



# CHURCHILL COMMUNITY COALITION

WWW.CHURCHILLCOALITION.COM

## Request for Application (RFA)

### Substance Abuse Primary Prevention (SAPP) Funds

#### Application Specifications at a Glance

Funding Period:	July 1, 2019 – June 30, 2023 (Funding will be awarded for a one-year period with the opportunity for continuation in years 2 – 4)
Available Funds:	\$92,344.00 Anticipated
Types of Services:	Substance Abuse Prevention
Target Population:	Churchill County residents
Service Area:	Churchill County
Eligibility:	Private not-for-profit organization, 501(c)(3) local governmental entity or Tribal entity
Pre-Application Bidders Conference:	March 15, 2019 – 1:00 to 2:00
Letter of Intent Due:	March 22, 2019
Application Deadline:	April 26, 2019 – 4:00 P.M.
Copy Requirements:	One original plus four (4) copies must be sent to  <b>Churchill Community Coalition</b>

CHURCHILL COMMUNITY COALITION will accept written applications from private not-for-profit organizations and governmental agencies to fund substance abuse prevention programming in Churchill County. State Prevention Infrastructure program funding is made available from the Division of Public and Behavioral Health's (DPBH) Substance Abuse Prevention and Treatment Agency (SAPTA).

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## I. General Information

### Background and funding Source

The purpose of the SUBSTANCE ABUSE PRIMARY PREVENTION (SAPP) funding is to support infrastructure and the implementation of evidence-based/evidence-informed direct service substance abuse prevention programs, practices, and strategies at the community level. All activities associated with this funding must be for the implementation of those activities that meet an identified need within the community and are prioritized in the coalition's priorities.

**Three Definitions of Evidence-Based** :Any program, policy, strategy or practice that appears on a Federal registry of approved prevention interventions that uses terms such as "Model", "Best Practice", "Promising Practice", "Evidence-based", or "Principle of Effectiveness", etc.

The purpose of this funding is the implementation of direct service primary prevention programs and strategies at the community level (Attachment D). Primary Prevention promote the non-use of drugs aimed at preventing or delaying the first use of drugs and the transition to more serious use of drugs and the transition to more serious use of drugs from experimental use. Most experimental drug use begins in early adolescents and early adulthood when young people are developing cognitively and socially. For that reason, primary prevention is mainly directed at those life stages and those before them. Primary prevention activities may be directed at whole populations (ex: media campaigns, community health fairs) or at particular groups of people or individuals who may be vulnerable because of negative conditions in their lives. Drug use may be prevented directly through activities aimed at prevention drug use, or indirectly through activities that prevent drug use, or indirectly through activities aimed at preventing drug use by promoting the overall health of the general or a targeted population.

SUBSTANCE ABUSE PRIMARY PREVENTION (SAPP) can be used to fund prevention (not necessarily primary prevention).

\*(Please note that this funding may only be used for **prevention services**. Activities that cross over into the "intervention" realm are not allowable in this solicitation. Intervention involves individuals abusing drugs who are beyond primary prevention activities, and in need of assessment and treatment services.)

All activities associated with this funding must be for the implementation of those activities that meet an identified need within the community and are prioritized in CHURCHILL COMMUNITY COALITION's Comprehensive Community Prevention Plan (CCPP). CHURCHILL COMMUNITY COALITION's most recent CCPP and needs assessment are available at [www.ChurchillCommunityCoalition.com](http://www.ChurchillCommunityCoalition.com)

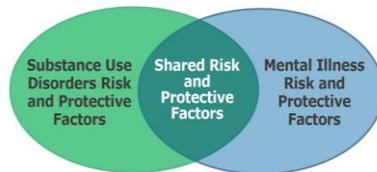
**CHURCHILL COMMUNITY COALITION Priorities for 2018 – 2019**

**Summary of Churchill Community Coalition’s CCPP  
Risk and Protective Factors for Substance Abuse in Young People**

<b>Risk Factors</b>	<b>Domain</b>	<b>Protective Factors</b>
Mental Health	Individual	Self-Control
Lack of Parental Supervision	Family	Parental Monitoring
Substance Abuse	Peer	Academic Competence
Drug Availability	School	Anti-drug Use Policies
Lack of commitment to school	School/parental	Parent/Academic

**Risk and Protective Factors for Substance Abuse in Adults**

Risk Factor                      Domain                      Protective Factor



- Target Populations:
  - Native American, Hispanic
  - Underage drinkers
  - Middle and high school students at risk to use methamphetamine
  - Families with a history of abuse, neglect, mental health issues, divorce, and/or domestic violence.
  
- Prioritized Risk Factors:
  - Alienation and Rebelliousness
  - Family history of the problem behavior/family management problems
  - Lack of Commitment to school
  - Early initiation of the substance abuse
  
- Other parameters: None

SAPTA priorities supported by CHURCHILL COMMUNITY COALITION

<b>Priority Area</b>	<b>Priority Description</b>
<b>1</b>	Focus prevention activities on prescription drugs used for non-medical purposes, or without a prescription
<b>2</b>	Target substance abuse prevention in Native American communities among youth and in association with suicide
<b>3</b>	Support earlier access to prevention by targeting students in high-risk environments needing access to after-school activities/programming for youth empowerment
<b>4</b>	Develop and/or increase collaboration and partnership with the military; active service, veterans, reservists, National Guard, and their families
<b>5</b>	Focus prevention activities around marijuana, including medical marijuana dispensaries, legalization issues and changes in social norms
<b>6</b>	Focus prevention activities around use of e-cigarettes, including the dangers of use and changes in social norms
<b>7</b>	Support the Community Health Worker model to strengthen linkages and referrals to available resources
<b>8</b>	Reduce the rates of youth suicide attempts and completions by increasing the identification of students contemplating suicide and connecting them with available services
<b>9</b>	Target alcohol and other drug use among women of child-bearing years and women currently pregnant
<b>10</b>	Prevent the onset of childhood and underage drinking and other drug use, reduce the progression of substance abuse, including prescription drugs used illicitly and marijuana; prevent the relapse of substance abuse of those in recovery
<b>11</b>	Create or implement strategies to reduce binge-drinking in youth under the age of 18 and young adults up to age 24
<b>12</b>	Focus on environmental and population-based strategies to reduce drug use and underage drinking

**Federal Priorities: SAMHSA supported by CHURCHILL COMMUNITY COALITION**

Substance abuse and mental health is still seen as a social or moral issue rather than a public health issue. SAMHSA is working toward “creating communities where individuals, families, schools, faith-based organizations, and workplaces take action to promote emotional health and reduce the likelihood of mental illness, substance abuse including tobacco, and suicide.” SAMHSA encourages strategies in the following primary prevention focus areas:

- Strategies that target tobacco use prevention and tobacco-free facilities that are supported by research and encompass a range of activities including policy initiatives and programs;
- Strategies that engage schools, workplaces, and communities to establish programs and policies to improve knowledge about alcohol and other drug problems, denote effective ways to address the problems and enhance resiliency;

- Strategies that address underage drinking based in science and encompass a range of connected activities;
- Evidence-based and cost-effective models to prevent substance abuse in young people;
- Strategies that focus on harder to reach racial/ethnic minority and LGBTQ communities that experience a cluster of risk factors that make these populations especially vulnerable to substance use and related programs.

#### Restrictions on Funding

1. To purchase or improve land; purchase, construct or permanently improve (other than minor remodeling) any building or other facility; or purchase major medical equipment.
2. To satisfy any requirement for the expenditure of non-federal funds as a condition for the receipt of federal funds.
3. To provide financial assistance to any entity other than a public or nonprofit private entity.
4. To make payments to intended recipients of health services.
5. To provide individuals with hypodermic needles or syringes so that such individuals may use illegal drugs.
6. To provide funding for tobacco only prevention programs.

**II. RFA Timeline**

Pre-Application Bidders Conference*:	March 15, 2019 – 1:00 to 2:00
Letter of Intent Due:	March 22, 2019
Application Deadline:	April 26, 2019 – 4:00 P.M.
Application Technical Review:	April 30, 2019
Application Objective Review:	May 7, 2019
Grant Award Notification and Negotiations**:	May 20 – 24, 2019
Project Period Begins:	July 1, 2019

\* A Pre-Application Bidders Conference will be held from 1:00 – 2:00 on Friday, March 15, 2019. Applicants may attend in person at the CHURCHILL COMMUNITY COALITION office located at 90 N. Maine St, Fallon.

\*\* A Board Review & Decision will be on Agenda for Special 1 Meeting of the Board of Director to be held from 12:10 P.M. – 1:00 P.M. on Tuesday May 15, 2019. Objective Reviewers, Board Members and Public may attend in person at CHURCHILL COMMUNITY COALITION office located at 90 N. Maine St, Fallon.

### **III. Funding Limitations, Commitments, Eligibility, and Legal Requirements**

#### Funding Limitations

This funding is available for a one-year period beginning July 1, 2019, with the opportunity for continuation in years two, three and four. Total funds awarded to Churchill County sub grantees will not exceed **\$92,344**. The sub grantees will be supported through the program implementation portion of the SUBSTANCE ABUSE PRIMARY PREVENTION (SAPP) and BG to provide evidence-based substance abuse prevention programs, practices and strategies in Churchill County with CHURCHILL COMMUNITY COALITION acting as the funding agency.

Applications will be evaluated on a competitive basis to implement evidence-based prevention programs, practices and strategies. 100% of the funding must be spent on programs meeting the criteria outlined in Attachment D: Identifying and Selecting Evidence-Based Interventions.

Funds may be used to support programs, practices, and strategies that will fill service gaps without duplicating existing services or activities at the community level. Funding awards will be determined through technical and objective review processes. All awards are contingent on the continued availability of funds. Non-competitive continuation funding will be available in 2019-2023, 2023-2018, and 2018-2019 to programs in good standing. CHURCHILL COMMUNITY COALITION reserves the right to modify or reject any or all sub-grantees. All sub-grantees must conform to the conditions, guidelines and timelines in this RFA.

#### Applicant and Sub Grantee Commitments

All applicants must:

- A. Submit a Letter of Intent (Attachment A).
- B. Implement evidence-based direct service substance abuse prevention programs, practices, and strategies at the community level using the criteria outlined in the “Definition of Evidence-Based for Substance Abuse Prevention” document updated in 2009 by the State of Nevada Mental Health and Developmental Services, Substance Abuse Prevention and Treatment Agency (Attachment D).

All sub grantees must demonstrate a commitment to:

- A. Meet all programmatic evaluation and data collection requirements as required by CHURCHILL COMMUNITY COALITION and SAPTA.
- B. Comply with CHURCHILL COMMUNITY COALITION Minimum Training Requirements.
- C. Meet all local, state and federal requirements, as outlined in assurance (Attachment G).

### Eligibility

All applicants must meet the following requirements:

- Must be a private not-for-profit organization, 501(c) (3) or local government entity. Use of fiscal agents is allowed; however, applicants must apply for individual non-profit status within six months of award. A copy of the organization's Internal Revenue Service letter documenting the 501(c) (3) status will be required prior to allocation of funds. Do not provide as attachment to this application.
- Must be certified by SAPTA to provide primary prevention services. If an applicant is not certified, they must submit an assurance that an application for certification has been filed with SAPTA (Attachment C). Applicants are not required to pay the \$100 certification fee unless their application is approved. For information on certification requirements and applications, contact Meg Matta at (775) 684-4190.

### Legal Requirements

CHURCHILL COMMUNITY COALITION and SAPTA are in compliance and require all sub grantees to be in compliance with all local, state and federal laws and regulations. This compliance, which includes civil and human rights laws and regulations, insures that all programs and sub grantees are free from any discrimination. No individual will be excluded from participating in any program, service, or benefit based on his/her race, ethnicity, national origin, sexual preference, disability, age, gender, or religious preference. This funding may not be used to supplant current prevention program activities or support inherently religious activities. It may be used to expand or enhance current program activities.

## **IV. Application Writing Instructions**

Please consider the following suggestions when preparing the application:

- Respond to all questions in the order provided.
- Ensure budget figures are mathematically correct and the justification is clear and descriptive.
- Do not use jargon specific to your agency or program.
- Do not assume the objective reviewer is familiar with your organization.
- Avoid acronyms or clearly describe them when used for the first time.
- Observe page limits and formatting.
- Link together sections of the application to create a broad picture of the program you wish to implement.
- Allow adequate time to secure required signatures.

## V. Application Instructions

Applications must be typed and must contain all of the information requested below. The information should be organized in the order listed and each section of the application should begin on a new page. The first page of the application is to be the Application Summary (Attachment B). Incomplete applications will not be reviewed and will be returned for corrections and resubmitted to CHURCHILL COMMUNITY COALITION.

Applications will be returned for correction for the following reasons:

- Failure to supply one (1) original and four (4) copies.
- Failure to use 12-point font size, single space, and 1" margins.
- Failure to respond to all sections of the RFA.
- Submission of incomplete, inaccurate or false information.
- Submission of an application with excessive typographical errors, misspellings, or grammatical errors.
- Failure to number pages.
- Failure to observe page limitations.
- Failure to use forms provided.

Please note:

- Copies of all required forms for this RFA are included in the Attachment Section of this document.
- Attachments that are not requested in the RFA or sections that exceed page limitations will not be read or reviewed.
- Applications with handwritten forms will not be read or reviewed.

**Any application received after the deadline will be returned unread and will not be considered for funding. All applications must be received by CHURCHILL COMMUNITY COALITION by the deadline. There are no exceptions.**

### Contact and submittal information:

Andrea Zeller Director:  
[director@churchillcoalition.com](mailto:director@churchillcoalition.com)  
90 N. Maine St Street  
Fallon, NV 89406  
Phone: (775) 423-7433  
Fax: (775) 423-7504

**VI. Application Sections**

**A. Application Summary Form  
Page Limit — Attachment B  
Scoring – 5 Points**

The Application Summary Form is included in the Attachments Section. The total CHURCHILL COMMUNITY COALITION request must equal the “Total Request” indicated on the Budget Request forms.

The Application Summary Form will be the first page of the application and will be the equivalent of a cover page. Do not submit a different cover page or cover letter.

**B. Organization Overview  
Page Limit –  
Scoring – 10 Points**

Describe the organization’s experience specific to providing prevention programming using evidence-base practices. Demonstrate it has an organizational structure, resources, and management procedures capable of implementing the proposed program, practice or strategy.

**C. Proposed Program  
Page limit – 3  
Scoring – 40 Points**

1. Evidenced based status: IS the proposed service identified as an “evidenced-based” program or strategy \_\_\_\_Yes \_\_\_\_No . If yes, including a website link for reviewers.
2. Describe the local/regional need for the program based on local data and/or information. Include how proposed program addresses CHURCHILL COMMUNITY COALITION and SAPTA priorities.
3. Provide a clear definition and description of the geographic area and target population to be served by the program. Specify numbers to be served, age of program recipients, ethnicity, special populations, etc. Include how the evidence-based program addressed cultural competency (race, ethnicity, socioeconomic, gender, sexual orientation, etc.).
4. Describe evaluation methods included with the evidence-based program and other evaluation methods employed by organization to measure program effectiveness.
5. Complete implementation timeline using below table only.

Task/Activity	Timeline										
	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
Ex: Purchase curriculum and train staff	X	X									
Collaboration with XXX agencies to recruit participants		X	X								
Conduct 6 sessions of program				X	X		X	X	X	X	
Evaluation, etc.											

6. Complete SAPTA required Scope of Work (Attachment E). Submit as attachment, not in body of application. Directions for completing Scope of Work are included in attachment.

**D. Collaboration and Sustainability**  
**Page limit – 2**  
**Scoring – 15 Points**

Describe organization’s current involvement/relationship with CHURCHILL COMMUNITY COALITION or, if none exists, plans to engage in coalition efforts.

Describe collaboration with other community partners specific to the proposed programming, including whether other organizations are conducting this program and how duplication is being avoided.

Describe collaborative efforts to sustain program or leverage other resources.

**E. Conflict of Interest Policy Statement**  
**Page Limit – Attachment F**  
**Scoring – 5 Points**

Applicants are required to read and sign the Conflict of Interest Policy Statement (Attachment F).

**F. Assurances**  
**Page Limit – Attachment G**  
**Scoring – 5 Points**

Applicants are required to read and sign the Assurances (Attachment G).

**G. Budget Request and Justification Forms**  
**Page Limit – Attachment H and Table**  
**Scoring – 20 Points**

The applicant must complete the required budget forms for this specific project (Attachment H). Handwritten forms will not be accepted. If the applicant intends on utilizing other funding to support this effort, please indicate how in the justification section. For example, if rent is already paid by existing revenue, the rent should be shown reflecting the type of funding used to cover the cost. The total amount requested on the Budget Request and Justification Form must match the total amount requested on the Application Summary Form.

Additionally, provide information specific to other funding received directly related to proposed program in table below. (Fund Map)

Budget Category	List Funding Source and Funding End Date		
	Source:	Source:	Source:
	End Date:	End Date:	End Date:
Personnel			
Consultants			
Travel			
Training			
Operating			
Other			
<b>Totals</b>			

**H: Grievance Policy**

Applicants are required to read and sign and submit the Grievance Policy (Attachment H).  
Scoring- 0 points

**VII. Summary of Required Contents, Maximum Scores, and Page Limitations**

<b>SECTION</b>	<b>ASSIGNED MAXIMUM POINTS</b>	<b>PAGE MAXIMUMS</b>
A. Application Summary Form	5	Attachment B Use as cover page
B. Organization Overview	10	1
C. Proposed Program	40	3 plus Attachment E
D. Collaboration and Sustainability	15	2
E. Conflict of Interest Policy Statement	5	Attachment F
F. Assurances	5	Attachment G
G. Budget Request and Justification Form	20	Attachment H plus table
H. SAPTA Prevention Certification Application (if applicable)	0	Attachment C
I. Grievance Policy	0	Attachment I
<b>TOTAL POINTS</b>	<b>100</b>	

## **VIII. Forms and Attachments**

ATTACHMENT A

LETTER OF INTENT TO SUBMIT APPLICATION

**Churchill Community Coalition**



**Substance Abuse Primary Prevention (SAPP) Funds**

In order for CHURCHILL COMMUNITY COALITION to properly plan for the review of applications and the allocation of funds, it is necessary to have preliminary notification of your plans. Please submit this Letter of Intent by **March 22, 2019, 4 PM**. Fax to (877)471-7354, scan or email to [director@churchillcoalition.com](mailto:director@churchillcoalition.com), or mail to 90 N. Maine St Fallon, NV 89406

Name of Agency: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Proposed Program (if yet determined): \_\_\_\_\_

Will you be applying to multiple Coalitions for funding  Yes  No

If yes, provide name(s) of coalitions: \_\_\_\_\_

\_\_\_\_\_  
Signature/Title

\_\_\_\_\_  
Date

**ATTACHMENT B**  
**APPLICATION SUMMARY**

Agency Name: \_\_\_\_\_

Agency Contact: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Total Funding Requested: \_\_\_\_\_

Proposed Program(s) to be funded: \_\_\_\_\_

Service Area of Program(s): \_\_\_\_\_

\_\_\_\_\_ Applicant is a 501(c) (3) or local government entity

\_\_\_\_\_ Applicant currently is a SAPTA Certified Prevention Provider  
Current certification expires: \_\_\_\_\_

\_\_\_\_\_ Applicant is not currently certified, but has submitted an application for certification  
to SAPTA

\_\_\_\_\_ Applicant is applying to multiple coalitions for funding – if checked provide name of  
coalition(s), proposed program, and amount requested:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Previously funded by CHURCHILL COMMUNITY COALITION

**Commented [D1]:**

2015-2019 \$ \_\_\_\_\_

New applicant \_\_\_\_ Yes

Director's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Director's Signature: \_\_\_\_\_

Board Chair Name: \_\_\_\_\_ Date: \_\_\_\_\_

Board Chair Signature: \_\_\_\_\_



## ATTACHMENT D

### *Mental Health and Developmental Services Substance Abuse Prevention and Treatment Agency*

#### **Definition of Evidence-Based for Substance Abuse Prevention**

##### **Introduction:**

The Substance Abuse Prevention and Treatment Agency (SAPTA) is committed to the implementation of effective substance abuse prevention programs, strategies, policies, and practices by supporting community coalitions and their partners.

The purpose of this document is to provide program policy for one operational definition and structure for the implementation of Evidenced based Practices by prevention and other SAPTA funded program providers with oversight by community coalitions and/or SAPTA. In addition, this document will guide the prioritization and allocation of funding available through this agency. This program policy is to assist prevention providers certified by SAPTA to implement activities that meet one of the three following definitions for evidence-based prevention practices. Evidence-based practices in prevention are defined by the Substance Abuse and Mental Health Service Administration's (SAMHSA) Center for Substance Abuse Prevention (CSAP) in their Identifying and Selecting Evidence-Based Interventions Guidance Document (Revised January 2009). According to their definition, an Evidence-Based intervention is defined by inclusion in one or more of the three categories below:

- A. Included in Federal registries of evidence-based interventions; OR
- B. Reported (with positive effects on the primary targeted outcome) in peer-reviewed journals; OR
- C. Documented effectiveness supported by other sources of information and the consensus judgment of informed experts (as specified in the Guidelines that follow), all of which must be met:
  - Guideline 1: The intervention is based on a theory of change that is documented in a clear logic or conceptual model, AND
  - Guideline 2: The intervention is similar in content and structure to interventions that appear in registries and/or the peer-reviewed literature, AND
  - Guideline 3: The intervention is supported by documentation that it has been effectively implemented in the past, and multiple times, in a manner attentive to scientific standards of evidence and with results that show a consistent pattern of credible and positive effects, AND
  - Guideline 4: The intervention is reviewed and deemed appropriate by a panel of informed prevention experts that includes: well-qualified prevention researchers who are experienced in evaluating prevention interventions similar to those under review, local prevention practitioners, and key community leaders as appropriate (e.g., officials from law enforcement and education sectors or elders within indigenous cultures).

### **Defining Evidence-based:**

SAPTA, in implementing the evidence-based definition for substance abuse prevention, realizes that it is important to provide a structured definition that will guide SAPTA funded prevention providers when choosing their prevention activities. Below is a review and further explanation of the three definitions that will be used by SAPTA and its funded providers when choosing community based prevention programs, policies, strategies and practices to be implemented.

### **Three Definitions of Evidence-Based**

#### **A. Included in Federal registries of evidence-based interventions:**

Any program, policy, strategy or practice that appears on a Federal registry of approved prevention interventions that uses terms such as “Model”, “Best Practice”, “Promising Practice”, “Evidence-based”, or “Principle of Effectiveness”, etc.

When a provider identifies a program, practice, policy, or strategy, the activity chosen must coincide with a prioritized substance abuse prevention need that has been identified by SAPTA or a SAPTA funded coalition. Programs that meet this definition may address, but are not limited to; risk and protective factors, intervening variables, causal factors, and/or strategies that have been identified by SAPTA or a SAPTA funded community Substance Abuse Prevention Coalition (Coalition). SAPTA recognizes and endorses the use of CSAP’s recognized six prevention strategies (Information Dissemination, Prevention Education, Alternative Activities, Problem Identification and Referral, Community-based Process, or Environmental) and the Institute of Medicine’s Continuum of Care, and the Strategic Prevention Framework as part of the foundation of evidence-based substance abuse prevention planning and implementation.

These prevention activities may be chosen from a variety of federal registries of approved programs and practices that make up the current standards recognized in substance abuse prevention nationally. These include but are not limited to: Substance Abuse and Mental Health Services Administration (SAMHSA), National Registry of Effective Prevention Programs (NREPP), Center for Disease Control and Prevention (CDC), Office of Juvenile Justice Delinquency Prevention (OJJDP), US Department of Education, CSAP’s Centers for the Application of Prevention Technologies, and the Office of National Drug Control Policy.

**B. Reported (with positive effects on the primary targeted outcome) in peer-reviewed journals:** Providers wishing to use a program or intervention not on a Federal registry, may choose, as an option, a prevention program, policy, practice, or strategy that has been published in a peer reviewed journal and shown to have positive results in substance abuse prevention or a related field. Other related fields include but are not limited to education, tobacco prevention, public health, HIV/AIDS, mental health, developmental assets, resiliency, etc.

**C. Documented effectiveness supported by other sources of information and the consensus judgment of informed experts (as specified in the Guidelines that follow):**

If a proposed activity does not meet either of the above definitions, documented effectiveness of the proposed intervention desired may be considered on a case-by-case basis. In the event that documented effectiveness will be used, the proposed prevention activity must meet each of the guideline definitions below in order to be considered.

- Guideline 1: The intervention is based on a theory of change that is documented in a clear logic or conceptual model, AND
- Guideline 2: The intervention is similar in content and structure to interventions that appear in registries and/or the peer-reviewed literature, AND
- Guideline 3: The intervention is supported by documentation that it has been effectively implemented in the past, and multiple times, in a manner attentive to scientific standards of evidence and with results that show a consistent pattern of credible and positive effects, AND
- Guideline 4: The intervention is reviewed and deemed appropriate by a panel of informed prevention experts that includes: well-qualified prevention researchers who are experienced in evaluating prevention interventions similar to those under review, local prevention practitioners, and key community leaders as appropriate (e.g., officials from law enforcement and education sectors or elders within indigenous cultures).

SAPTA recognizes that in order for all providers in Nevada to meet these standards they may require technical assistance, resource development, and training. SAPTA will support the efforts of the community coalitions to work with providers so that they can meet the requirements of evidence-based prevention in the selection, development, and implementation of substance abuse prevention activities in Nevada. The SAPTA funded coalitions will be responsible for maintaining documentation regarding and related to the selection criteria and the utilization of the criteria and providing this documentation to SAPTA.

**RESOURCE LIST FOR EVIDENCE-BASED PRACTICES:**

**SAMHSA’s National Registry of Evidence-based Programs and Practices (NREPP)**

<http://nrepp.samhsa.gov/landing.aspx>

**Office of Juvenile Justice and Delinquency Prevention (OJJDP)**

<https://www.ojjdp.gov/mpg/>

**National Institute on Drug Abuse**

<https://teens.drugabuse.gov/teachers/lessonplans#/questions>

<https://teens.drugabuse.gov/drug-facts/marijuana>

**The NCJA Center for Justice Planning (NCJP)**

<http://www.ncjp.org/saas/ebps/registries>

**National Institutes of Health**

<https://teens.drugabuse.gov/teachers/lessonplans#/questions> (new)

[https://teens.drugabuse.gov/sites/default/files/podata\\_1\\_17\\_14\\_0.pdf](https://teens.drugabuse.gov/sites/default/files/podata_1_17_14_0.pdf)

<https://prevention.nih.gov/resources-for-researchers/dissemination-and-implementation-resources/evidence-based-programs-practices>

**National Institute of Justice**

<https://www.crimesolutions.gov/ProgramDetails.aspx?ID=191>

**Network of Care – Clark County**

<http://clark.nv.networkofcare.org/ph/county-indicators.aspx>

Refer to categories: Health Risk Factors, and Mental Health and Substance Abuse

**REAL Prevention**

<https://real-prevention.com/>

**Botvin LifeSkills Training**

<https://lifeskillstraining.com/>

**Project Northland and Class Action**

<http://www.hazelden.org/web/go/projectnorthland>

**Project Towards No Drug Abuse**

<http://tnd.usc.edu/about.php>

**Too Good for Drugs**

<https://toogoodprograms.org/>

**Mind over Matter Series**

<https://teens.drugabuse.gov/teachers/mind-over-matter>

**Parenting Wisely**

<https://www.parentingwisely.com/>

**Smart Moves**

<https://www.bgca.org/programs/health-wellness/smart-moves>

**Catch My Breath**

<https://catchinfo.org/modules/e-cigarettes/>

**Stanford Medicine Tobacco Prevention Toolkit**

<https://med.stanford.edu/tobaccopreventiontoolkit.html>

**ATTACHMENT E**

**PREVENTION SERVICES  
PROJECTED SCOPE OF WORK for DIRECT SERVICE PROVIDERS**

**Use one sheet per program, practice, or strategy**

Organization/Agency Name:								
Funding Period:	July 1, 2019 – June 30, 2023							
Total <i>unduplicated</i> number of participants to be served:								
Program, Practice or Strategy (List only one per sheet)	Location / County (List only one per sheet)	Number of Sessions	Number of Sessions per Week	Hours per Session	Times Offered per Year	Estimated Start Dates of Program Iteration	Total Number of Participants	Age Group(s)

**Use the NHIPPS codes as listed on the instruction sheet.**

Continue using above information	<u>Service Code</u> (Single / Recurring)	<u>Program Category</u> (Evidence-based / Non Evidence-based)	<u>Service Population</u> (Target Population) (Up to 5)	<u>Populations</u> Universal Direct, Universal Indirect, Selective, Indicated	<u>Service Type</u> (CSAP Strategy) (Up to 5)	<u>Risk Factors</u> (Up to 5)	<u>Protective Factors</u> (Up to 5)	<u>Intervening Variables</u> (Up to 5)

*\*Use additional sheets as necessary*

**PREVENTION SERVICES  
PROJECTED SCOPE OF WORK**

-Continued-

**Use one sheet per program, practice, or strategy**

Program, Practice, or Strategy (List only one per sheet)		Location / County (List only one per sheet)			
Gender		Race		Age Groups	
Male		American Indian/Alaska Native		0 - 4	
Female		Asian		5 - 11	
Total		Black/African American		12 - 14	
		Native Hawaiian/Other Pacific Islander		15 - 17	
		White		18 - 20	
		More than One Race		21 - 24	
		Unknown/Others		25 - 44	
		Ethnicity		45 - 64	
		Total		65 +	
		Hispanic or Latino		Total	
		Not Hispanic or Latino			
		Total			

## **SCOPE OF WORK FIELDS**

### **Service Code**

Single  
Recurring

### **Program Category**

Evidenced based  
Non-Evidenced based

### **Service Population (TARGET POPULATION)**

SP01 Business & Industry  
SP02 Civic Groups/Coalitions  
SP03 College Students  
SP04 COSAS-Children of Substance Abusers  
SP05 Delinquent/Violent Youth  
SP06 Economically Disadvantaged Youth/Adults  
SP07 Older Adults  
SP08 Government Elected Officials  
SP09 Elementary School Students  
SP10 General Populations  
SP11 Health Professionals  
SP12 High School Students  
SP13 homeless/Runaway Youth  
SP14 Middle/Jr. High School Students  
SP15 Parents/Families  
SP16 People Using Substances  
SP17 People with Disabilities  
SP18 People with Mental Health Problems  
SP19 Physically/Emotionally Abused People  
SP20 Pregnant Females/Women of Childbearing Age  
SP21 Preschool Students  
SP22 Prevention/Treatment Professionals  
SP23 Religious Groups  
SP24 School Dropouts  
SP25 Teachers/Administrators/Counselors

SP26 Youth/Minors  
SP27 Law Enforcement/Military  
SP28 Gay/Lesbians  
SP98 Other  
SP99 Not Applicable

**Populations**

Universal Direct  
Universal Indirect  
Selective  
Indicated

**Service Type (CSAP STRATEGY)**

**Information Dissemination-STN**

STN01 Clearinghouse/Information Resource Center  
STN02 Health Fair  
STN03 Health Promotion  
STN04 Original A/V Material Developed  
STN05 Original Written (Print/web/pdf) Material Developed  
STN06 Original Curricula Developed  
STN07 Original Periodicals Developed (either electronic or print)  
STN08 Original PSA's Developed  
STN10 A/V Material Disseminated  
STN11 Print/Web/pdf/electronic Materials Disseminated  
STN12 Curricula Disseminated  
STN13 Periodicals Disseminated (either electronic or print)  
STN14 PSA's Disseminated  
STN15 Resource Directories Disseminated ( electronic or print)  
STN16 Media Campaigns Distributed  
STN17 Speaking Engagement  
STN18 Telephone/Email Information Services  
STN19 Data Collection  
STN20 Info Referral via telephone (Help line)  
STN21 Staff Development

**Education-STE**

- STE01 COSA Groups
- STE02 Classroom Education Services
- STE03 Educational Services for Youth Groups
- STE04 Parenting/Family Management Services
- STE05 Peer Leader/Helper Programs
- STE06 Small Group Sessions

**Environmental-STV**

- STV01 Environmental Consultation to Communities
- STV01 Preventing underage Sale of Tobacco and Tobacco Products
- STV03 Preventing Underage Alcohol Beverage Sales
- STV04 Establishing ATOD-Free Policies
- STV06 Public Policy Efforts

**Alternatives-STA**

- STA01 ATOD-Free Social/Recreational Events Attendees
- STA03 Community Drop-in centers
- STA04 Community Drop-in Center Activities
- STA06 Community Services
- STA07 Youth/Adult Leadership Function
- STA08 Youth/Adult Mentoring
- STA09 Academic Enrichment

**Problem ID and Referral-STP**

- STP01 Employee Assistance Program Attendees
- STP02 Employee Assistance Program Participants
- STP03 Student Assistance Program Attendees
- STP04 Student Assistance Program Participants
- STP05 DII/SWI/MIP Program Attendees/ Participants
- STP06 Prevention Assessment and Referral Attendees

**Community Based process-STC**

- STC01 Accessing Services and Funding
- STC02 Assessing Community Needs

- STC03 Community/Volunteer Services
- STC04 Formal Community Teams-Formed
- STC05 Community Team Activities/ Meetings
- STC06 Training Services
- STC08 Technical Assistance Services
- STC09 Data Collection
- STC10 Systematic Planning Services
- STC11 Focus Groups
- STC12 Site Visit

**Risk Factors (ASSOCIATED RISK FACTORS)**

**Community Domain**

- COM01 Availability of Drugs
- COM02 Availability of Fire Arms
- COM03 Community Laws and Norms Favorable Toward Drug Use, Firearms, and Crime
- COM04 Media Portrayals of Violence
- COM05 Transitions and Mobility
- COM06 Low Neighborhood Attachment & Community Disorganization
- COM07 Extreme Economic Deprivation

**Family Domain**

- FAM01 Family History of Problem Behavior
- FAM02 Family Management Problems
- FAM03 Family Conflict
- FAM04 Favorable Parental attitudes & Involvement in the Problem Behavior

**School Domain**

- SCH01 Academic Failure Beginning in Late Elementary School
- SCH02 Lack of Commitment to School

**Individual/Peer Domain**

- IND01 Early and Persistent Antisocial Behavior
- IND02 Rebelliousness
- IND03 Friends Who Engage in the Problem Behavior
- IND04 Gang Involvement
- IND05 Favorable Attitudes toward the Problem Behavior

IND06 Early Initiation of the Problem Behavior

IND07 Constitutional Factors

**Protective Factors (TARGETED PROTECTIVE FACTORS)**

TPR01 Strong Bonds with Family

TPR02 Experiencing/ parental monitoring with clear rules of conduct with the family unit and involved parents in lives of their children

TPR03 Success in school performance

TPR04 Strong bonds with pro-social institutions such as the family, school, and religious organizations

TPR05 Adoption of conventional norms about drug use

TPR06 Skill building

TPR07 Problem solving

TPR08 Support

TPR09 Empowerment

TPR10 Boundaries and Expectations

TPR11 Constructive Use of Time

TPR12 Commitment to Learning

TPR13 Positive Values

TPR14 Social Competencies

TPR15 Positive Identity

**Intervening Variables**

**Availability**

IVA01 Economic Availability (Pricing)

IVA02 Retail Availability

IVA03 Social Availability

**Promotion**

IVP01 Promotional Efforts

IVP02 Advertising

**Norms**

IVN01 Community Norms

IVN02 Social Norms

**Enforcement**

IVE01 Enforcement of Laws, Regulations, Administrative Restrictions

**Individual-Level Factors**

IVI01 Biological Factors

IVI02 Social Control

IVI03 Social Learning

IVI04 General Strain

IVI05 Perception of Risk

**ATTACHMENT F**  
**APPLICANT AGENCY**  
**CONFLICT OF INTEREST POLICY STATEMENT**

Per CHURCHILL COMMUNITY COALITION's Ethics and Conflict of Interest Policies and Procedures, a conflict of interest exists when an applicant agency representative has a professional affiliation or personal or immediate family financial interest, either directly or indirectly, in a contract, business transaction, or other matter that is under consideration by any decision making body of CHURCHILL COMMUNITY COALITION.

In the event of a real or potential conflict of interest, the person involved shall promptly disclose to CHURCHILL COMMUNITY COALITION all relevant facts and circumstances relating to said interest or relationship. If you believe that you have a conflict of interest, please respond below:

1. I, and/or a family member or person with whom I have a close personal relationship, serves as an Executive Board member, or in another similar capacity, with CHURCHILL COMMUNITY COALITION. These representatives are:

\_\_\_\_\_

\_\_\_\_\_

2. I am not sure whether I have an official conflict of interest, but I believe the following information may be important:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I understand and agree to adhere to the statements above regarding conflict of interest. I understand that disclosing this information will not affect my agency's ability to secure funding from CHURCHILL COMMUNITY COALITION.

\_\_\_\_\_  
Applicant Agency Signature/Title

\_\_\_\_\_  
Date

## ATTACHMENT G

### ASSURANCES

As a condition of receiving subgranted funds from Join Together Northern Nevada (CHURCHILL COMMUNITY COALITION), the Subgrantee agrees to the following conditions:

1. Subgrantee agrees grant funds may not be used for other than the awarded purpose. In the event Subgrantee expenditures do not comply with this condition, that portion not in compliance will not be reimbursed to the subgrantee or must be refunded to the Coalition.
2. Subgrantee acknowledges the continuation of this subgrant is subject to and contingent upon sufficient funds being appropriated, budgeted, and otherwise made available by the State Legislature and/or federal sources.
3. Subgrantee agrees to submit reimbursement requests only for expenditures approved in the spending plan. Any additional expenditure(s) beyond what is allowable based on approved categorical budget amounts, without prior written approval by the Coalition, may result in denial of reimbursement.
4. Approval of subgrant budget by the Coalition constitutes prior approval for the expenditure of funds for specified purposes included in this budget. Requests to revise the approved subgrant must be made in writing using the appropriate forms and provide sufficient narrative detail to determine justification. Expenses that are incurred without prior Coalition approval may not be reimbursed. The Coalition has the authority to require an amendment for any change, but will generally follow these parameters in the process of determining whether an amendment is needed:
  - a. Any overall increases or decreases to the award will require an amendment
  - b. All increases to the Personnel category will require an amendment
  - c. Any changes to the Scope of Work will require an amendment
  - d. As long as there are no changes to the Scope of Work, increases to Personnel, or overall changes to the subgrant amount, minor categorical changes (including shifting funds to previously unfunded categories) can be accomplished as a simple change request
  - e. Numerous changes to the budget over the course of the budget period and the nature of the changes could result in the Coalition requiring an amendment
5. Any changes to the approved subgrant that will result in an amendment must be received 90 days prior to the end of the subgrant period (no later than March 30<sup>th</sup>) and completed 60 days prior to the end of the subgrant period (no later than April 30<sup>th</sup>). Amendment requests received after the 90-day deadline will be denied.
6. Recipients of subgrants are required to maintain subgrant accounting records, identifiable by subgrant number. Such records shall be maintained in accordance with the following:
  - a. Records may be destroyed by the subgrantee five (5) calendar years after the final financial and narrative reports have been submitted to the Coalition.
  - b. In all cases, an overriding requirement exists to retain records until notified in writing of resolution of any audit questions relating to individual subgrants.

Subgrant accounting records are considered to be all records relating to the expenditure and reimbursement of funds awarded under this Subgrant Award. Records required for retention includes all accounting records and related original and supporting documents that substantiate costs charged to the subgrant activity.

7. Subgrantee agrees to disclose any existing or potential conflicts of interest, as outlined in the Coalition Conflict of Interest Policy Statement, relative to the performance of services resulting from this subgrant award. The Coalition reserves the right to disqualify any grantee on the grounds of actual or apparent conflict of interest. Any attempt to intentionally or unintentionally conceal or obfuscate a conflict of interest will automatically result in the disqualification of funding.
8. Subgrantee agrees to comply with the requirements of the Civil Rights Act of 1964, as amended, and the Rehabilitation Act of 1973, P.L. 93-112, as amended, and any relevant program-specific regulations, and shall not discriminate against any employee or offeror for employment because of race, national origin, creed, color, gender, religion, age, sexual preference, disability or handicap condition (including AIDS and AIDS-related conditions).
9. Subgrantee agrees to comply with the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted thereunder contained in 28 CFR 26.101-36.999 inclusive, and any relevant program-specific regulations.
10. Subgrantee agrees to comply with the requirements of the Health Insurance Portability and Accountability Act of 1996, 45 C.F.R. 160, 162 and 164, as amended. If the subgrant award includes functions or activities that involve the use or disclosure of Protected Health Information, the Subgrantee agrees to enter into a Business Associate Agreement with the Coalition, as required by 45 C.F.R 164.504 (e).
11. Subgrantee certifies, by signing this subgrant, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency. This certification is made pursuant to regulations implementing Executive Order 12549, Debarment and Suspension, 28 C.F.R. pt. 67 § 67.510, as published as pt. VII of May 26, 1988, Federal Register (pp.19150-19211). This provision shall be required of every sub-grantee receiving any payment in whole or in part from federal funds.
12. Subgrantee agrees, whether expressly prohibited by federal, state, or local law, or otherwise, that no funding associated with this subgrant will be used for any purpose associated with or related to lobbying or influencing or attempting to lobby or influence for any purpose the following:
  - a. any federal, state, county or local agency, legislature, commission, counsel, or board;
  - b. any federal, state, county or local legislator, commission member, council member, board member, or other elected official; or
  - c. Any officer or employee of any federal, state, county or local agency, legislature, commission, council, or board.
  - d. failure to comply will result in disqualification of future funding and/or termination of current funding.

13. Coalition subgrants are subject to inspection and audit by representatives of the Mental Health and Developmental Services Division – Substance Abuse Prevention and Treatment Agency, Nevada Department of Health and Human Services, the State Department of Administration, the Audit Division of the Legislative Counsel Bureau or other appropriate state or federal agencies to:
  - a. verify financial transactions and determine whether funds were used in accordance with applicable laws, regulations and procedures;
  - b. ascertain whether policies, plans and procedures are being followed;
  - c. provide management with objective and systematic appraisals of financial and administrative controls, including information as to whether operations are carried out effectively, efficiently and economically;
  - d. determine reliability of financial aspects of the conduct of the project; and
  - e. chapter 218 of the NRS states that the Legislative Auditor, as directed by the Legislative Commission pursuant to appropriation of public money during any fiscal year. The subgrantee agrees to make available to the Legislative Auditor of the State of Nevada all books, accounts, claims reports, vouchers or other records of information that the Legislative Auditor determines to be necessary to conduct an audit pursuant to NRS 218.
14. Any audit of Subgrantee's expenditures will be performed in accordance with Generally Accepted Government Auditing Standards to determine there is proper accounting for and use of subgrant funds. It is the policy of the Coalition (as well as a federal requirement as specified in the Office of Management and Budget (OMB) Circular A-133 [Revised June 27<sup>th</sup>, 2003]) that each grantee annually expending \$500,000 or more in federal funds have an annual audit prepared by an independent auditor in accordance with the terms and requirements of the appropriate circular. A copy of the final signed audit report must be sent to the Coalition, within nine (9) months of the close of the Subgrantee's fiscal year. Failure to comply may result in consequences such as the withholding of reimbursement requests, disqualification of future funding and/or termination of current funding.

The Coalition's Policy requires that for subgrantees not required to have an audit under OMB A-133, a Limited Scope Audit on Agreed Upon Procedures must be conducted for that year by an independent, licensed Certified Public Accountant, using American Institute of Certified Public Accountants (AICPA) generally accepted auditing standards (GAAS) or attestation standards. A copy of the limited scope report must be sent to the Coalition, within nine (9) months of the close of the Subgrantee's fiscal year. Failure to comply may result in consequences such as the withholding of reimbursement requests, disqualification of future funding, and/or termination of current funding.

15. Subgrantee shall provide the Coalition with renewal or replacement evidence of insurance no less than thirty (30) days before the expiration or replacement of the required insurance. Subgrantee will provide proof of worker's compensation insurance as required by Nevada Revised Statutes Chapters 616A through 616D inclusive. Commercial general liability insurance shall be on an occurrence basis and shall be at least as broad as ISO 1996 form CG 00 01 (or a substitute form providing equivalent coverage); and shall cover liability arising from premises, operations, independent contractors, completed operations, personal injury, products, civil lawsuits, Title VII actions and liability assumed under an insured contract (including the tort liability of another assumed in a business contract). The Coalition shall be named as the Certificate Holder on the Certificate of Liability Insurance.

16. Subgrantee agrees to identify the source of funding on all printed and electronic documents purchased or produced within the scope of this subgrant, using the current Coalition approved attribution statement that is applicable to the appropriate funding sources.
17. Subgrantees are required to report within 24 hours the occurrence of an incident that may cause imminent danger to the health or safety of the clients, participants, staff of program, or a visitor to the program [NAC 458.153 3(e)]
18. Subgrantee shall adhere to the requirements of the Federal Funding Accountability and Transparency Act, wherein it stipulates that programs are not eligible for funding unless they have a Dun and Bradstreet Universal Number System (DUNS) number and maintain current registration with the Central Contractor Registry (CCR).
19. Subgrantee agrees to comply with the following:
  - 1) Provide a copy of letters of engagement, audit reports and management letters within 10 days of receipt and acceptance by the organization's governing authority. This includes a copy of any corrective action resulting from discrepancies identified by the audit;
  - 2) Be a "smoke, alcohol, and other drug free" environment in which the use of tobacco products, alcohol, and illegal drugs will not be allowed;
  - 3) Have documentation on file verifying Nevada Repository and FBI background checks were conducted on all staff, volunteers, and consultants, if subgrantee serves minors with funds awarded through this subgrant;
  - 4) Adopt and maintain a system of internal controls which results in the fiscal integrity and stability of the organization, including the use of Generally Accepted Accounting (GAAP) principles;
  - 5) Comply with all applicable rules, regulations, requirements, guidelines, and policies and procedures contained within:
    - a. 45 CFR Part 74
    - b. OMB Circular A-133
    - c. Funding source requirements
    - d. All other federal rules related to federal funding
    - e. Chapter 458 of the Nevada Revised Statutes
    - f. Chapter 458 of the Nevada Administrative Code
    - g. Mental Health and Developmental Services
    - h. Substance Abuse Prevention and Treatment Agency
    - i. All applicable state regulations and policies, and
    - j. All terms listed within this award
20. Any condition listed within the subgrant award that is not met may result in consequences such as the Coalition withholding payment of any request for reimbursement, disqualification of future funding, and/or termination of current funding.

---

Signature/Title

---

Date

**ATTACHMENT G**

Under separate document as budget is created in Excel

## **ATTACHMENT I:**

### **Grievance Procedures**

#### **I Grievance Procedure for a Coalition Employee, Board member, Coalition sub-recipient, or Coalition member**

A grievance is a claimed violation, misapplication, or misinterpretation of a specific provision of these personnel policies, which adversely affects the grievant. A grievant is an employee or group of employees at the Churchill Community Coalition who file a grievance as defined above. Alleged violations, misapplications, or misinterpretations that affect more than one employee in a substantially similar manner may be consolidated at the discretion of the Executive Director as a group grievance and thereafter represented by a single grievant. An employee may file a grievance without threat of reprisal.

For the purposes of this document, "day" shall mean a day in which the employer's main administrative office is open for business.

#### **1. Informal Resolution:**

a. Within five (5) days from the event giving rise to a grievance or from the date the employee could reasonably have been expected to have knowledge of such event, the grievant shall orally discuss his/her grievance with his/her immediate supervisor. A supervisor shall have three (3) days to give an answer to the employee.

#### **2. Formal Levels:**

a. If a grievant is not satisfied with the resolution proposed at the informal level, he/she may within five (5) days of receipt of the answer file a formal written grievance with the Executive Director on a form containing a statement describing the grievance, the section of the Agreement allegedly violated, and remedy requested. The supervisor shall, within five (5) days thereafter give a written answer to the grievant.

b. If the grievant is not satisfied with the written answer from the Executive Director, the grievant may within five (5) days from the receipt of the answer, file a written appeal to the Executive Committee, which consists of the Officers of the Board of Directors of the Churchill Community Coalition. Within ten (10) days of receipt of the written appeal, the Executive Committee shall investigate the grievance, which may include a meeting with the concerned parties, and give written answer to the grievant.

c. If the grievant is not satisfied with the written answer from the Executive Committee, the grievant may, within five (5) days from the receipt of the answer, file a written appeal to the Board of Directors of the Churchill Community Coalition. Within ten (10) days of receipt of the written appeal, the Board of Directors shall investigate the grievance which shall include a meeting with the concerned parties, and give a written answer to the grievant which shall be final and binding.

## **II Policy on Grievance Procedures for Program Participants and Subrecipient Agencies**

**The Churchill Community Coalition is committed to providing program agencies and participants an environment free of discrimination, unlawful harassment as well as a smoke and drug-free environment. In addition, program agencies and participants will be provided services as specified by grant guidelines.**

**A grievance is a claimed violation, misapplication or misinterpretation of the Churchill Community Coalition's policies or grant guidelines. A grievant is an enrolled program participant, a group of participants or a subrecipient agency that files a grievance as defined above. Alleged violations, misapplications, misinterpretation that affect more than one participant in a substantially similar manner may be consolidated at the discretion of the Executive Director as a group grievance and thereafter represented by a single grievant.**

**For the purposes of this document, "day" shall mean a day in which the Churchill Community Coalition's administrative office is open for business.**

### **1. Informal Resolution:**

**a. Within five (5) days from the event giving rise to a grievance or from the date the Churchill Community Coalition Executive Director could reasonably have been expected to have knowledge of such event, the grievant shall orally discuss his/her grievance with the Subrecipient agency or Program Director. The Subrecipient Agency or Program Director shall have three (3) days to give an answer to the participant.**

### **2. Formal Levels:**

**a. If a grievant is not satisfied with the resolution proposed at the informal level, he/she may within five (5) days of receipt of the answer file a formal written grievance with the Executive Director. The written statement should contain a statement describing the grievance, the section of the Agreement allegedly violated and a remedy requested. The Executive Director shall, within five (5) days thereafter give a written answer to the grievant.**

**b. If the grievant is not satisfied with the written answer from the Executive Director, the grievant may within five (5) days from the receipt of the answer, file a written appeal to the Executive Committee, which consists of the Officers of the Board of Directors of the Churchill Community Coalition. Within ten (10) days of receipt of the written appeal, the Executive Committee shall investigate the grievance, which may include a meeting with the concerned parties, and give written answer to the grievant.**

**c. If the grievant is not satisfied with the written answer from the Executive Committee, the grievant may, within five (5) days from receipt of the answer, file a written appeal to the Board of Directors of the Churchill Community Coalition. Within ten (10) days of receipt of the written appeal, the Board of Directors shall investigate the grievance which shall include a meeting with the concerned parties, and give a written answer to the grievant which shall be final and binding.**

**3. General Provisions:**

**a. If a grievant fails to carry his/her grievance forward to the next level within the prescribed time period, the grievance shall be considered settled based upon the decision rendered at the recent step utilized.**

**b. If a supervisor fails to respond with an answer within the given time period, the grievant may appeal to the next higher level.**

**c. The grievant may be represented by a person of his/her choice at any formal level of this procedure.**

**d. Time limits and formal levels may be waived by mutual written consent of the parties.**

**e. Proof of service shall be accomplished by certified mail or personal service.**

\_\_\_\_\_  
**Applicant Agency Signature/Title**

\_\_\_\_\_  
**Date**