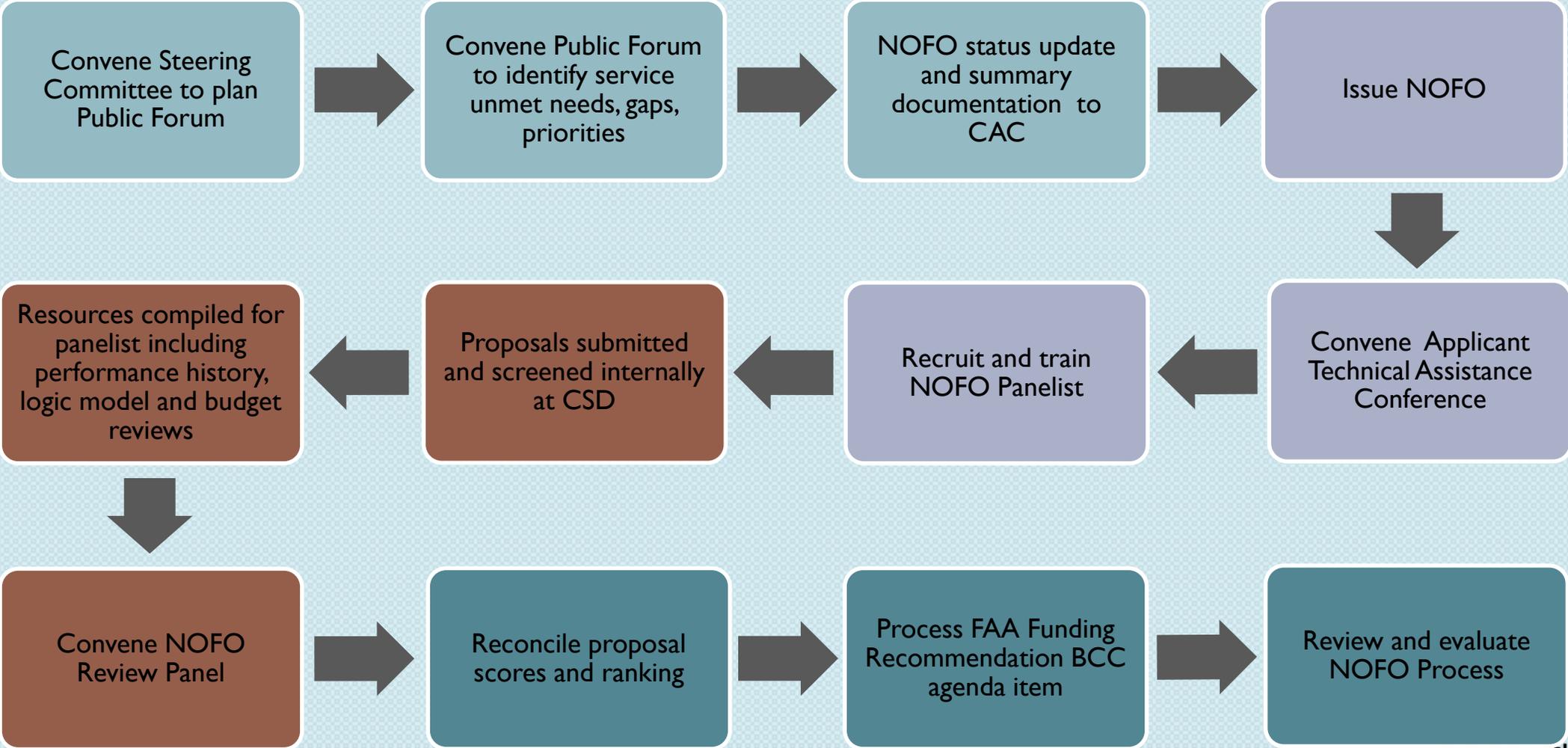
CONE OF SILENCE

This NOFO includes a Cone of Silence. The Cone of Silence will apply from the date the NOFO is due, which is April 7, 2025, until the final FAA contracts are approved by the Board of County Commissioners.

Respondents are advised that the "Palm Beach County Lobbyist Registration Ordinance" (Ordinance), a copy of which can be accessed at: http://www.pbcgov.com/legislativeaffairs/pdf/Lobbyist_Registration_Ordinance.pdf is in effect. The Respondent shall read and familiarize themselves with all of the provisions of said Ordinance, but for convenience, the provisions relating to the Cone of Silence have been summarized here. **"Cone of Silence" means a prohibition on any non-written communication regarding this RFP between any Respondent or Respondent's representative and any County Commissioner or Commissioner's staff, any member of a local governing body or the member's staff, a mayor or chief executive officer that is not a member of a local governing body or the mayor or chief executive officer's staff, or any employee authorized to act on behalf of the commission or local governing body to award a contract.** A Respondent's representative shall include but not be limited to the Respondent's employee, partner, officer, director or consultant, lobbyist, or any, actual or potential subcontractor or consultant of the Respondent.

The Cone of Silence is in effect as of the submittal deadline. The provisions of this Ordinance shall not apply to oral communications at any public proceeding, including pre-bid conferences, oral presentations before selection committees, and contract negotiations during any public meeting. The Cone of Silence shall terminate at the time that the BCC awards or approves a contract, rejects all proposals or otherwise takes action which ends the solicitation process.

Ethics Commission
If anyone has a question regarding ethics they should not be addressed to our Department, but should be addressed directly with the Ethics Commission – http://www.palmbeachcountyethics.com/

BEHAVIORAL HEALTH & SUBSTANCE USE DISORDERS
Notice of Funding Opportunity Timeline

DATE	ITEM	RESPONSIBLE
March 7, 2025	OSF and FAA Behavioral Health NOFO Release Day - Available for Public	CSD
March 12, 2025	Applicant Technical Assistance Conference 9:00 AM EST	CSD Applicants
March 25, 2025	Behavioral Health NOFO Reviewer Training 9:00 AM EST	CSD Reviewers
April 4, 2025	Final day to submit written questions 12:00 PM (Noon) EST	Applicants
April 7, 2025	**OSF and FAA NOFO PROPOSAL SUBMISSION DEADLINE – 12:00 PM (NOON) EST**	**Applicants**
April 7, 2025	Cone of Silence Begins for OSF and FAA NOFO	CSD, Applicants, Reviewers, BCC
April 22, 2025	Community Education and Engagement Subcategory: Recovery and Family Supports Review Panels meeting to score and rank proposals	CSD Reviewers
April 23, 2025	Community Education and Engagement Subcategory: Resilient and Recovery Ready Communities, SBIRT, and Community Drug Disposal Review Panels meeting to score and rank proposals	CSD Reviewers
April 24, 2025	OSF and FAA Deep-End Treatment: Inpatient Residential, Crisis Stabilization, Medical Detox, Inpatient/Residential Services Review Panels meeting to score and rank proposals	CSD Reviewers

BEHAVIORAL HEALTH & SUBSTANCE USE DISORDERS
Notice of Funding Opportunity Timeline

April 25, 2025	Support Services: Crisis Support (Mobile Services), Case Management/Care Coordination, Peer Support, Housing Supporting Services, Supportive Employment Panels meeting to score and rank proposals	CSD Reviewers
May 1, 2025	Community-Based Treatment and Services: Outpatient Services, In-home or Onsite Day Treatment Panels meeting to score and rank proposals	CSD Reviewers
May 2, 2025	Backup OSF and FAA NOFO PROPOSAL Review Panel Scoring and Ranking Session	CSD Reviewers
May 2, 2025	Staff reconciles review panel scoring, ranking, and funding availability to develop recommended allocations	CSD
May 8, 2025	Staff posts scoring results on Webpage	CSD
May 8, 2025	Presentation of OSF and FAA Funding Recommendations to CAC	CSD CAC
May 18, 2025	Final date to file a Funding Grievance	Applicants
July 8, 2025	Presentation of FY 2026-2028 OSF and FAA Funding Recommendations to BCC for Approval	CSD BCC
September 9, 2025	OSF (Retroactive start date August 1, 2025) and FAA Contracts Presented to the BCC for Approval (Start date October 1, 2025)	CSD BCC
September 9, 2025	Cone of Silence Ends for OSF and FAA NOFO	CSD, Applicants, Reviewers, BCC

Opioid Settlement Funds Funding Allocation

Category	Sub Category	Estimated Funds Available
Recovery Supports		
Focus Population: Young Adults, Adults, and Families		$1,000,000.00
Community Education and Engagement Category		
Focus Population: Young Adults, Adults, and Families	Family Supports	$1,000,000.00
	Community Engagement/Recovery Ready Communities	$1,000,000.00
	SBIRT	$350,000.00
	Community Drug Disposal	$150,000.00
	Subtotal	**$3,500,000.00**
Deep-End Treatment Category		
Focus Population: Women, pregnant and parenting women	Inpatient, Residential, Residential-Levels 1, 2, and 4, Room and Board-Levels 2 and 3	$775,745.00
	Subtotal	$775,745.00
	TOTAL	**$4,275,745.00**

* Funding availability/recommendations are subject to BCC approval

Financially Assisted Agencies Funding Allocation

Category	Sub Category	Estimated Funds Available
Support Services Category **Focus Population:** Young Adults, Adults, and Families	Crisis Support	
	Case Management/Care Coordination	
	Peer Support	
	Housing Supportive Services	
	Supportive Employment	
Community-Based Treatment and Services Category **Focus Population:** Young Adults, Adults, and Families	Outpatient Services (Counseling/Therapy Services, Non-Residential (this service only includes adolescents age 15-18 in the focus population), Psychiatric care & Medication Management, Support groups, Medication Assisted Therapy)	
	In-home or Onsite Day Treatment	
Deep-End Treatment Category **Focus Population:** Adolescents, Young Adults, Adults, and Families	Crisis Stabilization	
	Medical Detox	
	Inpatient/ Residential Services	
CQM Projects (5% of program budget)		
FAA TOTAL		**$5,439,539**

* Funding availability/recommendations are subject to BCC approval

Overview of Behavioral Health & Substance Use Disorders
Categories & Sub-Categories
Opioid Settlement Funds

John Hulick, Senior Program Manager CSD

OSF
Behavioral Health and Substance Use Disorders Categories

- Recovery Supports Category
- Community-Education an Engagement Category
    - Family Supports
    - Community Engagement/Recovery Ready Communities
    - SBIRT
    - Community Drug Disposal
- Deep-End Treatment

Priority Population:
- Marginalized communities will receive priority consideration within the following areas: Tri-city Glades, Riviera Beach, West Palm Beach, Lake Worth Beach, Delray Beach. Marginalized groups include racial and ethnic communities, LGBTQIA+ individuals, those living in poverty, and people with disabilities who face disproportionately high rates of substance use and behavioral health disorders.
- Entering into collaborative partnerships through MOUs or MOAs that are directly connected to the proposal and that start at the beginning with planning and developing the proposal will be given more weight within this prioritized population. This type of collaborative partnership would include joint planning and mentoring throughout the process of preparation and implementation.

The initial contract period is August 1, 2025 – September 30, 2025

2 CFR applies and Admin Expenses are limited to 5%

STRATEGIES – OSF / RECOVERY SUPPORTS

Expand interventions deployed by County's COSSUP project to populations beyond criminal-justice involved individuals to include peer support, care coordination as well as financial support for situational-related expenses.

- Focus on Social Determinants of Health, resilience and risk factors

Outcome	Increase the resilience of program Participants.
Indicator (Year 1)	60% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.
(Year 2 & 3)	70% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.

Outcome	Participants will be provided a referral to a Recovery Community Centers.
Indicator (Year 1)	60% of Participants will be provided a referral to a Recovery Community Center.
(Year 2 & 3)	70% of Participants will be provided a referral to a Recovery Community Center.

Outcome	Participants will complete an individualized recovery plan.
Indicator (Year 1)	60% of Participants will have achieved at least two goals identified in a completed individualized recovery plan.
(Year 2 & 3)	70% of Participants will have achieved at least two goals identified in a completed individualized recovery plan.

Outcome	Participants will remain engaged in services.
Indicator (Year 1)	60% of Participants will remain engaged in services for program duration.
(Year 2 & 3)	70% of Participants will remain engaged in services for program duration.

STRATEGIES – OSF / COMMUNITY EDUCATION & ENGAGEMENT / FAMILY SUPPORTS

Provide community-based supports to families experiencing a family members' substance use or co-occurring disorder, particularly for parents or grandparents who face a variety of emotional, legal and daily living challenges as they unexpectedly find themselves in the position of raising a second family.

Outcome	Increase the resilience of Families.
Indicator (Year 1)	60% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.
(Year 2 & 3)	70% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.

Outcome	Participants will complete an individualized support plan.
Indicator (Year 1)	60% of Participants will have completed an individualized support plan and achieved at least two goals identified in the plan.
(Year 2 & 3)	70% of Participants will have completed an individualized support plan and achieved at least two goals identified in the plan.

Outcome	Participants will remain engaged in services.
Indicator (Year 1)	60% of Participants will remain engaged in services for program duration.
(Year 2 & 3)	70% of Participants will remain engaged in services for program duration.

Outcome	Participants will be provided a referral to a Recovery Community Centers.
Indicator (Year 1)	60% of Participants will be referred to a Recovery Community Center.
(Year 2 & 3)	70% of Participants will be referred to a Recovery Community Center.

STRATEGIES – OSF / COMMUNITY EDUCATION & ENGAGEMENT / COMMUNITY ENGAGEMENT/ RECOVERY READY COMMUNITIES

Provide community education and engagement activities that develop relationships, strategic partnerships, and collaborative agreements which will enable diverse groups to work together to address substance use and co-occurring disorder-related issues.

- Strengthen community member and community resilience and capacity at addressing substance use or co-occurring disorder and enable community members and local residents to make informed choices.
- Needs led and provided in a manner that builds community members and local residents strengths.

Outcome	Communities will be resilient and recovery ready.
Indicator	Community-based initiatives will be facilitated in a minimum of 20 municipalities that will encourage the development of resilient and recovery ready communities by September 30, 2027.

Outcome	Increased resilience at the Community level.
Indicator	Communities will increase resilience factor scores by at least one (1) point, and reduce risk factor scores by at least one (1) point, as determined by an analysis of community resilience/ recovery indexing in each of the fiscal years.

Outcome	Improve the knowledge and perception about mental illness and substance use disorder, harm reduction.
Indicator	Individuals will improve knowledge and perception about mental illness and substance use disorder, and about harm reduction as evidenced by an increased score of at least 75% following training as measured by a pre-post assessment.

STRATEGIES – OSF / COMMUNITY EDUCATION & ENGAGEMENT / SCREENING, BRIEF INTERVENTION, REFER TO TREATMENT (SBIRT)

Implement the SBIRT public health model for individuals in various primary and behavioral health settings to identify and treat those who use alcohol and other drugs at risky levels.

Outcome	Increase the number of Primary and Behavioral Health Providers utilizing SBIRT.
Indicator	Increase number of Providers utilizing SBIRT by a minimum of 20 from baseline survey in each of the fiscal years.
Indicator	90% of individuals screened through SBIRT that have been identified as having risky substance use behaviors are referred for further assessment.

COMMUNITY EDUCATION & ENGAGEMENT / COMMUNITY DRUG DISPOSAL

Enhance and expand drug disposal programs in order to accept expired, unwanted, or unused medicines from designated users and dispose of them responsibly.

Outcome	Increase the number of collection sites.
Indicator	Increase the number of new collection sites by 10% from baseline in each fiscal year.

Outcome	Increase the number of unused prescription drugs collected in the fiscal year.
Indicator	Increase the number of pounds of unused prescription drugs collected by 10% from baseline in each fiscal year.

STRATEGIES – OSF / DEEP-END TREATMENT

Deep-End Treatment includes: Inpatient, Residential, Residential-Levels 1, 2, and 4, Room and Board-Levels 2 and 3.

Priority population: Women, pregnant and parenting women.

Outcome	Increase resilience of women, pregnant and parenting women.
Indicator (Year 1)	60% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.
(Year 2 & 3)	70% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.

Outcome	Participants will complete an individualized treatment plan and an individualized recovery plan.
Indicator (Year 1)	60% of Participants will have achieved at least two goals identified in a completed individualized treatment plan and an individualized recovery plan.
(Year 2 & 3)	70% of Participants will have achieved at least two goals identified in a completed individualized treatment plan and an individualized recovery plan.

Outcome	Participants will remain engaged in services.
Indicator (Year 1)	60% of Participants will remain engaged in services for program duration.
(Year 2 & 3)	70% of Participants will remain engaged in services for program duration.

Outcome	Participants will be provided a warm hand-off to a Recovery Community Center.
Indicator (Year 1)	60% of Participants will be provided a warm hand-off to a Recovery Community Center.
(Year 2 & 3)	70% of Participants will be provided a warm hand-off to a Recovery Community Center.

Overview of Behavioral Health & Substance Use Disorders
Categories & Sub Categories
Financially Assisted Agencies

Dr. Joanna Reid- Enoise, Manager of Planning and Evaluation, CSD

Palm Beach County
COMMUNITY
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FAA Behavioral Health and Substance Use Disorders Category

Substance Use and Behavioral Health Disorders Service Category for FAA funding includes services and interventions necessary to assist young adults (ages 19-24), adults, and families who are experiencing behavioral health, mental health, substance use disorder, co-occurring psychiatric and substance use disorders that impair overall functioning and affect quality of life. Services within the Substance Use and Behavioral Health Disorders Service Category are:

- Support Services
- Community-Based Treatment and Services
- Deep-End Treatment

Priority Population:
- Marginalized communities will receive priority consideration within the following areas: Tri-city Glades, Riviera Beach, West Palm Beach, Lake Worth Beach, Delray Beach. Marginalized groups include racial and ethnic communities, LGBTQIA+ individuals, those living in poverty, and people with disabilities who face disproportionately high rates of substance use and behavioral health disorders.
- Entering into collaborative partnerships through MOUs or MOAs that are directly connected to the proposal and that start at the beginning with planning and developing the proposal will be given more weight within this prioritized population. This type of collaborative partnership would include joint planning and mentoring throughout the process of preparation and implementation.

Support Services Category

- Intervention methods incorporating and emphasizing the **Social Determinants of Health (SDoH)**
- Providing non-clinical supportive services is an integral part of supporting clients through recovery, improving health outcomes, and reducing the likelihood of relapse or recidivism.
- This service category aims to provide support services to individuals who may have substance use and/or behavioral health disorders through nonclinical services, including peer support, linkages to housing, employment and job training, and social and recreational activities intended for people in or seeking recovery.

Support Services Subcategories

- Crisis Support (i.e., Mobile Support)
- Case Management/Care Coordination
- Peer Support
- Housing Supportive Services (Support Services Only, Not dwelling)
- Supportive Employment

Population- Young Adults, Adults, Families

Community-Based Treatment & Services Category

This service category aims to provide community-based treatment & Services to individuals who may have substance use and/or behavioral health disorders through clinical services

Community-Based Treatment & Services Subcategories

- Outpatient Services (Counseling/Therapy Services, Non-Residential*, Psychiatric care & Medication Management, Support groups, MAT/MAR)
- In-home or Onsite Day Treatment (including Partial Hospitalization Programs (PHP), Intensive Outpatient Programs (IOPs))

Population- Young Adults, Adults, Families

*Includes Adolescents ages 15-18

Deep-End Treatment Services

This service category aims to provide community-based treatment & Services to individuals who may have substance use and/or behavioral health disorders through clinical services

Deep-end Treatment

- Crisis Stabilization*
- Medical Detox*
- Inpatient/Residential*

Population- Young Adults, Adults, Families

*Includes Adolescents ages 15-18

Outcomes Overview of ROMA Logic Model and Evaluation Plan

Dr. Joanna Reid-Enoise, Manager of Planning and Evaluation, CSD

Behavioral Health Outcomes and Tools

Measurement Tools

The RCI is expected to be utilized with the Young Adult and Adult population experiencing substance use and/or co-occurring disorders and should only be administered once the Individual is stable enough to be able to complete the Survey instrument.

Outcomes

Program Outcomes are required in the logic models. By submitting a proposal, the Applicant Agency agrees to address and measure the outcomes noted in this NOFO Guidance document. Additionally, Applicants are to provide at least one appropriate indicator per outcome in each proposal submitted.

Data Collection and Tools

Applicant Agencies serving individuals with Substance Use and Co-Occurring Disorders must agree to utilize and adhere to protocols for on-going use of the RCI to measure resiliency (recovery) capital.

Applicant Agencies serving Individuals are required to administer Satisfaction Surveys, at minimum, at the time of discharge. Survey results are to be reported on a rolling quarterly basis via email to the Grant Compliance Specialist for OSF and the Grants Coordinator for FAA.

Applicant Agencies are required to submit utilization and outcomes reports quarterly via email to the Grant Compliance Specialist for OSF and the Grants Coordinator for FAA and as an attachment to Agency's quarterly invoices.

Behavioral Health Outcomes and Tools

Data Software

Applicant Agencies applying for FAA funding will be required to enter data into the Client Management Information Services/ Homeless Management Information Services Software. Applicant Agencies who are currently using CARISK for the same program that they are applying for will be exempt from using the county data software.

Applicant Agencies applying for FAA or OSF funding will be required to register on the OSCARSS system and utilize the Resource & Referral Portal.

Support Services Outcomes

Crisis Support - Mobile Crisis

Outcome	Individuals remain in the community.
Indicator	60 % of Individuals who have received mobile crisis intervention have not received services for the same crisis within 90 days from the previous crisis intervention.
Indicator	% of Individuals receiving mobile crisis intervention who had their crisis resolved in the community.

Case Management / Care Coordination

Outcome	Participants will increase resilience.
Indicator	60% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.

Outcome	Individuals will be successfully linked to services through care coordination in the fiscal year.
Indicator (Year 1)	60% of Individuals will be successfully linked to services through care coordination through the Resource & Referral Portal.
(Year 2 & 3)	70% of Individuals will be successfully linked to services through care coordination through the Resource & Referral Portal.

Support Services Outcomes

Peer Supports

Outcome	Increase the resilience of program Participants.
Indicator (Year 1)	60% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.
(Year 2 & 3)	70% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.

Outcome	Participants will remain engaged in services.
Indicator (Year 1)	60% of Participants will remain engaged in services for program duration.
(Year 2 & 3)	70% of Participants will remain engaged in services for program duration.

Outcome	Participants will complete an individualized recovery plan.
Indicator (Year 1)	60% of Participants will have achieved at least two goals identified in a completed individualized recovery plan.
(Year 2 & 3)	70% of Participants will have achieved at least two goals identified in a completed individualized recovery plan.

Outcome	Participants will be provided a referral to a Recovery Community Center.
Indicator (Year 1)	60% of Participants will be provided a referral to a Recovery Community Center.
(Year 2& 3)	70% of Participants will be provided a referral to a Recovery Community Center.

Support Services Outcomes

Housing Supportive Services

Outcome	Individuals will remain stably housed for at least 6 months after receiving services.
Indicator (Year 1)	40% of Participants will remain stably housed for at least 6 months after receiving services.
(Year 2 & 3)	50% of Participants will remain stably housed for at least 6 months after receiving services.

Outcome	Increase the resilience of program Participants.
Indicator (Year 1)	60% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.
(Year 2 & 3)	70% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.

Support Services Outcomes

Supportive Employment

Outcome	Individuals will be employed at least 6 months after receiving services.
Indicator (Year 1)	50% of individuals will obtain employment at least 6 months after receiving services
(Year 2 & 3)	60% of individuals will obtain employment at least 6 months after receiving services

Outcome	Increase the resilience of program Participants.
Indicator (Year 1)	60% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.
(Year 2 & 3)	70% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.

Support Services Outcomes

Housing Supportive Services

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(Year 2 & 3)	70% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.

Community-Based Treatment & Services Outcomes

Outpatient (Counseling/Therapy) and Non-Residential Services

Outcome	Increase the resilience of program Participants.
Indicator (Year 1)	60% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.
(Year 2 & 3)	70% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.

Outcome	Participants will remain engaged in services.
Indicator (Year 1)	60% of Participants will remain engaged in services for program duration.
(Year 2 & 3)	70% of Participants will remain engaged in services for program duration.

Outcome	Participants will complete an individualized treatment plan and an individualized recovery plan.
Indicator (Year 1)	60% of Participants will have achieved at least two goals identified in a completed individualized treatment plan and an individualized recovery plan.
(Year 2 & 3)	70% of Participants will have achieved at least two goals identified in a completed individualized treatment plan and an individualized recovery plan.

Outcome	Participants will be provided a warm hand-off to a Recovery Community Centers.
Indicator (Year 1)	60% of Participants will be provided a warm hand-off to a Recovery Community Center.
(Year 2 & 3)	70% of Participants will be provided a warm hand-off to a Recovery Community Center.

Community-Based Treatment & Services Outcomes

Medication Assisted Therapy

Outcome	Increase the resilience of program Participants.
Indicator (Year 1)	60% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.
(Year 2 & 3)	70% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.

Outcome	Participants will comply with medication protocols when using MAT for at least 6 months.
Indicator	70% of Participants will comply with medication protocols when using MAT programs for at least 6 months.

Community-Based Treatment & Services Outcomes

Psychiatric Care & Medication Management

Outcome	Increase the resilience of program Participants.
Indicator (Year 1)	60% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.
(Year 2 & 3)	70% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.

Outcome	Participants will remain in the community for at least 6 months.
Indicator	60% of Participants will remain in the community for at least 6 months.

Community-Based Treatment & Services Outcomes

Support Groups

Outcome	Increase the resilience of program Participants.
Indicator (Year 1)	60% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.
(Year 2 & 3)	70% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.

In home- or On-site Day Treatment

Outcome	Increase the resilience of program Participants.
Indicator (Year 1)	60% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year. .
(Year 2 & 3)	70% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.

Community-Based Treatment & Services Outcomes

Support Groups

Outcome	Increase the resilience of program Participants.
Indicator (Year 1)	60% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.
(Year 2 & 3)	70% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.

In home- or On-site Day Treatment

Outcome	Increase the resilience of program Participants.
Indicator (Year 1)	60% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year. .
(Year 2 & 3)	70% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.

Community-Based Treatment & Services Outcomes

Non- Residential Services for Adolescents

Outcome	Increase the resilience of program Participants.
Indicator (Year 1)	60% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.
(Year 2 & 3)	70% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.

Outcome	Participants will complete an individualized treatment plan and an individualized recovery plan.
Indicator (Year 1)	60% of Participants will have achieved at least two goals identified in a completed individualized treatment plan and an individualized recovery plan.
(Year 2 & 3)	70% of Participants will have achieved at least two goals identified in a completed individualized treatment plan and an individualized recovery plan.

Outcome	Participants will remain engaged in services.
Indicator (Year 1)	60% of Participants will remain engaged in services for program duration.
(Year 2 & 3)	70% of Participants will remain engaged in services for program duration.

Deep-End Treatment Services Outcomes

Crisis Stabilization

Outcome	Participants will be successfully transitioned to an appropriate level of care.
Indicator (Year 1)	60% of Participants will successfully transition to an appropriate level of care.
(Year 2 & 3)	70% of Participants will successfully transition to an appropriate level of care

Medical Detox

Outcome	Participants will be successfully transitioned to an appropriate level of care.
Indicator (Year 1)	60% will successfully transition to an appropriate level of care.
(Year 2 & 3)	70% will successfully transition to an appropriate level of care.

Deep-End Treatment Services Outcomes

In-patient/Residential Services for Young Adults and Adults

Outcome	Increase the resilience of Participants.
Indicator (Year 1)	60% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year. .
(Year 2 & 3)	70% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year. .

Outcome	Participants will remain engaged in services.
Indicator (Year 1)	60% of Participants will remain engaged in services for program duration.
(Year 2 & 3)	70% of Participants will remain engaged in services for program duration.

Outcome	Participants will complete an individualized treatment plan and an individualized recovery plan.
Indicator (Year 1)	60% of Participants will have achieved at least two goals identified in a completed individualized treatment plan and an individualized recovery plan.
(Year 2 & 3)	70% of Participants will have achieved at least two goals identified in a completed individualized treatment plan and an individualized recovery plan.

Outcome	Participants will be provided a warm hand-off to a Recovery Community Center.
Indicator (Year 1)	60% of Participants will be provided a warm hand-off to a Recovery Community Center.
(Year 2 & 3)	70% of Participants will be provided a warm hand-off to a Recovery Community Center.

Deep-End Treatment Services Outcomes

In-patient/Residential Services for Adolescents

Outcome	Increase the resilience of Participants.
Indicator (Year 1)	60% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to last recorded RCI within the fiscal year.
(Year 2 & 3)	70% of Participants will increase their resilience factor scores by one (1) point and reduce their risk factor scores by at least one (1) point as determined by an analysis of individual resilience/ recovery indexing in each of the fiscal years.

Outcome	Participants will remain engaged in services.
Indicator (Year 1)	60% of Participants will remain engaged in services for program duration.
(Year 2 & 3)	70% of Participants will remain engaged in services for program duration.

Outcome	Participants will complete an individualized treatment plan and an individualized recovery plan.
Indicator (Year 1)	60% of Participants will have achieved at least two goals identified in a completed individualized treatment plan and an individualized recovery plan.
(Year 2 & 3)	70% of Participants will have achieved at least two goals identified in a completed individualized treatment plan and an individualized recovery plan.

Logic Model

ROMA Logic Model – Please use format found in WebAuthor

Identified Problem, Need or Situation	Service or Activity	Outcome General statement of results expected	Projected Indicator # to achieve/# to be served; %; time frame	Actual Indicator # achieved/# served; %; time frame	Measurement Tool	Data Procedures	Frequency Data Collection and Reporting
Clients with BH, SUD, and/or Co-occurring need secure employment	• Supportive Employment • Employment Trainings • Job search	Individuals will be employed at least 6 months after receiving services.	50% of individuals will obtain employment at least 6 months after receiving services	DO NOT FILL OUT FOR APPLICATION	Paystubs, Employment letter	Job Coach will provide one-on-one services to Clients. A skills test will be administered. Based on the results Client will work on goals-setting with Employment Coach. Once Client is ready for employment, coach will help search employment and track client progress in Client file.	Client progress and goals will be reviewed every 60 days. All Clients will be tracked and results will be submitted at Quarter Report deadline.

Mission: Your Agency Mission

Keys to Creating A Good Logic Model/Evaluation Plan

Read The Description For Each Section

Use Specific & Concise Bullet Points

Provide Only What Is Asked For In Each Section

Continuous Quality Management Projects (CQM)

Applicant Agencies applying for OSF and FAA funding will be required to submit a Continuous Quality Management Project. This CQM submission is not a scored section.

Quality Management is a systematic, structured, and continuous approach to meet or exceed established professional standards and user expectations. Quality management is implemented by using tools and techniques to measure performance and improve processes through three main components: quality infrastructure, performance measurement, and quality improvement.

Potential Proposals Topics

Category- Support Services
• Methods of improving participant resiliency using the RCI Tool

Category- Community Based-Treatment Services
• Methods of improving participant resiliency using the RCI Tool

Category- Deep-End Treatment
• Development of a Palm Beach County Deep-End Treatment Daily Bed Utilization

Budgets

- Initial Submission with NOFO
  - Project program expenses to the best of your knowledge
  - Include proposed funding for this program and any other proposed or confirmed funding sources that may share the program's expenses
- Update with final award amount at contracting
- Examples on next slide

- NOTE: OSF Admin Expenses are limited to 5%

Budget Template – Program Expenses

FY 2026 PROGRAM BUDGET WORKSHEET

PBCCSD Funded Budget Items	Proposed Program Name	Palm Beach County Program	PBC Program Funder #2	PBC Program Funder #3	PBC Program Funder #4	Total Program Funding (All Sources)
Program Period: FY 2026		Proposed	Confirmed	Pending	Pending	Pending
TOTAL PROGRAM FUNDING AMOUNT =		$ 115,595.00	$ 45,000.00	$ 17,500.00	$ 7,500.00	$ 185,595.00
Program Expenses	**Narrative**	**Amount**	**Amount**	**Amount**	**Amount**	**Amount**
Personnel		$ 72,445.00	$ 45,000.00	$ 17,500.00	$ 7,500.00	$ 142,445.00
Program Manager	Program manager position for community support service. Salary expense is 100% funded by PBC FAA award and includes fringe benefits.	$ 25,000.00	$ 30,000.00			$ 55,000.00
Program Assistant	Program Assistant role is to support the program manager and community educator with daily tasks. This salary expense is 50% funded by PBC FAA award. Total salary expense is $15,000 , with 50% allocated to PBC ($7,500). (Salary expense does not include fringe benefits)	$ 7,500.00	$ 15,000.00	$ 7,500.00	$ 7,500.00	$ 37,500.00
Fringe Benefits - Program Assistant	Fringe benefits expense for Program Assistant. Fringe benefits for this position total ($1,800), with 50% allocated to Palm Beach County FAA in the amount of $900.	$ 900.00				$ 92,500.00
Community Educator	Community Educator position is the primary interface with local schools, charities and support groups. Total Salary (including fringe benefits) billed to Palm Beach County FAA = $39,045	$ 39,045.00		$ 10,000.00		$ 49,045.00

- Simplified and easier to use
- No macros
- Includes clearly defined sections for programmatic and admin expenses
- Will allow for better transparency and understanding of each program

Palm Beach County
COMMUNITY SERVICES
Helping People Build Better Communities

Budget Template – Program Expenses

Category	Description	Col1	Col2	Col3	Col4	Total
Building /Occupancy		$ 27,050.00	$ -	$ -	$ -	$ 27,050.00
Programmatic Rent/Lease	*Note: Rent for areas that house admin staff should be listed seperately under admin seciton* Rent expense for Lake Worth facility. Total rental expense for FY16 = $35,000. Allocation to Palm Beach County FAA award= $20,000. Remaining $15,000 will be paid by other operating income.	$ 20,000.00				$ 20,000.00
Building Maintenance	Maintenance expense for building XYZ	$ 3,800.00				$ 3,800.00
Insurance	Commercial, General, Liability Insurance	$ 3,250.00				$ 3,250.00
Utilities		$ 2,400.00	$ -	$ 1,500.00	$ -	$ 3,900.00
Electric	Electric Utility Services expense for location X	$ 1,200.00		$ 1,000.00		$ 2,200.00
Water	Water Utility service for location X	$ 850.00		$ 500.00		$ 1,350.00
Telephone	Telephone expense for landline at location X	$ 350.00				$ 350.00
Project Supplies/Equipment		$ 4,900.00	$ -	$ -	$ -	$ 4,900.00
Office Supplies	Office supplies for program staff	$ 500.00				$ 500.00
Postage/Shipping	Postage expense for client related mailing	$ 750.00				$ 750.00
Printing	Printing expense for program brochures	$ 650.00				$ 650.00
Materials/Program Supplies	Program related supplies used to support client base	$ -				$ -
Equipment Rental	Monthly Equipment rental fee for use of X = $500 ($6000 per year). Palm Beach County to cover 50% of this expense ($3000).	$ 3,000.00				$ 3,000.00
Professional Fees		$ 2,950.00	$ -	$ -	$ -	$ 2,950.00
Conference Registration Fees	Professional development program fee	$ 350.00				$ 350.00
Training	Staff training expense for program/medical/intervention training for client support	$ 1,500.00				$ 1,500.00
Travel/Mileage	Program staff mileage reimbursement for client and training related meetings	$ 1,100.00				$ 1,100.00
TOTAL PROGRAM EXPENSES =		$ 104,845.00	$ 45,000.00	$ 19,000.00	$ 7,500.00	$ 176,345.00

Palm Beach County COMMUNITY SERVICES
Helping People Build Better Communities

Budget Template

	TOTAL PROGRAM EXPENSES =	$ 104,845.00	$ 45,000.00	$ 19,000.00	$ 7,500.00	$ 176,345.00
Administrative Expenses	**Narrative**					
Personnel		$ 7,500.00	$ -	$ -	$ -	$ 7,500.00
Executive Position #1 (JL)	A 5% allocation of the Executive Director salary expense (including fringe benefits) will be billed to Palm Beach County FAA. Executive Director total salary expense = $85,000. 5% allocation to Palm beach County FAA = % $4,250	$ 7,500.00				$ 7,500.00
Consulting Fees		$ 2,950.00	$ -	$ -	$ -	$ 2,950.00
XYZ Consultants	Accounting and audit expenses for FAA program. Annual	$ 2,950.00				$ 2,950.00
	TOTAL ADMINISTRATIVE EXPENSES =	$ 10,450.00	$ -	$ -	$ -	$ 10,450.00
Administrative % of PBC Award		9.97%				

- Sheet will tally your program and admin expenses and show what your budgeted % is at
- Will allow us to review and discuss with you any items that may be questionable before approving contracts
- Narratives should be completed for each item with details about the cost to clarify
- Unit Rate/Bed Rate Descriptions

Palm Beach County
COMMUNITY
SERVICES
Helping People Build Better Communities

NOFO Application Tips

Michael R. Wright, MPA, Contracts Manager

Proposal Components

I. Program Implementation and Design (40 Points)
II. Evaluation Approach (40 Points)
III. Organizational Capacity (15 Points)
IV. Budget (5 Points)

Tips for a Successful Application

- Use the total work time allotted to complete your grant application. Do not wait until the last minute to submit.

- Answers should be simple, concise, and to the point, while still informing the reviewer of what your program does.

- While going through your grant application, please keep in mind that this is a highly competitive grant and we often receive more applications than we can fund.

Tips for a Successful Application

- Start as soon as possible and assemble a team

- Review all the questions

- Review the Ranking Guide

- Submit the Application in advance of the deadline in case of technology challenges

If you have questions use the email **CSD-FAARFP@PBC.GOV** and review the FAQ often on the FAA Website!
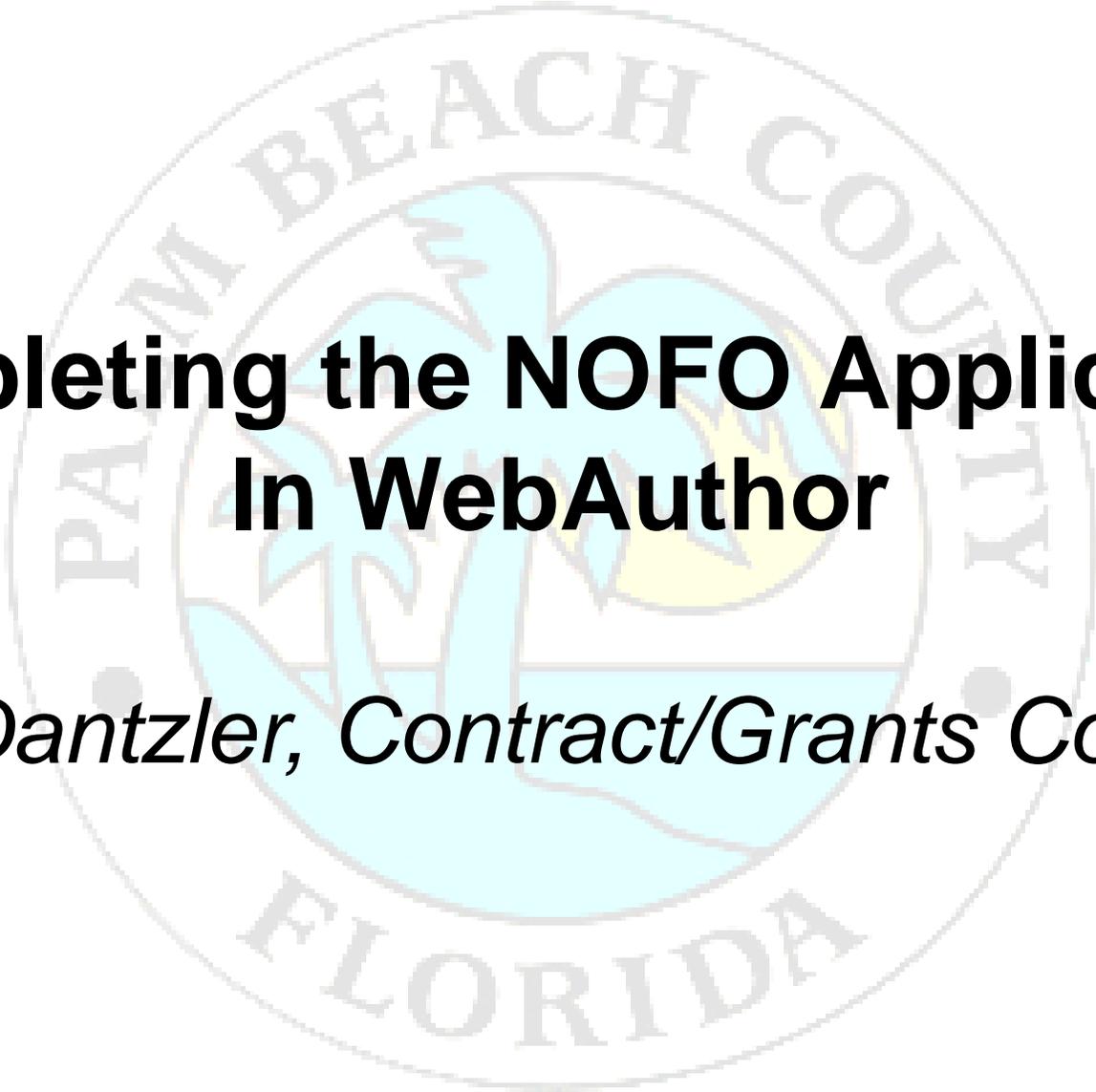
Completing the NOFO Application
In WebAuthor

Elcana Dantzler, Contract/Grants Coordinator

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pbcc.samis.io/go/nofo/

Notices and... | **LII** 45 C... Part 75 - U... | Grants Policy Statm... | What's the Differen... | **C.** GuideStar nonprofit... | Palm Beach County... | CFR-part2

Enter link (*https://pbcc.samis.io/go/nofo/*) to access NOFO proposal page

*Please note there may be other applications on the page so be sure to select the correct application: **FY 2026-2028 Opioid Settlement Funds (OSF) and Financially Assisted Agencies (FAA)Behavioral Health and Substance Abuse Disorder Application NOFO***

NOFO

ESG FY 2022 NOFO

📅 Open Date   3/8/2021

📅 Application Deadline   4/12/2021

🖥 Start New Application or Continue a Previous Application

FY 2026 - 2028 Opioid Settlement Funds (OSF) and Financially Assisted Agencies (FAA) Behavioral Health and Substance Use Disorder

📅 Open Date   3/29/2021

📅 Application Deadline   4/26/2021

🖥 Start New Application or Continue a Previous Application

Click on "Start New Application" to begin a new application or to continue work on an application already started

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If previously submitted an application through SAMIS, you will use the email and password you created to log in under "Existing User."

If you are a brand new SAMIS user, you will type in your first name, last name and email under "New User" to begin the process for creating an account. By creating an account, you will be able to return to an application you have started and apply for future grants using your previously created account.

Completing the FAA Behavioral Health NOFO

For new users, you will receive an email with subject line: SAMIS: PBCC: Account Activation

☐ ☆ ➤ pmedina   SAMIS: PBCC: Account Activation - Below is your password for accessing SAMIS: PBCC. E-mail Address:
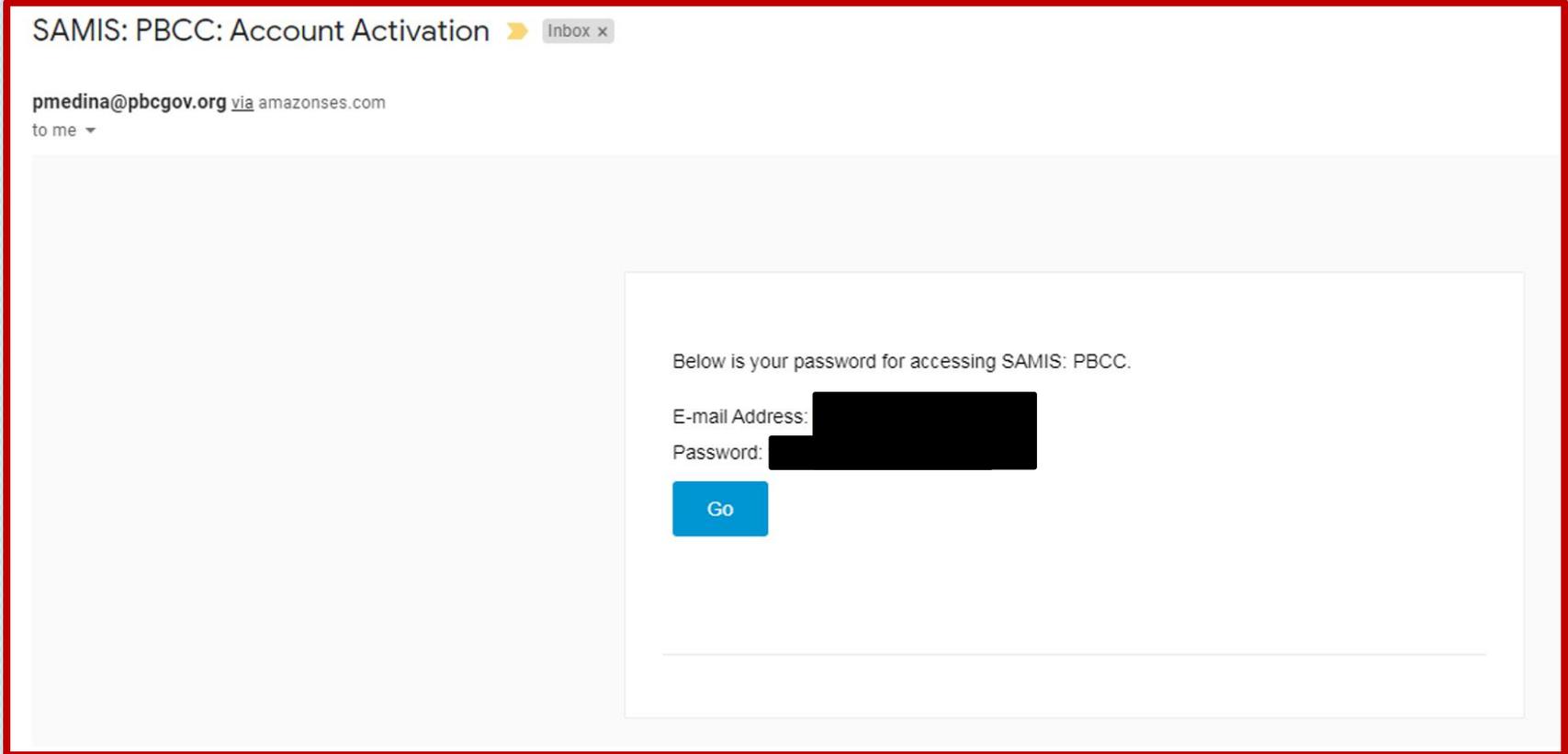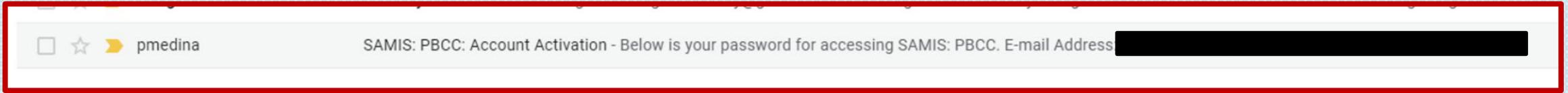
This email will contain your password to sign into SAMIS to complete the application

SAMIS: PBCC: Account Activation ➤ Inbox ×

pmedina@pbcgov.org via amazonses.com
to me ▾

Below is your password for accessing SAMIS: PBCC.

E-mail Address:
Password:

Go

Completing the FAA Behavioral Health NOFO

Before using this site, you must agree to the terms and conditions of use.

Terms of Use - 1/18/2011 - Version 2.0

BY CLICKING A BOX OR PRESSING A BUTTON INDICATING YOUR ACCEPTANCE YOU AGREE TO THESE TERMS OF USE. IF YOU ARE USING THIS WEB SITE ON BEHALF OF A COMPANY OR OTHER LEGAL ENTITY, YOU REPRESENT THAT YOU HAVE THE AUTHORITY TO BIND SUCH ENTITY TO THESE TERMS OF USE, IN WHICH CASE THE TERMS "YOU" OR "YOUR" SHALL REFER TO SUCH ENTITY AND ITS AFFILIATES. IF YOU DO NOT HAVE SUCH AUTHORITY, OR IF YOU DO NOT UNDERSTAND AND AGREE WITH THESE TERMS OF USE, YOU SHOULD SEEK LEGAL COUNSEL, NOT ACCEPT THE TERMS OF USE, AND NOT USE THE SERVICES.

Definitions

"Affiliate" means, with respect to a party, any entity which directly or indirectly controls, is controlled by, or is under common control with such party.

[I Agree]   [I Do Not Agree]

You will be asked to accept the terms of use for SAMIS…

Reset Password

Your password has either expired or is a temporary one. Please enter a new password below to access the system.

Change Password

New Password * [   ]

Confirm Password * [   ]

[Change My Password]

…and to change your password

Completing the FAA Behavioral Health NOFO

↗ ID	Status	Agency Name	NOFO/RFP	Due Date	Time Remaining

— Proposals

NOFO Invitation Code	BHSUD2026
Federal ID	
Agency Name	
Doing Business As (DBA)	Please indicate name(s) by which agency is known or does business.
Address	
Address	
City	
State	

SECTION

0%
- ✗ Proposals
- ✗ General Contact Information
- ✗ FAA FY2022 Behavioral Health Application

AWARD ✏ Edit

Allocation Amount:	$5,806,415.00
Available Amount:	$5,806,415.00

The application will appear once user has signed in.

This NOFO requires an invitation code or password: <u>BHSUD2026</u>

Please insert this password at beginning of the application.

This allows the user to navigate the application, and to return to the application for completion.

Completing the FAA Behavioral Health NOFO

A valid Federal ID will populate the applicant's agency name and address.

Check the NOFO/RFP field to confirm you are in the correct application

Use this status panel to track your application's progress. A green "✓" (checkmark) means the section is completed. A red "X" means the section is not completed.

Completing the FAA Behavioral Health NOFO

Throughout the application, an "*" (asterisk) next to an item indicates that the field is required.

To add another reviewer/editor to the application, go to the "Additional Editors" field in the first section of the application (first page)

Proposals

NOFO Invitation Code * — BHSUD2026

Federal ID *

Agency Name *

Doing Business As (DBA) * — Please indicate name(s) by which agency is known or does business.

Address

Address

City

State — Select State

Zip Code

NOFO/RFP * — FY 2026 – 2028 Opioid Settlement Funds (OSF) and Financially Assisted Agencies (FAA) Behavioral Health and Substance Use Disorder

Additional Editors

Program Name *

Completing the FAA Behavioral Health NOFO

You can select up to two (2) additional editors. Each additional editor must have already registered on the SAMIS system.

Click on the drop-down box to type in the name of the additional reviewer/editor

Federal ID *

Agency Name *

Doing Business As (DBA) * — Please indicate name(s) by which agency is known or does business.

Address

Address

City

State — Select State

Zip Code

NOFO/RFP * — FY 2026 - 2028 Opioid Settlement Funds (OSF) and Financially Assisted Agencies (FAA) Behavioral Health and Substance Use Disorder

Additional Editors — Type name here
No results found

Program Name *

FAA Required FY 2022 Cover Sheet * — Click *HERE* to download the REQUIRED **FY 2022 Cover Sheet Template**. Please upload once you have completely filled it out.

General Contact Information

I. Homelessness Project Narrative (25 Points)

II. Evaluation Approach (15 Points)

III. Prior Outcomes and Response to Community Data

IV. Data Management (10 Points)

V. Partnerships, Resources and Collaboration

VI. Budget (20 pts)

VII. Scope of Work (No Points)

Completing the FAA Behavioral Health NOFO
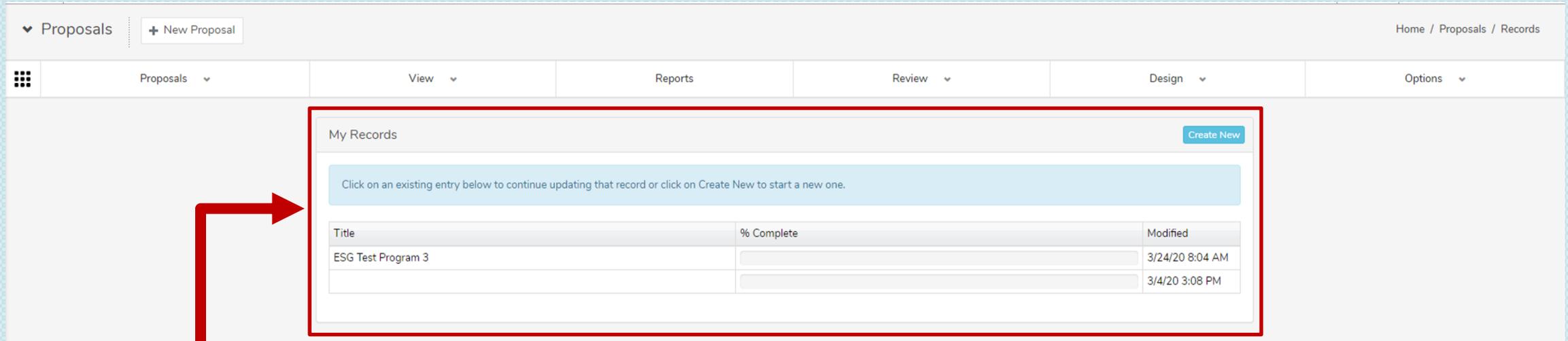
The application will then appear in the additional reviewer's list of applications.

Completing the FAA Behavioral Health NOFO

Throughout the application, there will be several documents that you will be required to download, complete, and re-upload to the application.

Click on the link to preview and download the document. Re-upload the document in the suggested document formats and with the naming convention indicated.

Download the FY 2026-2028 FAA Economic Stability/Mobility NOFO Guidance Document for details on the program and reference throughout the application.

Completing the FAA Behavioral Health NOFO

Click here to download the previewed document, then click 'Back' to return to the application

Completing the FAA Behavioral Health NOFO

At the bottom of each section of the application, you will find this checkbox and accompanying text "Mark this Section Completed".

Check the box only after you have completed the section.

You can move between sections if this box is un-checked. The application will default to a checked box.

All boxes at the end of each section will need to be checked in order to submit the application.

OSF Required FY 2026-2028 Cover Sheet *

Click *HERE* to download the REQUIRED **OSF FY 2026-2028 Cover Sheet Template.** (See Attachment 7). Please upload once you have completely filled it out.

- Please upload your document in the same format as the template: **.doc** OR **.docx**
- Please name your document as such: *(Agency Name or Initials)*CoversheetFY26

≡ Choose File

NOFO Information Document *

Click *HERE* to download a copy of the FY 2026-2028 OSF Behavioral Health, Substance Use and Co-Occurring Disorders NOFO Guidance document for reference throughout the application.

☑ MARK THIS SECTION COMPLETED

Next   Save & Continue Later

The "Next" button at the end of each section will take you to the next section of the application.

The "Back" button will take you to the previous section.

The "Save & Continue Later" button at the end of each section will take you to the application preview/ summary page.

You will be able to save your application there and return to complete the application at a later time.

Completing the FAA Behavioral Health NOFO

After you have completed the first section of the application, you will see this status bar at the top of each application section which will include your agency name, the name of the proposal, and a countdown to the application deadline date.

Completing the FAA Behavioral Health NOFO

Once you have pressed "Save and Continue Later," you will be taken to the summary page, which will show all the sections of the application, as well as the status panel and all the documents you have uploaded.

If the user missed marking a section completed or to make changes and updates, the user will have the opportunity to return to the application by clicking the "Modify" button, then press "Next" until you reach the section you need to mark completed or to update.

Click on the "Save and Continue Later" button to return to the summary page.

Completing the FAA Behavioral Health NOFO

On the summary page, you will have one more opportunity to review your completed application before you submit.

Click on the "Submit" button to submit your application.

Note:
Be sure the application is complete and have the most updated information because changes cannot be made to the application once it has been submitted

When submitted, the application will display a black "Submitted" box on the status bar.

Completing the FAA Behavioral Health NOFO

You can print your application for your record by using your browser's system options or by right-clicking your computer mouse and selecting "Print".

QUESTIONS?

Information

All questions must be emailed to:
CSD-FAARFP@PBC.GOV

All questions and answers will be posted on the FAA website:
http://discover.pbcgov.org/communityservices/financiallyassisted/Pages/default.aspx

All proposals must be submitted electronically to:
https://pbcc.samis.io/go/nofo

by

Monday, April 7, 2025
before 12:00PM – NOON

Palm Beach County
COMMUNITY SERVICES
Helping People Build Better Communities