



FY 2026 NOTICE OF FUNDING OPPORTUNITY (NOFO) INFORMATION GUIDANCE

For

Opioid Settlement Funds (OSF) Recovery Supports

October 1, 2026 - June 30, 2028

FY 2026 - FY 2028

Released: Monday, July 6, 2026, at 5:00 PM

Due date: Monday, July 20, 2026, at 12:00 PM (Noon) EST

Palm Beach County Board of County Commissioners (BCC)

Community Services Department (CSD)

810 Datura Street, Suite 200 West Palm Beach, Florida 33401

(561) 355-4700

Table of Contents

SECTION I: GENERAL INFORMATION	3
INTRODUCTION	3
A. PROGRAM OVERVIEW: BEHAVIORAL HEALTH AND	5
SUBSTANCE USE DISORDERS	5
B. SERVICE CATEGORY	7
C. FUNDING AVAILABILITY	9
D. REQUIRED OUTCOMES	10
SECTION II: PROPOSAL SUBMISSION	12
PUBLISH/RELEASE DATE	12
DEADLINE DATE	13
TECHNICAL ASSISTANCE	13
SCHEDULE OF EVENTS/TIMELINE	14
CONE OF SILENCE.....	16
SECTION III: SCOPE OF SERVICES.....	16
SECTION IV: CONTENTS OF PROPOSAL AND INSTRUCTIONS	20
SECTION V: APPLICATION REVIEW PROCESS	28
SECTION VI: GRIEVANCE NOTICE FORM.....	29
SECTION VII: DEFINITIONS	30
ATTACHMENT 1: PALM BEACH COUNTY RESILIENCE & RECOVERY ECOSYSTEM	31
ATTACHMENT 2: RECOVERY CAPITAL AND THE RECOVERY CAPITAL INDEX (RCI): A QUICK GUIDE	33
ATTACHMENT 3: STATE AND COUNTY OSF REPORTING AND RETENTION REQUIREMENTS.....	36
ATTACHMENT 4: NOFO SCORING AND RANKING GUIDE.....	38
NOFO FY2026-FY2028 RANKING GUIDE FOR REVIEW PANELISTS.....	44
ATTACHMENT 5: REQUIRED COVER SHEET	46
ATTACHMENT 6: INTERNAL CONTROL QUESTIONNAIRE.....	47
ATTACHMENT 7 CORE STRATEGIES AND APPROVED USE CROSSWALK.....	53
ATTACHMENT 8: ROMA LOGIC MODEL	64
ATTACHMENT 9: CONTINUOUS QUALITY MANAGEMENT/IMPROVEMENT	66
ATTACHMENT 10: BUDGET WORKSHEET.....	70
ATTACHMENT 11: SCOPE OF WORK.....	73
ATTACHMENT 12: INSURANCE REQUIREMENTS.....	74
ATTACHMENT 13 – UNIT RATE	76
ATTACHMENT 14 - OSF SUBRECIPIENT TEMPLATE.....	77

SECTION I: GENERAL INFORMATION

READ CAREFULLY AND COMPLY WITH ALL REQUIREMENTS

IN ACCORDANCE WITH THE PROVISIONS OF THE ADA, THIS NOFO AND DOCUMENTS LISTED CAN BE REQUESTED IN AN ALTERNATE FORMAT. AUXILIARY AIDS OR SERVICES WILL BE PROVIDED UPON REQUEST WITH AT LEAST THREE (3) DAYS NOTICE. PLEASE CONTACT CSD AT (561) 355-4230 OR CSD-FAARFP@PBC.GOV.

INTRODUCTION

Palm Beach County Board of County Commissioners (BCC), Community Services Department (CSD) invites eligible entities to submit proposals for Opioid Settlement Funds (OSF) for Contract period of October 1, 2026, through June 30, 2028.

Proposed substance use, and/or co-occurring disorder programs and services shall be provided within the Palm Beach County Resilience & Recovery Ecosystem of Behavioral Health and Substance Use Disorder Care (Ecosystem) (**Attachment 1**). The Ecosystem emphasizes resilience and social determinants of health with the aim toward building resilient and recovery-ready individuals and communities, as well as providing a clear system of care pathway that is person-centered and recovery-oriented. One that is also focused on individuals, improved long-term recovery outcomes and increased resiliency rather than solely on acute-and crisis-centric care.

The federal Substance Abuse and Mental Health Services Administration's (SAMHSA) 2023-2026 Strategic Plan integrates four overarching guiding principles across all policies and programs. Recovery is one of these four principles, which SAMHSA describes as follows: "Recovery promotes the expectation that all individuals, including those with Substance Use Disorders (SUDs) and mental illnesses, can thrive. Recovery is more than abstinence or symptom remission; rather it is based on the goal and expectation of living well and thriving." SAMHSA not only envisions individuals achieving recovery but also supports developing and sustaining recovery-oriented systems of care and creating recovery-facilitating environments.

The system of care's foundational elements are rooted in SAMHSA's definition of recovery from mental disorders and/or substance use disorder, which is defined as, "[a] process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential." It is developed from the four major dimensions that support a life in recovery that SAMHSA identifies as *health, home, community and purpose*. SAMHSA also recognizes that setbacks are a natural part of life and that resilience is a key component of recovery.

CSD intends that when anyone with a substance use or co-occurring behavioral health and substance use disorder seeks help, they are met with the knowledge and belief of hope and that they can recover and/or manage their conditions successfully. SAMHSA recognizes that recovery considers cultural and community expectations and is understood and embraced differently across diverse populations.

Opioid Settlement Funds

On March 22, 2022, the BCC approved participation in the Florida Opioid Agreement and Statewide Response Agreement and authorized the Mayor to execute the Subdivision Settlement and Participation Form.

The County worked with the Palm Beach County League of Cities to secure inter-local agreements with Palm Beach County Municipalities that represent more than 50% of municipalities' total population, as required by the Florida Plan. Palm Beach County submitted its *Florida Opioid Agreement and Statewide Response Agreement Qualified County Qualification Form* (Qualification Form) to the State of Florida on April 12, 2022, [FL Opioids Allocation SW Resp Agreement.pdf](#). In the Qualification Form, Palm Beach County certified:

- The County has a population of at least 300,000 and an opioid taskforce or other similar board, commission, council, or entity, including some existing sub-unit of the County's government responsible for substance abuse prevention, treatment, or recovery of which it is a member, or it operates in connection with its municipalities or others on a local regional basis.
- The County has an abatement plan that has been adopted or utilized to respond to the opioid epidemic.
- The County was, as of December 31, 2021, either providing or is contracting with others to provide substance use, prevention, recovery, and treatment services to its citizens.
- The County has entered into an inter-local agreement with at least 50% of the municipalities (by population) located within the County.

The State of Florida established three distinct opioid settlement funds: State Fund, Regional Fund, and City/County Fund. Palm Beach County receives annual disbursements from the Regional Fund as a Qualified County and the City/County Fund, wherein settlement proceeds go to cities and counties directly and the city or county determines how monies are spent. Palm Beach County will realize a total of \$97,694,428.99 in Regional Funds and \$24,791,658.48 in City/County Funds through 2039.

In November 2022, the BCC approved the establishment of the Advisory Committee on Behavioral Health, Substance Use and Co-Occurring Disorders (BHSUCOD) and declared the BCC's expressed approval of a person-centered, recovery-oriented system of care. (Resolution R2022-1340) [Resolution R2022-1340 PDF](#). The BHSUCOD is charged with enhancing the County's capacity and effectiveness in formulating behavioral health and substance use disorder policies as well as offering recommendations regarding the County's provision of services to its citizens. It is also responsible for making recommendations on responding to the opioid epidemic, as provided in section 17.42 of the Florida Statutes (2022), entitled "Opioid Settlement Clearing Trust Fund" and complies with the Florida Plan requirement to have an opioid taskforce or other similar board.

In March 2024, the BHSUCOD released a draft update to the 2022 Plan. The BHSUCOD received regular community input and established a two-week period to receive public comment on the Behavioral Health and Substance Use Disorder Plan 2024 (2024 Plan). Following this public comment period, a thematic analysis was conducted and incorporated into the final 2024 Plan that the BHSUCOD approved in May 2024. The BCC reviewed the 2024 Plan in May 2024, wherein it also received public comment. On October 22, 2024, the BCC unanimously approved the final version of the 2024 Plan, which incorporated public comments, and the opioid settlement fund expense plan as presented to the BCC. Furthermore, it also adopted the BHSUCOD's recommendation that opioid settlement funds should be spent as follows: 90 percent (90%) on social determinants of health prioritizing housing, recovery supports, care coordination, and environmental strategies to include youth, families, and community education; and 10 percent (10%) on deep-end and crisis care. In doing so, the BCC recognized that prior focuses on acute crisis care have not provided long-term results in the absence of addressing basic needs and other supportive services.

Community members and members of the BHSUCOD stressed that the funds received through the opioid settlement were gathered on the backs of individuals and families who have suffered and continue to suffer.

The memories of those lost cannot be forgotten as the County endeavors to move forward from crisis-focused care to person-oriented solutions.

The adopted 2024 Plan details the number of initiatives and their outcomes that have been executed to date to achieve a true person-centered, recovery-oriented system of care; an ecosystem of resilience and recovery that creates recovery-ready communities. It also details recommendations by the BHSUCOD pursuant to its responsibilities related to the Opioid Settlement Clearing Trust Fund.

The BHSUCOD reaffirmed its position in the 2024 Plan that one overdose death is one overdose death too many and that one death by suicide is also one too many. It wishes to see continued reductions, which may never arrive at zero, but believes tracking overdose death rates should not be the singular outcome measure of the County's efforts.

The BHSUCOD also supports the County's ongoing efforts to measure its 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.

See 2024 Plan at:

[The Behavioral Health and Substance Use Master Plan 2024](#)

A. PROGRAM OVERVIEW: BEHAVIORAL HEALTH AND SUBSTANCE USE DISORDERS

The County's collective and collaborative efforts have been directed at planning, developing and executing a comprehensive person-centered, recovery-oriented ecosystem of care. The County measures its initiatives primarily through a resilience and recovery capital framework because of its ability to capture resilience, health, well-being, social determinants of health and risk factors. Details on each of the levels can be found in **(Attachment 1)**

Resilience and Recovery Capital Indexing

CSD utilizes the Recovery Capital Index (RCI) to measure and assess resilience and recovery capital (**RCI Quick Guide Attachment 2**). It was deployed, system wide in 2019 and is key to measuring the system of care's success. The RCI is a validated assessment tool that provides a comprehensive picture of a person's well-being and allows for a personalized approach to care. It measures health and wellness using three domains (social, personal and cultural capital) and is comprised of twenty-two components. The components provide a comprehensive baseline and, over time, allows for tracking of individual progress and tailored support, as well as intervention effectiveness.

An alternative version, called the Resiliency Capital Index, was developed over time for family members and loved ones of people struggling with SUD. In the resilience version, any reference to "recovery" is removed and replaced with notions of life improvement, wellness, and well-being.

In September 2025, *CommonlyWell* re-assessed all RCI completions since December 2019, and normalized scoring due to the effects of COVID (2019-2021) and screened out participants that completed more than one RCI within a seven (7) day period. Ultimately, 7,200 RCI responses were analyzed with the following Mean (Average) and Median component scores. The five highest Average component scores demonstrate Resilience Factors and the five lowest Average component scores indicate Risk Factors.

Resilience Indicators	Mean Score	Median	Risk Indicators	Mean Score	Median
Sense of Purpose	81.0	87.5	Financial Well-Being	41.2	41.7
Beliefs	76.3	77.1	Knowledge and Skills	48.9	50.0
Spirituality (Component)	73.6	75.0	Employment	50.6	50.0
Healthy Lifestyle	72.2	75.0	Basic Needs (Component)	55.8	50.0
Safety	72.2	75.0	Transportation	56.9	54.2

Additional analysis identified the following factors that most strongly influence the top end of scores (resilience):

High-scoring and strongly associated components:
 Social Healthy Lifestyle (Mean: 72.2; Median 75.0)
 Social Safety (Mean: 72.2; Median 75.0)
 Cultural Beliefs (Mean: 76.3; Median 75.0)
 Cultural Spirituality (Component) (Mean: 73.6; Median 77.1)
 Cultural Sense of Purpose (Mean: 81.0; Median: 87.5)

Conclusion: Improvements in **Social Capital** (especially healthy lifestyle/activities, safety, support and network) and **Cultural Capital** (purpose, beliefs/values, spirituality) are the strongest characteristics of high total recovery capital.

Low-scoring and strongly associated components at the low end of scores (risk) that were identified are:

Personal Financial Well-Being (Mean: 41.2; Median: 41.7)
 Personal Employment (Mean: 50.6; Median: 50.0)
 Personal Knowledge & Skills (Mean: 48.9; Median 50.0)
 Personal Basic Needs (Mean: 55.8; Median: 54.2)
 Personal Transportation (Mean: 56.9; Median 50.0)

An additional barrier that the scores show, which is not in the bottom five risk factors but still on the low side, is Social Access to Healthcare (Mean: 59.7; Median: 58.3)

What this means is that RCI scores that fall on the lower end are largely driven by economic and access to basic needs (finances, employment, skills, transportation). Thus, these are the clearest risk levers applicants should consider for program design, directionality and funding priorities to influence positive impact, particularly in building recovery-ready and resilient communities.

Social Determinants of Health

Critical to the BCC's goal of establishing a person-centered, recovery-oriented ecosystem of care is placing focus on social determinants of health (SDoH). CSD has engaged Florida Atlantic University's (FAU's) Center for Integrated Recovery and Wellness Studies to continue its research related to resilience and recovery capital and its relationship to SDoH to strengthen individual and community health, wellness and recovery from substance use disorder and mental illness.

The U.S. Centers for Disease Control and Prevention (CDC), Office of Disease Prevention and Health Promotion define SDoH as the conditions in the environments where people are born, live, learn, work,

play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. SDoH are grouped into five domains: economic stability, education access and quality, health care access and quality, neighborhood and built environment, and social and community context.

SAMHSA recognizes the importance of addressing SDoH as key levers to achieving improved outcomes for people with behavioral health conditions. The White House Domestic Policy Council (DPC) in its 2023 *Playbook to Address Social Determinants of Health* emphasizes the fact that improving health and well-being across America requires addressing the social circumstances and related environmental hazards and exposures that impact health outcomes.



An inability to meet these social needs puts individuals at higher risk for exacerbating health conditions such as heart disease, stroke, depression, cancer, and diabetes, according to the DPC. Compounding the problem, unmet social needs can cause major disparities in health outcomes that may be predetermined by geography, race, ethnicity, age, income, disability status, and several other factors.

As the Palm Beach County RCI data discussed above demonstrate, the primary factors contributing to low RCI scores are based on SDoH factors (personal financial well-being, employment, knowledge and skills, basic needs, transportation, and social access to healthcare).

B. SERVICE CATEGORY

Palm Beach County Board of Commissioners (BCC) Community Services Department (CSD) invites eligible entities to submit proposals for the Opioid Settlement Funds Recovery Supports Service Category as defined in this NOFO, for Contract Terms commencing October 1, 2026, through June 30, 20278.

Recovery Supports Category

The County is seeking qualified applicants with demonstrated experience in the development, implementation, management, and support of peer-led Recovery Community Organizations (RCOs) and Recovery Community Centers (RCCs), collectively referred to as Recovery Hubs, throughout Palm Beach County.

Applicants must demonstrate expertise in recovery-oriented systems of care and a comprehensive understanding of the critical role that peer-led services play in promoting long-term recovery for individuals with substance use disorders (SUD) and co-occurring mental health disorders. Proposed Recovery Hubs should provide person-centered, recovery-focused services that enhance access to care, reduce barriers to treatment and recovery, and improve community integration and long-term recovery outcomes.

Applicants shall also demonstrate a clear strategy for developing and sustaining collaborative partnerships with key stakeholders across Palm Beach County, including, but not limited to, the Healthcare District of Palm Beach County, Southeast Florida Behavioral Health Network (SEFBHN), licensed treatment providers, community-based organizations, healthcare systems, specialty courts, the criminal justice system, law enforcement, fire rescue agencies, transportation providers, CareerSource Palm Beach County, legal service organizations, housing providers, and other recovery support partners.

The proposal should describe how these partnerships will create an integrated, coordinated, and efficient system of care that strengthens referral pathways, eliminates duplication of services, improves care coordination, and ensures individuals can access the full continuum of behavioral health, substance use,

recovery support, and social determinants of health services. Applicants should further demonstrate their ability to leverage community resources and establish sustainable collaborative networks that advance a "no wrong door" approach to service delivery for Palm Beach County residents experiencing behavioral health, substance use, and co-occurring disorders.

Applicants will be expected to establish or continue operating a countywide RCO that supports multiple RCCs/Recovery Hubs and promotes person-centered, recovery-focused services. Particular emphasis shall be placed on serving communities disproportionately impacted by substance use disorders and co-occurring mental health conditions, while fostering recovery capital, community engagement, and long-term recovery outcomes.

Recovery Hubs shall function as non-clinical, peer-driven environments and shall not provide clinical treatment services or any services requiring county, state, or federal licensure. Instead, Recovery Hubs shall offer recovery support services designed to assist individuals at all stages of recovery and to strengthen community-based recovery networks.

Recovery Hubs should employ Peer Recovery Support Specialists who are certified through the Florida Certification Board or obtain certification within the timeframe required by applicable state standards. Peer staff should have lived experience and be equipped to provide mentoring, advocacy, navigation, and support services that promote sustained recovery.

At a minimum, Recovery Hubs should provide:

- Peer-led recovery support services and recovery coaching;
- Recovery-focused programming and mutual aid opportunities;
- Assistance with employment, housing, transportation, education, and other social determinants of health;
- Training, workforce development, and leadership opportunities for individuals in recovery;
- Community outreach, engagement, and recovery advocacy activities;
- Family support and recovery education opportunities; and
- Additional community-driven services that reflect the unique needs, strengths, and priorities of the populations and neighborhoods being served.

Applicants should demonstrate the ability to build partnerships with community stakeholders, promote recovery inclusion, reduce stigma, and support the development of a sustainable recovery ecosystem throughout Palm Beach County.

It is expected that applicants obtain or maintain Alliance for Recovery Centered Organizations (ARCO) Membership. As well as ensuring that peer support services are led by individuals with lived experience and in recovery. Peer support services have been recognized as critical to long-term recovery outcomes. The Substance Abuse and Mental Health Services Administration (SAMHSA) and the American Society of Addiction Medicine (ASAM) recognize recovery supports as integral to the spectrum of recovery. Research has shown that there is a direct correlation between the amount of time spent at an RCC and an individual's sustained recovery (Kelly, J. 2015, "Characterization and Evaluation of Addiction Recovery Community Centers").

Priority population: Marginalized Communities

Priority Population: Individuals (Young adults, adults, and Families) with substance use and/or co-occurring disorders. Individuals who are involved in multiple systems of care (i.e. Justice System, Child Welfare, Homelessness) should be given priority.

In addition, priority will be given to Applicants that provide services to Marginalized Communities within the following areas: Tri-city Glades, Riviera Beach, West Palm Beach, Lake Worth Beach, and Delray Beach. Substance use and behavioral health disorders are significant public health issues that impact people across all demographics. Marginalized groups, including those involved in the criminal justice system, living in poverty, individuals who are uninsured and/or underinsured, and people with disabilities, disproportionately face high rates of substance use and/or co-occurring disorders. Also, marginalized communities have disproportionately lower rates of access to treatment and healthcare services and higher rates of incarceration and recidivism.

OSF Funding Requirements

Individuals served through OSF funding must be residents of Palm Beach County, and all activities must take place within Palm Beach County.

Monies from the opioid settlement fund shall be expended to expand the availability of services and supports described in the Master Plan and not to supplant funding otherwise available for those purposes. OSF funding is to be utilized as funding of last resort, meaning that other existing funding, such as insurance to pay for services, shall be exhausted before OSF funding is used. Funding shall be used exclusively to fund the programs or projects that align with the goals of the 2024 Plan and are a Core Strategy and/or an Approved Use under the State Opioid Settlement Agreement.

Proposals submitted for the OSF Funding shall:

- Demonstrate alignment with Palm Beach County's Resilience and Recovery Ecosystem of Behavioral Health and Substance Use Disorder Care. **(See Attachment 1)**
- Demonstrate alignment with the 2024 Plan. [The Behavioral Health and Substance Use Master Plan 2024](#)
- Identify the Core Strategies (Schedule A) and/or Approved Uses (Schedule B) that the proposal meets and identify how funding will be allocated and used for each core strategy and/or approved use.
- Agree to utilize evidence-based or evidence-informed practices with fidelity.
- Agree to measure individual and/or community resilience through regular administration of the Resiliency/Recovery Capital Index Survey.
- Agree to participate in the County's *Shaping a Healthier Palm Beach County* campaign.
- Agree to participate in research related to initiatives.
- Comply with the OSF Programmatic Requirements.
- Comply with State and County reporting requirements for OSF funds. **(See Attachment 3)**
- Comply with 2 Code of Federal Regulations (CFR) Part 200, which provides uniform administrative requirements, cost principles and audit requirements applicable to this funding source. <https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200>.

C. FUNDING AVAILABILITY

To be considered for any funding, an applicant must complete and fully submit at least one (1) proposal in the Recovery Supports- Recovery Hub subcategory.

The BCC determines available funding for each of the fiscal years covered by this NOFO. The total funding available for the contract term is \$1,300,000, contingent on appropriation by the BCC.

Category	Subcategory	Estimated Funds Available
Recovery Supports (Young adults, Adults, and Families)	Recovery Hub	\$1,300,000
	Total	\$1,300,000

D. REQUIRED OUTCOMES

Recovery Supports Category

Programs and services in the Recovery Supports Category shall address the following outcomes, outputs, and performance measures:

Recovery Supports – Outputs

Outcome	Participants will maintain engagement at the Recovery Community Center
Indicator	Number of new RCC participant visits
Indicator	Number of returning RCC participant visits
Indicator	Number of RCC participants who attended training
Indicator	Number of RCC participants attended social community events

Recovery Supports- Outcomes

Outcome	Participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to the last recorded RCI within the fiscal year
Indicator (Year 1)	70% of participants will improve resilience as evidenced by a 1 (one) point increase on the RCI from baseline to the last recorded RCI within the fiscal year.
Indicator (Year 2)	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 for program duration (as defined by Agency).
Indicator (Year 1)	70% of Participants will remain engaged in services for program duration (as defined by the Agency).
(Year 2 & 3)	80% of Participants will remain engaged in services for program duration (as defined by the Agency).

Outcome	Participants will gain employment.
Indicator	% of participants will gain employment within xx months from program enrollment.

Outcome	Participants will enroll in college/ vocational education.
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Indicator	% of participants will enroll in college/ vocational education within xx months from program enrollment.
Outcome	Participants will acquire housing.
Indicator	% of participants will acquire housing within xx months from program enrollment.

ADDITIONAL REQUIREMENTS FOR PROPOSALS

Measurement Tools

The RCI is to be utilized with Young Adult and Adult populations.

Outcomes

Program Outcomes are required to be in the logic model. By submitting a proposal, the Applicant Agency agrees to address and measure the outcomes noted in this NOFO Guidance document. Applicants are to use the outcome indicators as identified in this NOFO for each proposal submitted.

Continuous Quality Management (CQM)

All proposals will be required to develop and implement a CQM Plan and may allocate up to 5% of funds awarded to support the organization's CQM Plan.

Data Collection and Tools

Applicant Agencies serving individuals with Substance Use and Co-Occurring Disorders must agree to utilize and adhere to protocols for ongoing use of the RCI to measure resiliency (recovery) capital, which is every 30 days, as well as utilize the results of the RCI survey to develop an individualized recovery (resiliency) plan.

Applicant Agencies are required to administer Satisfaction Surveys, at minimum, at the time of discharge. It is recommended that surveys are distributed to participants while involved in services so that results can be used to modify approaches and/or strategies during program implementation. Survey results are to be reported on a rolling quarterly basis via email to the Grant Compliance Specialist for the Office of Behavioral Health and Substance Use Disorder (OBHSUD).

Applicant Agencies are required to submit utilization and outcomes reports quarterly via SAMIS, with utilization reports submitted within the Fiscal module (along with invoices) and outcomes reports in the Delivery module.

Applicant Agencies are required to comply with State and County OSF reporting requirements. (See **Attachment 3**)

Applicant Agencies will be required to register with the State to gain access to the Florida Opioid Implementation and Financial Reporting System (FOIFRS). To obtain access to FOIFRS, an access request email should be sent to: HQW.SAMH.Opioid.Data.Access.Support@myflfamilies.com

Data Software

Applicant Agencies applying for funding will be required to enter data into the Client Management Information Services (CMIS) Software system, or the Agency may seek approval from the County to use an approved data tracking spreadsheet.

Applicant Agencies will be required to register for access to the Online System for Community Access to Resources and Social Services (OSCARSS) system and utilize the Resource & Referral Portal.

<https://secure.co.palm-beach.fl.us/CommSvcLogin/Main/WelcomePage.aspx>

See **SECTION VII – DEFINITIONS** for definitions of populations and key principles.

Continuous Quality Management Projects

Applicant Agencies will be required to submit a Continuous Quality Management Project. This CQM submission will not be included as part of scoring.

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.

Through the initial term of the Agreement, an agency will evaluate its progress toward achieving the target goals stated in the program logic model. After self-assessment of its performance, agencies will work with the County to identify which outcome on the logic model it wants to improve, what strategy or intervention it will use to improve the CQM outcome and what its targeted change will be.

The targets and outcomes listed in the logic model will be evaluated, at a minimum, on an annual basis.

SECTION II: PROPOSAL SUBMISSION

Applicants shall submit project applications, along with required supporting materials, through the CSD NOFO submission website, located at:

<https://pbcc.samis.io/go/nofo/>

All documents must be submitted by the deadline date and time, per application instructions.

Late applications will not be accepted or reviewed.

Applicants must submit at least one (1) online application package to be considered for funding.

Note: Proposals without a specified Service Category will be considered non-responsive and will not be reviewed, scored or ranked. Each will be scored and ranked using the accompanying OSF scoring and ranking guide. (See Attachment 4)

PUBLISH/RELEASE DATE

July 6, 2026, at 5:00 PM EST

DEADLINE DATE

Proposals submitted through the online application website must be completed and received by **12:00 PM (Noon) EST on Monday, July 20, 2026**. Proposals submitted after 12:00 PM. to the website will not be accepted or reviewed.

TECHNICAL ASSISTANCE

CSD will hold a **Technical Assistance conference** for Applicants on **July 7, 2026**, from 10:00 AM to 12:00 PM. This meeting will be available in person at the CSD Basement Conference Room or virtually via WebEx. Please check the CSD website for changes to the meeting location.

<https://pbc-gov.webex.com/pbc-gov/j.php?MTID=m2da54bfb9c8474cb6bd8e6ced1ee8cc1>

Meeting number/ Access code: 2311 156 5983

Password: 3ZFqExiJm43 (39373945 when dialing from a phone or video system)

Join by phone

+1-904-900-2303 United States Toll (Jacksonville)

1-844-621-3956 United States Toll Free

Members of the public who plan to attend the meeting in person are asked to notify CSD as soon as possible by email at CSD-FAARFP@PBC.GOV .

Communication Media Technology (CMT) may be accessed at the Community Services Department, located at 810 Datura Street, West Palm Beach, FL 33401, in the Basement Conference Room. The Community Services Department is open to the public.

Anyone interested in additional information may contact CSD by mail at 810 Datura Street, West Palm Beach, FL 33401, (ATTN: OSF NOFO) or by email at CSD-FAARFP@PBC.GOV .

Also, those wishing to make public comments may contact CSD by sending your comments via traditional mail to CSD at 810 Datura Street, West Palm Beach, FL 33401, (ATTN: OSF NOFO) or by email at CSD-FAARFP@PBC.GOV .

Public participation is solicited without regard to race, color, national origin, age, sex, religion, disability or family status.

In accordance with the Americans with Disabilities Act (ADA), persons with disabilities requiring accommodations in order to participate in this public meeting should contact CSD-FAARFP@PBC.GOV no later than three (3) business days prior to such meeting.

Persons who require special accommodations under the ADA or persons who require translation services for a meeting (free of charge), are asked to please call (561) 355-4230 or email CSD-FAARFP@PBC.GOV at least five business days in advance. Hearing impaired individuals are requested to telephone the Florida Relay System at #711.

Technical assistance questions, including any questions or clarifications about the NOFO must be made in

writing and emailed to CSD-FAARFP@PBC.GOV. All questions and answers are required to be made available to the public and all applicants. Questions and answers will be posted and continuously updated through July 17, 2026, at:
<https://discover.pbcgov.org/communityservices/financiallyassisted/Pages/RFP.aspx>

The deadline for submitting questions to CSD is 12:00 PM (Noon) EST on July 15, 2026, which is one (1) business day before the submission deadline.

This NOFO is issued, as well as any addenda, for the BCC by CSD.

CONTACT PERSONS FOR OSF NOFO:

The contact person is CSD-FAARFP@PBC.GOV.

SCHEDULE OF EVENTS/TIMELINE

FY 2026 OSF RECOVERY SUPPORTS NOFO TIMELINE

DATE	ITEM	RESPONSIBLE
July 6, 2026	FY 2026 NOFO for OSF is posted for release on October 10, 2025, in Advantage	CSD
July 6, 2026	FY 2026 NOFO for OSF is posted on the FAA NOFO Website: https://discover.pbcgov.org/communityservices/financiallyassisted/Pages/RFP.aspx	CSD
July 6, 2026	OSF NOFO Release Day - Available for Public at 5:00 PM EST	CSD
July 7, 2026	Virtual Technical Assistance Conference 10:00 AM EST	CSD and Applicants
July 14, 2026	OSF NOFO Review Panelists Training	CSD
July 17, 2026	Final day to submit written questions 12:00 PM (Noon) EST	Applicants
July 20, 2026	OSF NOFO PROPOSAL SUBMISSION DEADLINE – 12:00 (Noon) PM EST	Applicants
July 20, 2026	Cone of Silence Begins for OSF NOFO	CSD, Applicants, Reviewers, BCC
July 27, 2026	Recovery Supports – HUB Review Panels meet to review and score proposals	Contracts, BHSUD and Reviewers
July 27, 2026	Staff reconciles review panel scoring, ranking, and funding availability to develop recommended allocations	CSD
July 28, 2026	Staff posts scoring results on the Webpage	CSD
August 6, 2026	Final date to file a Funding Grievance	Applicants

August 13, 2026	Presentation of FY 2026-2028 OSF Funding Recommendations to BHSUCOD	CSD BHSUD
October 6, 2026	OSF Contracts Presented to the BCC for Approval	CSD
October 6, 2026	Cone of Silence Ends for FY 2026 NOFO for OSF	CSD, Applicants, Reviewers, BCC

EXPENSE OF PROJECT APPLICATION

All expenses incurred with the preparation and submission of proposals to the County, or any work performed in connection therewith, shall be borne by applicants. No payment will be made for proposals received or for any other effort required of or made by applicants prior to commencement of work as defined by an agreement approved by the BCC.

PROJECT APPLICATIONS OPEN TO THE PUBLIC

Applicants are hereby notified that all information submitted as part of, or in support of, OSF applications will be available for public inspection in compliance with the Florida Public Records Act.

ELIGIBILITY

Qualified entities submitting applications for OSF funding shall meet all statutory and regulatory requirements.

Applicants must be nonprofit organizations. For-profit and government entities are not eligible to apply for or to be subrecipients of OSF funds. All subrecipients must at a minimum, meet the eligibility standards described below:

Nonprofit Applicants must:

- Hold current and valid 501(c)(3) status as determined by the Internal Revenue Service.
- Hold current and valid 501(c)(4) status as determined by the Internal Revenue Service. * Funding cannot be used for Lobbying- See OSF BHSUD Contract Template **Attachment 14**.
- Be chartered or registered with the Florida Department of State.
- Be incorporated for at least one agency fiscal year.
- Have provided the services for at least six (6) months.
- Demonstrate accountability through the submission of acceptable financial audits performed by an independent auditor. If unable to provide an acceptable financial audit performed by an independent auditor, a fiscal agent will be considered as applicable.
- Create a Vendor Registration Account OR activate an existing Vendor Registration Account through Palm Beach County Purchasing Department's Vendor Self Service (VSS) system, which can be accessed at:
<https://pbcvssp.co.palm-beach.fl.us/webapp/vssp/AltSelfService>.
- Maintain contractual liability insurance substantially similar to the terms listed in **Attachment 12: INSURANCE**, if awarded funding.

While not a requirement, Applicants are strongly encouraged to hold accreditation from Nonprofits First. Agencies are encouraged to join Nonprofits First as a Member.

CONE OF SILENCE

This NOFO includes a Cone of Silence. The Cone of Silence will apply from the date the NOFO is due back to the department, which is **July 20, 2026**, until the final OSF contract agreements are approved by the BCC (approximately October 6, 2026).

All parties interested in submitting a proposal are hereby advised of the following:

Lobbying - Cone of Silence

Applicants are advised that the "Palm Beach County Lobbyist Registration Ordinance" (Ordinance) is in effect. A copy of the Ordinance can be accessed at:

https://discover.pbcgov.org/Intergovernmental-Affairs/legislativeaffairs/Misc_Documents/Lobbyist_Registration_Ordinance.pdf

Applicants 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 NOFO between any Applicant/Respondent or Applicant's/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.

An Applicant's representative shall include but not be limited to the Applicant's employee, partner, officer, director or consultant, lobbyist, or any, actual or potential subcontractor or consultant of the Applicant.

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 technical assistance conferences, and contract negotiations during any public meeting. The Cone of Silence shall not apply to contract negotiations between any employee and the intended awardee and any dispute resolution process following the filing of a protest. The Cone of Silence shall terminate at the time that the BCC awards or approves a contract, when all proposals are rejected, or when an action is otherwise taken that ends the solicitation process.

SECTION III: SCOPE OF SERVICES

ANTICIPATED TERMS OF SERVICE

OSF Funding Term:	October 1, 2026 – June 30, 2028,
OSF Start Date:	October 1, 2026 (State 2026-2027 Fiscal Year)
OSF End Date:	June 30, 2028 (State 2027-2028 Fiscal Year)

All contracts are contingent upon annual appropriations and approval by the BCC.

TERMS AND CONDITIONS

1. Proposal Guarantee

Proposer guarantees their commitment, compliance, and adherence to all requirements of the NOFO by submission of their proposal.

2. Modified Proposals

Proposer may save any unfinished on-line proposal and continue to modify the proposal until the proposal is submitted. Once submitted, the proposal can no longer be modified.

3. Late Proposals, Late Modified Proposals

Proposals and/or modifications to proposals submitted after the deadline are late and will not be considered.

4. Palm Beach County Office of the Inspector General Audit Requirements

Palm Beach County has established the Office of the Inspector General in Palm Beach County under Article XII, Section 2-422, as may be amended, to provide independent oversight of County and Municipal operations (Article XII, Section 2-423). It also has the authority to detect and prevent fraud, waste, mismanagement, misconduct, and other abuses by elected and appointed officials and employees, agencies and instrumentalities, contractors, their subcontractors and lower tier subcontractors, and other parties doing business with the county or a municipality and/or receiving county or municipal funds. Its aim is to promote economy, efficiency and effectiveness in government and conduct audits and investigations of, require production of documents from, and receive full and unrestricted access to the records.

The Inspector General has the power to subpoena witnesses, administer oaths and inspect the activities of the agency, its officers, agents, employees, and lobbyists in order to ensure compliance with contract requirements and detect corruption and fraud. Failure to cooperate with the Inspector General or interference or impeding any investigation shall be in violation of Palm Beach County Code 2-421 through 2-440, and punished pursuant to Section 125.69, Florida Statutes, in the same manner as a second-degree misdemeanor.

5. Commencement of Work

The County's obligation will commence when the contract is approved by the Board of County Commissioners or their designee and upon written notice to the proposer. The County may set a different starting date for the contract. The County will not be responsible for any work done by the proposer, even work done in good faith, if it occurs prior to the contract start date set by the County.

6. Non- Discrimination

The COUNTY is committed to assuring equal opportunity in the award of contracts and complies with all laws prohibiting discrimination. Pursuant to Palm Beach County Resolution R2025-0748, as may be amended, the AGENCY warrants and represents that throughout the term of the Agreement, including any renewals thereof, if applicable, all of its employees are treated equally during employment without regard to race, color, religion, disability, sex, age, national origin, ancestry, marital status, familial status, sexual orientation, or genetic information. Failure to meet this requirement shall be considered default of the Agreement.

7. As a condition of entering into this Agreement, the AGENCY represents and warrants that it will comply with the COUNTY'S Commercial Nondiscrimination Policy as described in Resolution R2025-0748, as amended. As part of such compliance, the AGENCY shall not discriminate on the basis of race, color, national origin, religion, ancestry, sex, age, marital status, familial status, sexual orientation, disability, or genetic information in the solicitation, selection, hiring or commercial

treatment of subcontractors, vendors, suppliers, or commercial customers, nor shall the AGENCY retaliate against any person for reporting instances of such discrimination. The AGENCY shall provide equal opportunity for subcontractors, vendors and suppliers to participate in all of its public sector and private sector subcontracting and supply opportunities, provided that nothing contained in this clause shall prohibit or limit otherwise lawful efforts to remedy the effects of marketplace discrimination that have occurred or are occurring in the COUNTY'S relevant marketplace in Palm Beach County.

The AGENCY understands and agrees that a material violation of this clause shall be considered a material breach of this Agreement and may result in termination of this Agreement, disqualification or debarment of the company from participating in COUNTY contracts, or other sanctions. This clause is not enforceable by or for the benefit of, and creates no obligation to, any third party. AGENCY shall include this language in its subcontracts.

8. Additional terms and conditions will be included in the program agreement and are contained on the CSD website.
9. OSF funding requires compliance with 2 CFR Part 200, State and County requirements.

10. Required Elements for Proposals

All proposals must:

- Demonstrate alignment with Palm Beach County's Resilience and Recovery Ecosystem of Behavioral Health and Substance Use Disorder Care. **(See Attachment 1)**
- Demonstrate alignment with the 2024 Plan. [The Behavioral Health and Substance Use Master Plan 2024](#)
- Identify the Core Strategies and/or Approved Uses that the proposal meets and identify how funding will be allocated for each Core Strategy or Approved Use.
- Agree to utilize evidence-based or evidence-informed practices with fidelity.
- Agree to measure individual recovery/resilience through regular administration of the Resiliency/Recovery Capital Index Survey.
- Agree to participate in the County's *Shaping a Healthier Palm Beach County* campaign.
- Agree to participate in research related to initiatives.
- Comply with the OSF Programmatic Requirements.
- Comply with State and County reporting requirements for OSF funds. **(See Attachment 3)**
- Comply with the requirements of **2 Code of Federal Regulations (CFR) Part 200**, as amended, including all applicable Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. The Contractor shall ensure that all activities, costs, documentation, and reporting associated with this funding source are conducted in accordance with the provisions of 2 CFR Part 200 and any other applicable federal, state, and local laws, regulations, and grant requirements.

Additionally, all proposals shall be:

- Scalable
- Data-driven
- Incorporate and integrate into planning SAMHSA's definition of Recovery and the four (4) major dimensions that support a life in recovery.

- Include Multisystemic Resilience Factors in the implementation of the proposal, such as:
 - Providing services through a trauma informed lens
 - Instilling a sense of belonging, connection
 - Instilling hope
 - Instilling purpose and a sense of meaning
 - Supportive of positive habits, routines, rituals, traditions, celebrations

11. Scoring

Qualified entities are invited to submit applications to provide services to Palm Beach County residents. The Review Panel will score all proposals based on how clear the proposal is, how comprehensively it addresses the subcategory, including what was noted in terms of what the County is looking to fund, and overall, how responsive it is to the requirements that have been outlined in this NOFO. Although scoring is done individually by each panelist, part of the scoring process includes discussing amongst the panelists, each proposal's strengths, missed opportunities and overall quality.

The SCORE awarded to a proposal is reflective of how competitive the proposal is. (See **Attachment 4**)

12. Ranking

After all proposals in the subcategories are scored, the panel of reviewers will rank all proposals based on how critical the services are to the ecosystem of care. The order of ranking must be by consensus of all reviewers on the panel. (See **Attachment 4**)

13. Government and Corporate Activism

In accordance with section 287.05701, Florida Statutes, Palm Beach County and CSD, including all members of any Review Panel team, will not (1) give preference to a Proposer based on the Proposer's social, political, or ideological interest and (2) request any information or documentation relating to a Proposer's social, political, or ideological interests.

14. Experiencing Unforeseen Technical Issues:

An applicant that experiences unforeseen technical issues beyond its control with the WebAuthor/SAMIS system, which prevents it from submitting its application by the deadline, must contact the CSDFAARFP@PBC.GOV to report the technical issue, Monday through Friday between the hours of 9:00 a.m. and 5:00 p.m., Eastern Daylight Savings Time (EDT) within 24 hours after the application deadline to request approval to submit its application after the deadline. The applicant's email must describe the technical difficulties, and must include a timeline of the applicant's submission efforts. Note: CSD does not automatically approve requests to submit a late application even in the event of technological difficulties. After CSD reviews the applicant's request, and verifies the reported technical issues, CSD will inform the applicant whether the request to submit a late application has been approved or denied. If CSD determines that the late application submission was due to the applicant's failure to follow all required procedures, CSD will deny the applicant's request to submit its application.

The following conditions generally are insufficient to justify late submissions:

- Failure to follow each instruction in the CSD NOFO.
- Failure to complete all required questions within the application.
- Technical issues with the applicant's computer or information technology environment, such as issues with firewalls or browser incompatibility.

SECTION IV: CONTENTS OF PROPOSAL AND INSTRUCTIONS

The NOFO Guidance as well as additional resources and information are available at:

<http://discover.pbcgov.org/communityservices/financiallyassisted/Pages/RFP.aspx>

<http://discover.pbcgov.org/BusinessOpportunities/Pages/default.aspx>

Paper copies are available upon request.

The OSF Recovery Supports Application and NOFO Guidance is for reference purposes only. Proposals must be submitted through the CSD NOFO Application Submission website.

All agencies applying for OSF funds must complete and submit all items listed below.

The deadline for application package submission is **July 20, 2026, at 12:00 PM (Noon) EDT**. To be considered for funding, Application Packages must be timely submitted on the CSD NOFO Application Submission Website: <https://pbcc.samis.io/go/nofo/>

Applications may be revised prior to final submission; however, once a proposal is submitted, it cannot be changed.

If it is not submitted, it cannot be considered.

Applications must be:

- Written in plain language in a narrative that fully addresses all questions in the Recovery Supports NOFO
- Aligned with this NOFO Guidance Document.
- Understandable to people unfamiliar with the agency, your programs or areas of expertise.
- Specifically addresses the funding priorities set out in this NOFO.

Please refer to this NOFO Guidance for further description or definitions.

OSF Review Panel meetings, during which the Panel will review and score all applications, are open to the public and scheduled as follows:

July 27, 2026, at 10:00 AM for Recovery Supports proposals

End times for the Review Panel meetings will be dependent on the number of applications received. Please check the CSD website for any changes to the meeting location. Please note that although a Webex link is provided, reviewers are expected to be physically present at 810 Datura Street, in either the Basement Conference Room or the Second Floor Human Services Conference Room. Members of the public are encouraged to attend in person as well. There will be no time set aside for Public Comment at the proposal review sessions; however, members of the public are welcome to hear the review teams discuss the proposals.

OSF Review Panel Scoring and Ranking Public Meetings

Recovery Supports

July 27, 2026, (10:00 am to 4:00 pm)

CSD's Basement Conference Room (Hybrid in person and virtual)

Reviewers are expected to attend in-person.

View the FAA Website for the Virtual Meeting link:
<https://discover.pbcgov.org/communityservices/financiallyassisted/pages/rfp.aspx>

Members of the public who plan to attend the meeting in person are asked to please notify CSD as soon as possible at CSD-FAARFP@PBC.GOV.

Communication Media Technology (CMT) may be accessed at the following location: 810 Datura Street, West Palm Beach, FL 33401, Basement Conference Room.

People wishing to attend in person may do so at 810 Datura Street, West Palm Beach FL 33401, Basement Conference Room.

Anyone interested in additional information may contact CSD by mail at 810 Datura Street, West Palm Beach, FL 33401 (ATTN: OSF NOFO), or by email at CSD-FAARFP@PBC.GOV.

Also, those wishing to make public comments may contact CSD by sending your comments via traditional mail to CSD at 810 Datura Street, West Palm Beach, FL 33401 (ATTN: OSF NOFO), or email at CSD-FAARFP@PBC.GOV.

Public participation is solicited without regard to race, color, national origin, age, sex, religion, disability or family status.

In accordance with the Americans with Disabilities Act (ADA), persons with disabilities requiring accommodations in order to participate in this public meeting can contact CSD-FAARFP@PBC.GOV or call (561) 355-4230 no later than three (3) business days prior to such meeting.

Individuals who require special accommodations under the ADA or persons who require translation services for a meeting (free of charge), please call (561) 355-4230 or email CSD-FAARFP@PBC.GOV at least five business days in advance. Hearing impaired individuals are requested to telephone the Florida Relay System at #711.

FY 2026 OSF RECOVERY SUPPORTS NOFO APPLICATION COMPONENTS

****START A NEW APPLICATION – DO NOT USE AN OLD ONE****

Proposal

Federal ID Agency Name

Doing Business As (DBA)

Please indicate name(s) by which agency is known or does business.

Address City State

Zip Code NOFO/RFP

Additional Editors Program Name

OSF Recovery Supports Application Required FY 2026 - 2028 Cover Sheet

Click to download the REQUIRED OSF RECOVERY SUPPORTS NOFO FY 2026 - 2028 Cover Sheet Template. See Attachment 5.

Please upload once you have completed the form.

Please upload your document in the same format as the template: **.doc OR .docx OR .pdf**

Please name your document as such: *(Agency Name or Initials)*CoversheetFY26

NOFO Information Document

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

General Contact Information

CEO/Executive Director Name and Title **CEO/Executive Director Email**
Agency Contract Person Name and Title **Agency Contract Person Phone**
Agency Contract Person Email

Total Funding Amount Requested

Please enter total funding amount that you are requesting.

Total People Expected to Serve

Please enter total number of unduplicated people expected to be served with the funding requested.

Internal Control Questionnaire

Click to download the REQUIRED **Internal Control Questionnaire**. Please upload once you have completed the form. (See Attachment 6)

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

Policies and Procedures

Please upload your agency's policies and procedures.

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

Performance Improvement Plan (2,000 Characters)

Please describe how your agency responds to requests for a performance improvement plan.

OSF FY 2026-2028

1. Select the Category

Recovery Supports Category

2. Focus Population(s) to be served

Select All that Apply:

- a. Young Adults
- b. Adults
- c. Families

3. Focus Population (3,000 Characters)

- a. Define the population you intend to serve. Discuss how your proposal will address the unique needs of this population.

4. Use of Funding

Is this funding being used for the following?

- a. Match Funding to state or federal funding
- b. Other Funding Source (Explain) **(1,000 Characters)**

5. OSF State Core Strategies/Approved Uses

Indicate which Core Strategy and/or Approved Use your proposal is aligned with using the Opioid Settlement Agreement Form.

(Attachment 7)

Download the REQUIRED Opioid Settlement Funding Agreement Information Template. (See **Attachment 7**).

Please upload it once you have completed the form.

Please upload your document in the same format as the template: **.doc OR .docx**

Please name your document as such: (Agency Name or Initials)**OpioidSettlementAgreementForm**

6. Participant Eligibility (1,000 Characters)

Describe your criteria and screening process for participant eligibility (i.e., socio-economic, insured/uninsured status, etc.), and retention of documentation of eligibility.

7. Geographic Location (3,000 Characters)

Will your program focus on specific geographic locations within Palm Beach County? If so, specify location (i.e., town, zip codes (if known), community, neighborhood). Briefly describe why this location is your focus for the proposal.

Program Implementation and Design (30 Points)

Overarching Principles

Please respond to the following questions. Consider the overarching principles and the category descriptions, including what the County is seeking, that are in this NOFO Guidance Document and the area of focus the proposal seeks to address.

Program Narrative

8. Proposed Program (8,000 Characters)

Describe the proposed program and your history of providing the proposed services (including collaborating partner(s) history of providing the proposed services as applicable).

9. System of Care Service Delivery (8,000 Characters)

Describe how you plan to deliver the program and how the services and/or strategies fit within a person-centered recovery-oriented ecosystem of care.

10. Evidence-Based, Evidence Informed and/or Promising Practices and Tools (5,000 Characters)

Describe any evidence-based practices, evidence-informed approaches that you intend to utilize and explain why these strategies were selected.

11. Alignment with Principles (3,000 Characters)

Describe how your proposed activities align with SAMHSA's definition of Recovery and the 4 Major Dimensions that support a life in Recovery.

Program Implementation

12. Person-Centered resiliency and recovery-oriented ecosystem of care (8,000 Characters)

Describe your experience providing services within a person-centered, resiliency and recovery-oriented ecosystem of care.

13. Resiliency (Recovery) Capital Index (RCI) (6,000 Characters)

Describe how your proposal will incorporate and utilize the RCI.

14. Strategies and Services (10,000 Characters)

(A) Describe what strategy/strategies will be utilized, why the strategy/strategies were selected, and what outcomes are expected?

(B) Describe the menu of services that will be available, including intended beneficiaries, your strategies and how you define and measure **outreach** and **engagement**. .

15. Program Assessment (10,000 Characters)

Describe any tools/assessments your agency intends to use for this proposal, as well as the frequency and manner in which they will be employed. Include what standards will be used, what outcomes are expected to be measured and how.

Collaborations and Partnerships

16. Collaborations and Partnerships (6,000 Characters)

If your proposal involves collaborating or partnering with other organizations to implement the proposed project, please identify the organizations with which Applicant's organization will collaborate or partner (i.e. Fiscal Agent). Attach a current copy of the Agreement or MOU/MOA.

Describe roles and responsibilities of the collaboration or partnership if funding is awarded.

Please upload your document in the same format as the template: **.pdf**

Please name your document as such: **(Agency Name or Initials)COLLABORATION** or **(Agency Name or Initials)PARTNERSHIP** or **(Agency Name or Initials)MOU/MOA**, as applicable.

17. Program Barriers (6,000 Characters)

Describe any barriers you anticipate in implementing your proposal. Describe your plan to address these barriers or other anticipated challenges. State if no barriers or challenges are anticipated.

Evaluation Approach (30 Points)

18. Evaluation Methods (10,000 Characters)

Describe the evaluation methods and activities for your proposed program. Include data collection methodologies, approach to analysis and utilization of data, integration of data from the RCI, and how data will be used to inform any modifications in activities, services and/or menus of opportunity. If your program has plans to utilize any specific tools, provide a copy of the tools, any underlying research and your plan for utilizing these tools (including maintaining fidelity, timing, frequency, evaluating and changing course if outcomes are not what you are expecting or participants are not benefiting from the program).

19. Data Collection (5,000 Characters)

Identify how you will collect data, including the frequency of collection, types of data and how you will use the data on an on-going basis.

Data Utilization (4,000 Characters)

Provide an example of how you will use data with Participants.

20. Logic Model

Click to download the ROMA Plan/Logic Model template. Please upload it once you have completed the form. (See Attachment 8)

- a. Ensure outcomes are (specific, measurable, achievable, realistic, time bound).
- b. Ensure outcomes are reflective of the required outcomes stated in the OSF NOFO Guidance.
 - a. Please upload your document in the same format as the template: **.xls or .xlsx**
 - b. Please name your document as such: **(Agency Name or Initials) ROMALM_FY26**

21. Continuous Quality Management/Improvement (Not scored)

Click to download the CQM template. Please upload it once you have completed the form. (See Attachment 9)

Organizational Capacity (25 Points)**22. Key Personnel (4,000 Characters)**

Describe the roles and responsibilities of key program personnel. Include whether these personnel are on staff or will need to be hired and what percent of salaries are reliant on this NOFO for funding. If applicable, identify and describe the roles and responsibilities your project partners play.

23. Training (4000 Characters)

Describe current or planned efforts the proposed program staff may have to receive the following training opportunities and how they will be incorporated into service delivery:

- RCI training
- Trauma-Informed Care (TIC), Motivational Interviewing (MI) training
- Other program specific training directly related to the Applicant's proposal

24. No Wrong Door (5,000 Characters)

Describe how Applicant will ensure that a No Wrong Door Approach is implemented to effectively reduce and remove obstacles and barriers for receiving the type of help when, where and how it is needed.

25. Warm Hand-Offs (6,000 Characters)

Describe how your proposal will ensure that individuals receive warm hand-offs to other services, programs and resources. (As applicable)

26. Population Expertise (4,000 Characters)

Explain why your organization and your project partners, if applicable, are the appropriate entities to address the needs for the population you propose to serve.

Program History**27. Prior Outcomes (4,000 Characters)**

Discuss prior outcomes and other relevant data that demonstrate the success you have had in the provision of the services you intend to provide in this proposal.

Note: Additional performance history may be provided to the Review Panel by CSD staff. If the program has no history with the County, points may be given based on the Review Panel's knowledge of the

program/agency.

28. Monitoring (5,000 Characters)

Discuss any findings from prior program monitoring. Identify any findings that were made, program response to findings, and how they were addressed.

29. Nonprofits First Certification (Not Required and Not Scored)

Is Agency accredited by Nonprofits First? Is Agency a member of Nonprofits First.

Select: Yes or No

30. Accreditation and Certification (Not Required and Not Scored)

Please upload your Nonprofit First Accreditation Certificate or other Accreditation from an established accreditation entity.

- c. Please upload your document in the same format as the template: **.pdf**
- a. Please name your document as such: **(Agency Name or Initials) Certifications**

Available Resources and Sustainability

31. Program Sustainability (5,000 Characters)

Describe how your organization will continue to address this need or solve this problem when the OSF funding period ends.

Budget (15 Points)

32. FY 2026 Proposed Program Budget

- b. Complete proposed program budget using the template provided in the online application. Review the “sample” and “guidelines” tabs provided before completing the template. Ensure the requested fund justifications are complete.
- c. Ensure OSF administration expenses are limited to 5%. The Budget Justification must be thoroughly completed. (Please describe in the narrative section, in detail, each of the line items requested in the budget. Employee positions should include brief descriptions of their duties in the program. If an employee’s salary or a portion thereof is being charged to the budget for your proposal, include the time-keeping mechanisms that will be utilized to ensure that OSF funds are exclusively being utilized to support the proposal. If you are charging an indirect/administrative cost rate, then you must remove any other line items related to indirect/administrative expenses.

Click to download the **REQUIRED FY 2026 Budget Worksheet Template**. (See Attachment 10) Please upload once you have completed the form.

- a. Please submit budget in one of the following formats: **.xls OR .xlsx**
- b. Please name your budget as such: **(Agency Name or Initials) Budget_FY26**

33. Total Agency Budget

The Total Agency Budget must be attached to the proposal. The Budget forms that are part of the proposal do not need to be utilized for this budget as it can be in any form, but it should include all agency funding sources as well as expenditures by program.

- a. Please submit Total Agency Budget in one of the following formats: **.pdf** OR **.xls** OR **.xlsx**
- b. Please name your Total Agency Budget as such: *(Agency Name or Initials)* TAB_FY26

34. Audit Report (Fiscal)

Submit most recent audit report. If there were findings, describe corrective actions and whether such corrective actions successfully resolved the findings.

- a. Please submit Audit Report in the following format: **.pdf**
- b. Please name your Audit Report as such: *(Agency Name or Initials)* Audit_FY(Year of most recent audit).pdf

35. Audit Report Corrective Actions Explanation (5000 Characters)

Please provide any Audit Report Corrective Actions Explanation, if applicable.

36. Year End Financials

Submit Year-End Financial Statements. If not submitted explain why.

- a. Please submit Year-End Financial Statements in the following format: **.pdf**
- b. Please name your Year-End Financial Statements as such: *(Agency Name or Initials)* YEFS_FY20_____

37. IRS Form 990

Submit IRS Form 990. If not submitted explain why.

- a. Please submit IRS Form 990 in the following format: **.pdf**
- b. Please name your IRS Form 990 as such: *(Agency Name or Initials)* IRS990_FY24

38. YEFA/IRS 990 Explanation (1,000 Characters)

Please provide any Year End Financials/IRS Form 990 explanation, if applicable.

39. Unit Cost (4,000 Characters)

Submit proposed Unit Cost service description and unit cost of service rate. (Is this an industry standard? If so, please state source)

Ensure both the unit cost service description and cost rate are clear and accurately calculated. Formulas used to arrive at the cost rate must be included.

If using Actual Cost reimbursement, provide a description of how you will document the expenses.

40. OSF Funding

Is OSF funding being used to replace another funding source?

Select: Yes or No

If yes, please explain and identify the other funding source that OSF is replacing.

41. Scope of Work (No Points)

This section will be used to develop your contract agreement if your program is funded. These items will be monitored by contract monitors.

Scope of Work (SOW) Template (Exhibit A in the contract)

Click to download the REQUIRED FY 2026 Scope of Work Template. (See Attachment 11)

Please upload it once you have completely filled it out. Please keep the template as a word document.

- a. Please submit SOW in one of the following formats: .doc OR .docx (Please **do not submit as a pdf**).
- b. Please name your SOW as such: (*Agency Name or Initials*) SOWFY26

Target Population (200 Characters)

Briefly explain your target population.

Overview (400 characters or less)

Please provide a brief overview of the proposed program.

Services (1,000 Characters)

List in numbered paragraphs the services you will be providing to participants.

42. Unit of Service Rate and Definition (USRD) Template (Exhibit B in the contract)

Click to download the REQUIRED FY 2026 Unit of Service Rate and Definition Template. (See Attachment 13)

Please upload it once you have completely filled it out.

- a. Please submit Unit of Services Rate and Definition the following formats: .doc OR .docx (**DO NOT** submit in PDF format)
- b. Please name your Unit of Services Rate such: (Agency Name or Initials)Unit Rate FY26

SECTION V: APPLICATION REVIEW PROCESS

The application review process is welcoming to persons with disabilities, persons who have experienced Behavioral Health, Substance Use or Co-Occurring disorders, and persons with limited English proficiency. If you need any accommodations, please contact CSD-FAARFP@PBC.GOV.

- CSD shall recruit OSF Review Panel members.
- Review Panel members shall be trained, as appropriate, and receive submitted applications.
- Applications for OSF funding shall be reviewed, discussed, scored, and ranked by the Review Panels.
- Funding recommendations will be posted to the CSD website once all proposals are scored and ranked.
- Applicant(s) have seven (7) business days following the posting of funding recommendations to file a grievance notice.
- Funding recommendations are submitted to the BCC for final approval.
- Contract agreements, based on the funding recommendations, are submitted to the BCC for final approval.

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SECTION VI: GRIEVANCE NOTICE FORM

**FY 2026-2028 OSF Recovery Supports NOFO Notice Form
Palm Beach County Community Services Department**

Grievances may be filed by an entity submitting a NOFO (Proposer) that is aggrieved in connection with deviations from the established PROCESS for reviewing proposals and making recommended awards. The amount of recommended awards may not be grieved through this procedure.

If you wish to file a grievance with the Palm Beach County Community Services Department, this Grievance Notice Form must be completed, submitted, and received by the Director of the Community Services Department within seven (7) business days of posted funding recommendations. You will receive a written response within fifteen (15) business days of the receipt of this form by the Director of the Community Services Department. There is no administrative fee associated with filing this grievance.

When completed, submit this Grievance Notice Form via mail or email to:

Dr. James Green, Director Community Services Department
810 Datura Street, First Floor, West Palm Beach, Florida 33401
JGreen1@pbc.gov

Entity Filing Grievance: _____

Which process was allegedly deviated from? _____

Describe in detail the alleged deviation; include how you were directly affected and what remedy you seek (add additional pages as needed):

What remedy does the applicant seek?

Authorized Agency Representative Name and Title

Agency Filing Grievance

Authorized Agency Representative Signature

Date

SECTION VII: DEFINITIONS

Adults – Individual(s) over the age of 25.

Families - A collective body of persons, consisting of a child and a parent, legal custodian, or adult relative, in which the persons reside in the same house or living unit; or the parent, legal custodian, or adult relative has a legal responsibility by blood, marriage, or court order to support or care for the child.² Services given to a family includes two or more individuals.

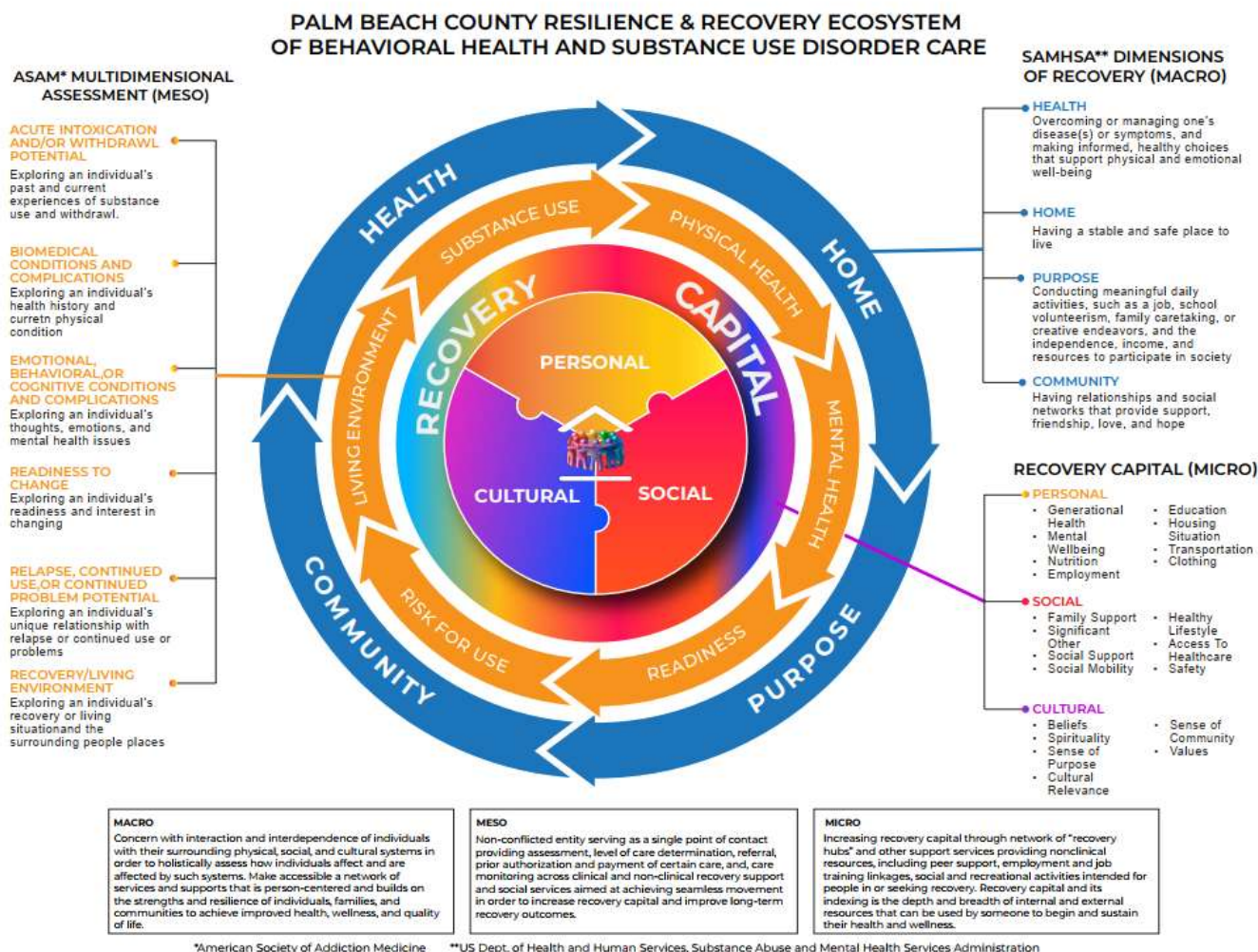
No Wrong Door – “No Wrong Door” in the context of substance use, behavioral health, and co-occurring disorders systems refers to a service delivery approach where individuals seeking help can access appropriate services regardless of where they enter the system. The system is designed to be person-centered, focusing on the needs of the individual rather than the capabilities or constraints of a service provider. It aims to reduce barriers to services by ensuring that the burden of navigating complex systems does not fall on the individual seeking help. Also, it aligns with broader public health strategies that advocate for comprehensive, integrated care models.

Trauma Informed Care (TIC) Model – An approach that recognizes the widespread impact of trauma and understands potential paths for recovery, recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system, responds by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re-traumatization. TIC models generally include a focus on the following: Safety; Trustworthiness and Transparency; Peer Support; Collaboration and Mutuality; Empowerment; Voice and Choice; and Cultural, Historical, and Gender Issues.

Warm Hand-off – A warm hand-off is more than the provision of information or referrals – it is compassionate and non-coercive accompaniment to an appropriate care provider. It is a form of referral to treatment or other services. A transfer of care through face-to-face, phone or video interaction in the presence of the person being helped.

Young Adults - Individual(s) ages 18 to 24.

ATTACHMENT 1: PALM BEACH COUNTY RESILIENCE & RECOVERY ECOSYSTEM



The ecosystem, at the Macro level, is concerned with interaction and interdependence of individuals with their surrounding physical, social, and cultural systems to holistically assess how individuals affect and are affected by such systems. It makes accessible a network of services and supports that are person-centered and builds on the strengths and resilience of individuals, families, and communities to achieve improved health, wellness, and quality of life. (See Attachment 1 <https://discover.pbcgov.org/communityservices/financiallyassisted/Pages/RFP.aspx>)

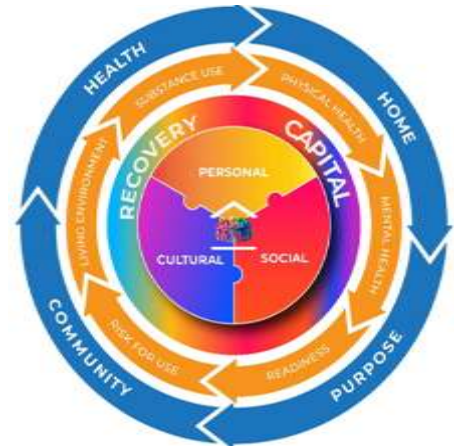
**Resilience and Recovery Ecosystem of
Behavioral Health and
Substance Use Disorder Care**

The Meso level provides a non-conflicted entity serving as a single point of contact providing assessment, level of care determination, referral, prior authorization and payment of certain care, and care monitoring across clinical and non-clinical recovery support and social services aimed at achieving seamless movement in order to increase recovery capital and improve long-term recovery outcomes.

The Micro level aims to increase an individual's resilience and recovery capital through a network of "Recovery Hubs" and other support services providing nonclinical resources, including peer support, employment and job training linkages, social and recreational activities intended for people in or seeking recovery.

SAMHSA indicates resilience is a key component to a system of care. In an extensive literature review published in *Child and Adolescent Psychiatry*, resilience is defined as "a multi-systemic dynamic process of successful adaptation or recovery in the context of risk or a threat." One of the conclusions from this study is that resilience is unanimously negatively associated with depression, anxiety and trauma symptoms in youth, and is therefore meaningful for screening purposes in at-risk populations/situations.

As such, higher levels of resilience offer better mental health and health outcomes. This is true, not only in adolescents' and children's populations, but in the adult population as well. Thus, foundationally, increasing resilience across populations is a major aim.



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ATTACHMENT 2: RECOVERY CAPITAL AND THE RECOVERY CAPITAL INDEX (RCI): A QUICK GUIDE



Recovery Capital and the Recovery Capital Index (RCI): A Quick Guide

Understanding Recovery Capital

Recovery Capital refers to the internal and external resources that an individual can access to begin and sustain recovery from addiction or mental health conditions. These resources span personal strengths, social networks, and community or cultural supports.

Originally introduced by researchers Cloud and Granfield in 1999, Recovery Capital highlights that recovery success depends not only on individual willpower and abstinence but also on the broader social and environmental context. Unlike traditional abstinence-focused measures, recovery capital through the Recovery Capital Index evaluates the holistic components of wellbeing, enabling a person-centered approach to recovery.

Domains of Recovery Capital

Recovery Capital is categorized into **three domains**: Personal, Social, and Cultural Capital.

Personal Capital

Personal Capital encompasses the individual resources related to health, knowledge, skills, and the ability to meet basic needs. These internal assets enable a person to navigate the challenges of recovery and establish a stable foundation for wellbeing.

- **Components and Indicators:**
 - **Health & Wellness:**
 - General Health: Physical and
 - Mental & Emotional Wellbeing: status.
 - Nutrition: Access to and satisfaction with balanced, healthy food.
 - **Knowledge & Skills:**
 - Employment: Job status, satisfaction, and workplace support.
 - Education: Formal education levels and opportunities for personal growth.
 - Financial Wellbeing: Financial stability and stress related to money or debts.
 - **Basic Human Needs:**
 - Housing: Stability and safety of the living situation.
 - Transportation: Accessibility of personal or public transport.
 - Clothing: Availability of appropriate clothing for daily needs and work.

Social Capital

Social Capital refers to the quality and strength of an individual's relationships and their ability to rely on their social networks. These external assets provide emotional support, reduce isolation, and contribute to a sense of belonging.

- **Components and Indicators:**
 - **Family & Home:**
 - Family Support: Emotional and practical assistance from family members.

- Significant Other: Relationship support and its impact on wellbeing.
- **Social Network:**
 - Social Support: Friendships and networks that provide comfort and aid.
 - Social Mobility: Opportunities to grow personally and professionally within one's social environment.
- **Healthy Activities & Environment:**
 - Healthy Lifestyle: Access to wellness activities and support groups.
 - Access to Healthcare: Ability to receive medical care as needed.
 - Safety: Feeling safe at home, at work, and in the community.

Cultural Capital

Cultural Capital reflects the broader values, beliefs, and community connections that shape an individual's identity and support their recovery. This domain also considers the alignment between personal values and the cultural environment.

- **Components and Indicators:**
 - **Social Values:**
 - Beliefs: Alignment and respect for personal beliefs within the community.
 - Values: Clarity and strength of personal principles and their representation in daily life.
 - **Spirituality:**
 - Spiritual Connection: Integration of spiritual practices or beliefs into daily life.
 - Sense of Purpose: The ability to draw meaning or purpose from spiritual beliefs.
 - **Community Connectedness:**
 - Cultural Relevance: Access to culturally appropriate recovery supports.
 - Sense of Community: Feelings of belonging, participation, and purpose within the community.

What is the Recovery Capital Index (RCI)?

The Recovery Capital Index (RCI) is a validated tool designed to measure and track an individual's recovery capital. It provides a multidimensional view of a person's wellbeing by capturing subjective insights into their life circumstances, strengths, and challenges.

The RCI was developed to address the limitations of traditional recovery metrics that focused primarily on substance use and abstinence. The tool applies across different pathways to recovery and does not presuppose any particular treatment modality or outcome.

The RCI has been [scientifically validated](#), with peer-reviewed results showing that the RCI accurately measures the current state of a person's recovery or wellbeing.

Key features of the RCI:

- **Holistic Measurement:** The RCI assesses wellbeing across 3 domains, 9 components, and 22 indicators through a 68, 36, or 10-item survey.
- **Universal Application:** It is agnostic of treatment modality and applies to any stage of recovery or care.
- **Actionable Insights:** Results can guide personalized care, program improvements, and policy advocacy at individual, organizational, and community levels.

The RCI helps organizations and individuals move beyond binary metrics like "sober or not sober" and instead measure meaningful, long-term recovery outcomes.

How the RCI is scored

The RCI provides scores ranging from 1 to 100 at multiple levels:

- **Overall Score:** Reflects total Recovery Capital.
- **Domain Scores:** Separate scores for Personal, Social, and Cultural Capital.
- **Component and Indicator Scores:** Offer granular insights into specific areas like housing stability, family support, or sense of purpose.

Score Ranges:

- **0-50:** Indicates significant areas for improvement in recovery capital.
- **51-70:** Shows progress with opportunities to strengthen specific areas.
- **71-100:** Reflects strong Recovery Capital, with a focus on maintenance.

Using the RCI

The RCI is intended to be completed every 30 days. This interval allows individuals and organizations to monitor progress, identify trends, and adapt care strategies. By engaging with the survey regularly, individuals can use the RCI as both a reflection tool and a roadmap for building resilience and wellbeing.

Each metric is assessed through a Likert scale, capturing subjective experiences and providing a snapshot of the person's current state of recovery. By measuring regularly (e.g., every 30 days), the RCI helps track changes in recovery capital over time.

Why Use the RCI?

For organizations seeking solutions to measure recovery outcomes, the RCI offers:

- **Standardized Metrics:** A common language for recovery outcomes across programs and populations.
- **Data-Driven Decision-Making:** Insights to guide funding, program development, and policy changes.
- **Focus on Holistic Wellbeing:** Recognizes and builds on strengths beyond abstinence, addressing the social determinants of recovery.

The RCI not only tracks individual recovery journeys but also empowers organizations to demonstrate impact, align with community needs, and advocate for transformative change.

The RCI is typically administered during intake and throughout care, often every 30 to 90 days, depending on the program. This regular assessment ensures that care teams can adjust support and interventions based on real-time data. For clients, the RCI offers a nonjudgmental way to reflect on their progress across various life domains.

The Recovery Capital Index is a critical tool that advances the understanding of recovery by shifting the focus from substance use to a comprehensive view of personal and social wellness. It equips individuals and organizations to measure better, manage, and sustain recovery efforts.

For more information about the RCI, visit commonlywell.com.

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ATTACHMENT 3: STATE AND COUNTY OSF REPORTING AND RETENTION REQUIREMENTS

- State and local governments shall follow their existing reporting and records retention requirements along with considering any additional recommendations from the Opioid Abatement Taskforce or Council.
- State and Local Governments shall ensure that any provider or sub-recipient of Opioid Funds at a minimum does the following:
 - Any provider shall establish and maintain books, records and documents (including electronic storage media) sufficient to reflect all income and expenditures of Opioid Funds.
 - Any provider shall retain and maintain all client records, financial records, supporting documents, statistical records, and any other documents (including electronic storage media) pertinent to the use of the Opioid Funds during the term of its receipt of Opioid Funds and retained for a period of six (6) years after it ceases to receive Opioid Funds or longer when required by law. In the event an audit is required by the State or Local Government, records shall be retained for a minimum period of six (6) years after the audit report is issued or until resolution of any audit findings or litigation based on the terms of any award or contract.
 - At all reasonable times for as long as records are maintained, persons duly authorized by State or Local Government auditors shall be allowed full access to and the right to examine any of the contracts and related records and documents, regardless of the form in which kept.
 - A financial and compliance audit shall be performed annually and provided to the State (refer to: [F.S. 215.97 Florida Single Audit Act](#)).
 - All providers shall comply and cooperate immediately with any inspection reviews, investigations, or audits deemed necessary by The Office of the Inspector General (section 20.055, F.S.) or the State.
 - No record may be withheld nor may any provider attempt to limit the scope of any of the foregoing inspections, reviews, copying, transfers or audits based on any claim that any record is exempt from public inspection or is confidential, proprietary or trade secret in nature; provided, however, that this provision does not limit any exemption to public inspection or copying to any such record.

Additionally, Opioid Settlement-specific reporting and accountability.

- Reporting on expenditures for the previous fiscal year are to be reported to the Department of Children and Families (DCF) by no later than August 31st.
- Reporting to DCF is due by July 1st of each year on how Opioid Funds will be expended in the upcoming fiscal year.

The State Taskforce or Council will set other data sets that need to be reported to DCF to demonstrate effectiveness of expenditures on Approved Purposes.

- DCF has established a statewide Opioid Implementation and Financial Reporting System (“Florida Opioid Implementation and Financial Reporting System” (FOIFRS) to which providers may request access for the purpose of submitting implementation plans and financial reports.

For additional information, please see: <https://www.dropbox.com/scl/fi/63tkre5ewz4t6eedkuocl/FL-Opioids-Allocation-SW-Resp-Agreement-with->

[Exhibits.pdf?rlkey=u15tc1iddeczhldxaq1j2kig&e=1&st=8qwdchlx&dl=0](#)

Access to the Opioid Data Management System.

Please find the link below to the Smartsheet request access form. Additionally, there are few important points to keep in mind:

- [DCF-SAMH Office of Opioid Recovery User Access Request Form \[app.smartsheet.com\]](#)
- Each person needing access should complete the Smartsheet form.
- First-time requestors should select “Add New User” in the Action Requested box dropdown.
- Ensure that the checkbox for “**Check here when you are ready to proceed with the rest of the form**” is selected, as it will reveal the remaining questions.
- The CF112 **Confidentiality Nondisclosure Agreement link is provided within the form.** If you’ve completed this agreement and the DCF Security Awareness Certificate within the past 365 days, you may attach the same documentation.
- If you need to complete the DCF Security Awareness training video, our team will set you up in the My FL Learn training portal, and you will receive a separate email with setup instructions.

Please allow at least 72 business hours to receive your invitation to activate your account. We recommend bookmarking the link for easy access later. Should you have any questions or require further assistance, please feel free to reach out.

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ATTACHMENT 4: NOFO SCORING AND RANKING GUIDE

FY 2026 OSF RECOVERY SUPPORTS NOFO

Program Implementation and Design Questions (30 Points)				
	Criteria	0-10 points	11-21 points	21-30 oints
8. Description of the proposed program	Clarity, completeness, relevance	The proposal is vague, missing key components, or unclear	The proposal is mostly clear, covers the main components, but lacks detail	The proposal is detailed, clear, and fully explains all key components of the program
9. Description of System of Care Service Delivery	Alignment with person-centered recovery principles, clarity of the delivery plan	The delivery plan is unclear or not aligned with recovery-oriented care. Service delivery within the person-centered recovery-oriented ecosystem of care is not at all integrated throughout the proposal	The delivery plan is somewhat clear and partially addresses the alignment of the system. Service delivery within the person-centered recovery-oriented ecosystem of care is not as integrated throughout the proposal.	The delivery plan is clear, actionable, and addresses the alignment of the system. Service delivery within the person-centered recovery-oriented ecosystem of care is integrated throughout the proposal.
10. Description of Evidence-Based/Promising Practices and Tools	Appropriateness, justification, and understanding of selected practices	Practices are poorly justified, and do not include at least one evidence-based or promising. and the explanation of why the strategies chosen were selected and how it is linked to the desired outcomes is incomplete, missing, or does not seem reasonable for achieving the identified program goals and outcomes	Practices are somewhat justified with at least one evidence-based and/or promising practice, and the explanation of why chosen strategies were selected and how it is linked to the desired outcomes is incomplete, missing, or does not seem reasonable for achieving identified program goals and outcomes.	Practices are well-justified, clearly evidence-based, evidence-informed, or promising, with a strong rationale and cohesive explanation for the selection of why the practices were selected and why these choices are best for this proposal.
11. Description of Alignment with SAMHSA Principles	Connection to SAMHSA Recovery principles and 4 dimensions	Little or no connection to SAMHSA Recovery principles.	Some connection to SAMHSA Recovery principles, but does not connect activities from the proposal to Recovery and Resilience, and/or explain how the proposal will align with the	Strong, clear alignment with SAMHSA Recovery principles and all 4 dimensions explained.

			CDC's social determinants of health.	
12. Description of Person-Centered resiliency and recovery-oriented ecosystem of care experience	Relevance, depth, demonstrated experience	Minimal or no relevant experience; unclear. Recovery and Resiliency are superficially addressed with little substance or context to the actual proposal.	Some relevant experience with partial explanation. Recovery and Resiliency are addressed with some substance and context to the actual proposal.	Extensive relevant experience clearly articulated. Recovery and Resiliency are addressed comprehensively and are well integrated into the proposal.
13. Incorporation of the RCI	Understanding and application of RCI requirements	Does not address RCI or incorrectly applies it	Addresses RCI partially or superficially	Fully addresses RCI, clearly explains integration into program design
14-A. Strategies and Services	Appropriateness, justification, expected outcomes	Strategies unclear, not justified, outcomes not defined, not responsive to what the County is seeking in the category.	Some strategies are described with partial rationale and expected outcomes, partially responsive to what County is seeking in the category.	Strategies are clear, justified, evidence-informed, with well-defined expected outcomes, and clearly aligned and responsive to what the County is seeking in the category.
-B. Description Menu of Services	Comprehensiveness, relevance, inclusion of beneficiaries, and outreach	Services are incomplete, missing key elements, or unclear	Services are described with moderate clarity and some focus on beneficiaries	Comprehensive, clearly described services, including all intended beneficiaries, family, community, and outreach strategies.
15. Tools/assessments	Appropriateness, frequency, standards, expected outcomes	Tools/assessments vague or inappropriate; outcomes unclear	Some tools are described with a partial explanation of standards and outcomes	Tools/assessments clearly described, standards defined, frequency and expected outcomes fully articulated
16. Collaborations/Partnerships	Clarity of partners, roles, and responsibilities; documentation completeness	Partners are unclear, roles poorly defined, and no MOA/MOU or MOU/MOA are not connected to the proposal to make an impact.	Partners identified with partial role clarification and MOU or MOA is somewhat connected to the proposal to make an impact. It somewhat clearly states the	Partners clearly identified, roles/responsibilities well-defined. MOU or MOA is directly connected to the proposal to make an

		It does not clearly state the joint planning and mentoring throughout the process of preparation and through implementation. The MOU/MOA does not provide a clear role and responsibility delineation and does not provide appropriate financial remuneration to the smaller non-profit, grass-roots organization. /MOA attached or	joint planning and mentoring throughout the process of preparation and through implementation. The MOU/MOA somewhat provides a clear role and responsibility delineation and somewhat provides appropriate financial remuneration to the smaller non-profit, grass-roots organization.	impact and starts at the beginning of the proposal's planning and development process. It also includes joint planning and mentoring throughout the process of preparation and through implementation. The MOU/MOA provides clear role and responsibility delineation and provides appropriate financial remuneration to the smaller non-profit, grass-roots organization.
17. Program Barriers	Realism, completeness, and clarity of mitigation strategies	Barriers unaddressed or a mitigation plan missing	Some barriers were identified with the partial mitigation plan. The plan seems reasonable, with strategies not clearly developed, and the feasibility is questionable.	Barriers were clearly identified, and mitigation strategies are well-developed, realistic, and feasible.

Evaluation Approach (30 Points)				
	Criteria	0-10 points	11-21 points	21-30 points
18. Evaluation Methods	Completeness, clarity, integration of RCI, use of tools, fidelity, and plan for modifying activities	Evaluation methods are unclear, lack integration with RCI, or do not include tools/fidelity considerations	Evaluation methods are partially described, including some integration with RCI, basic use of tools, and a modification plan	Evaluation methods are thorough, clearly integrate RCI, include appropriate tools, fidelity monitoring, and well-defined modification strategies
19. Data Collection	Frequency, types, and ongoing use of data	The data collection plan is unclear, insufficient, or unrealistic	The data collection plan is partially described, frequency or types of data incomplete	The data collection plan is comprehensive, clearly describes frequency, types of data, and ongoing use to inform program decisions

Evaluation Approach (30 Points)				
	Criteria	0-10 points	11-21 points	21-30 points
20. Data Utilization	Practical application, clarity, relevance to program goals	Examples unclear or irrelevant; does not demonstrate use of data for improvement	Example partially demonstrates the use of data to improve outcomes	An example clearly demonstrates how data will be used to plan with individuals and improve outcomes
21. Logic Model	Specific, Measurable, Achievable, Realistic, Time-bound Alignment with NOFO requirements	Outcomes vague, not SMART Outcomes not aligned with NOFO	Outcomes are somewhat SMART but partially defined Outcomes partially aligned	Outcomes are fully SMART and clearly aligned with program goals Outcomes clearly align with all required NOFO outcomes
22. Continuous Quality Management/Improvement	Not scored	N/A	N/A	N/A
Organizational Capacity (25 Points)				
	Criteria	0-8points	9-17 points	18-25 points
23. Key Personnel	Clarity, completeness, identification of staffing needs, and inclusion of partners	Roles unclear or missing, staffing needs not addressed	Roles are mostly described, with partial clarity on staffing and partners	Roles are clearly described, staffing needs are addressed, partner roles are included, and well-defined
24. Trainings	Relevance, incorporation into service delivery, and coverage of required training	Training not addressed or irrelevant, no connection to service delivery	Some training(s) were described and partially integrated into service delivery	Training is clearly described, relevant, and fully integrated into service delivery
25. No Wrong Door Approach	Clarity, feasibility, demonstration of barrier reduction	Approach unclear, not feasible, barriers not addressed	Approach partially described, some barriers addressed	Approach clearly described, feasible, and effectively addresses barriers
26. Warm hand-offs	Practicality, clarity, participant focus	Hand-offs unclear, insufficient, or impractical	Hand-offs partially described limited focus on participants	Hand-offs clearly described, practical, and centered on participant

				needs
27. Population Expertise	Relevance, expertise, capacity to serve population	Organization/partners not clearly qualified or appropriate	Organization/partners partially appropriate, limited explanation	Organization/partners clearly appropriate, demonstrated expertise and capacity to serve population
28. Prior Outcomes	Evidence of program success, relevance, and clarity	Minimal or no data; unclear outcomes	Some relevant data with partial explanation	Clear, relevant, and well-documented outcomes demonstrating success
29. Monitoring	Identification of findings, responses, and resolution	Findings not described or not addressed	Findings are partially described with a limited response	Findings clearly identified, responses well-articulated, and resolution demonstrated
30. Accreditation and Certification	Not Scored	N/A	N/A	N/A
31. Referrals	Plans for connecting individuals to recovery resources	No or unclear referral plan	Referral plan partially described	Clear, actionable plan for referring individuals to appropriate services
32. Program sustainability	Clarity, feasibility, long-term planning	Sustainability plan unclear or missing	Sustainability plan partially described	Clear, feasible, and detailed plan for sustaining the program beyond funding period
Budget (15 Points)				
	Criteria	0-5 Points	6-10 Points	11-15 Points
33. FY 2026 Proposed Program Budget	Completeness, accuracy, justification, adherence to OSF guidelines	Budget incomplete, unclear, or non-compliant	Budget mostly complete, partial justification, minor guideline issues	Budget complete, accurate, fully justified, and fully compliant with OSF guidelines
34. Total Agency Budget	Completeness and inclusion of all funding sources	Budget missing or incomplete	Budget mostly complete, minor omissions	Comprehensive budget including all agency funding sources and expenditures
35. Audit Report (Fiscal)	Submission, clarity, explanation of findings	Audit not submitted or findings unexplained	Audit submitted with partial explanation of findings	Audit submitted, findings addressed, corrective actions clearly explained
36. Audit Report Corrective	Completeness, clarity,	Explanation missing or	Partial explanation provided	Clear, thorough

Actions Explanation	effectiveness	unclear		explanation of corrective actions and effectiveness
37. Year-End Financials	Submission, format, explanation	Not submitted or unclear	Submitted with partial explanation	Submitted in the correct format with clear explanation
38. IRS Form 990	Submission and explanation	Not submitted or unclear	Submitted with partial explanation	Submitted with clear explanation if applicable
39. YEFA/IRS 990 Explanation	Clarity and relevance	Missing or unclear	Partially explained	Clear and complete explanation provided
40. Unit Cost	Accuracy, clarity, industry standard, methodology	Unclear, inaccurate, or missing methodology	Partially clear and justified	Accurate, clearly calculated, methodology explained, industry standards cited if applicable
41. OSF Funding	Explanation, clarity	Not explained or unclear	Partially explained	Clear, complete explanation if OSF funding replaces another source
42. Scope of Work	Not Scored	N/A	N/A	N/A
43. Unit of Service Rate and Definition	Not Scored	N/A	N/A	N/A

FY2026-FY2028 OSF RECOVERY SUPPORTS NOFO Ranking Guide for Review Panelists

Behavioral Health and Substance Use Disorder OSF Funding

As stated in this NOFO Guidance Document, all scored proposals will be ranked. The Guidance states the following:

The Review Panel will rank all proposals based on how critical they deem the program is for the system of care. The SCORE awarded to a proposal is reflective of how competitive the proposal is. The RANKING of the proposals is reflective of how imperative and critical the services are to ensure availability and access.

The following data and information should be considered when ranking the proposals. This is to serve as a guide to ensure the ranking decisions are data driven.

All proposals shall be ranked. The Review Panel must achieve consensus before Ranking is finalized. The proposal considered the most critical to the system of care and have the components described below within each category will be ranked #1.

No two proposals shall be ranked the same. There cannot be a tie. If there are 10 proposals, then the ranking should ultimately have 10 proposals ranked 1 through 10, with 1 being deemed the most critical.

Proposals that include the following shall be ranked highest:

Recovery Supports

- Priority Population: Individuals (Young adults, adults, and Families) with substance use and/or co-occurring disorders. Individuals who are involved in multiple systems of care (i.e. Justice System, Child Welfare, Homelessness) should be given priority. Page 9
- In addition, priority will be given to Applicants that provide services to Marginalized Communities within the following areas: Tri-city Glades, Riviera Beach, West Palm Beach, Lake Worth Beach, and Delray Beach. Substance use and behavioral health disorders are significant public health issues that impact people across all demographics. Marginalized groups, including those involved in the criminal justice system, living in poverty, individuals who are uninsured and/or underinsured, and people with disabilities, disproportionately face high rates of substance use and/or co-occurring disorders. Also, marginalized communities have disproportionately lower rates of access to treatment and healthcare services and higher rates of incarceration and recidivism
- Priority Population: Individuals (Young adults, adults, and Families) with substance use and/or co-occurring disorders. Individuals who are involved in multiple systems of care (i.e. Justice System, Child Welfare, Homelessness) should be given priority.
- In addition, priority will be given to Applicants that provide services to Marginalized Communities within the following areas: Tri-city Glades, Riviera Beach, West Palm Beach, Lake Worth Beach, and Delray Beach. Substance use and behavioral health disorders are significant public health issues that impact people across all demographics. Marginalized groups, including those involved in the criminal justice system, living in poverty, individuals who are uninsured and/or underinsured, and people with disabilities, disproportionately face high rates of substance use and/or co-occurring disorders. Also, marginalized communities have disproportionately lower rates of access to treatment and healthcare

services and higher rates of incarceration and recidivism.

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ATTACHMENT 5: REQUIRED COVER SHEET

REQUIRED COVER SHEET



PALM BEACH COUNTY DEPARTMENT OF COMMUNITY SERVICES FY 2026-2028 OSF RECOVERY SUPPORTS NOFO COVER SHEET

PLEASE RESPOND TO ALL QUESTIONS LISTED BELOW:

(NOTE: This form is formatted using MS Word, Times New Roman, and 10pt font)

QUESTIONS:	AGENCY RESPONSES:
NAME OF AGENCY:	
SERVICE CATEGORY (identify the service category for which the proposal is being submitted):	
PROGRAM TITLE:	
PRIORITY POPULATION (include the unduplicated number to be served annually):	
GEOGRAPHIC AREA TO BE SERVED:	
COMMISSION DISTRICT(S) TO BE SERVED:	
PROGRAM STATUS (expanded or new program):	
PROGRAM START DATE (if new program):	
TOTAL PROGRAM BUDGET:	\$
AMOUNT OF FUNDING REQUEST (how much you are requesting in the proposal):	\$
UNIT COST SERVICE DESCRIPTION:	
UNIT COST OF SERVICE:	
IDENTIFY IF AGENCY IS CURRENTLY ACCREDITED BY NONPROFITS FIRST: (Yes or No)	
OVERVIEW (3 sentence overview of the program – this must be short and concise and will be used to communicate the purpose of programs and services to the Board of County Commissioners and various publications):	

SPECIAL NOTICE:

Contracted agencies must comply with the current Health Insurance Portability and Accountability Act (HIPAA).
If your agency does not provide services that fall under HIPAA Privacy Rules, please state that in the above overview.

ATTACHMENT 6: INTERNAL CONTROL QUESTIONNAIRE

GENERAL			
The following questions relate to the internal accounting controls of the overall organization.	Yes	No	N/A
1. Are the duties for key employees of the organization defined?			
2. Is there an organization chart that sets forth the actual lines of responsibility?			
3. Are written procedures maintained covering the recording of transactions?			
a. Covering an accounting manual?			
b. Covering a chart of accounts?			
4. Do the procedures, chart of accounts, etc., provide for identifying receipts and expenditures of program funds separately for each grant?			
5. Does the accounting system provide for accumulating and recording expenditures by grant and cost category shown in the approved budget?			
6. Does the organization maintain a policy manual covering the following:			
a. Approval authority for financial transactions?			
b. Guidelines for controlling expenditures, such as purchasing requirements and travel authorizations?			
7. Are there procedures governing the maintenance of accounting records?			
a. Are subsidiary records for accounts payable, accounts receivable, etc., balanced with control accounts on a monthly basis?			
b. Are journal entries approved, explained and supported?			
c. Do accrual accounts provide adequate control over income and expense?			
d. Are accounting records and valuables secured in limited access areas?			
8. Are duties separated so that no one individual has complete authority over an entire financial transaction?			
9. Does the organization use an operating budget to control funds by activity?			
10. Are there controls to prevent expenditure of funds in excess of approved, budgeted amounts? For example, are purchase requisitions reviewed against remaining amount in budget category?			
11. Has any aspect of the organization's activities been audited within the past 2 years by another governmental agency or independent public accountant?			
12. Has the organization obtained fidelity bond coverage for responsible officials?			
13. Has the organization obtained fidelity bond coverage in the amounts required by statutes or organization policy?			
14. Are grant financial reports prepared for required accounting periods within the time imposed by the grantors?			
15. Does the organization have an indirect cost allocation plan or a negotiated indirect cost rate?			

CASH RECEIPTS	YES	NO	N/A
1. Does the organization have subgrant agreements which provide for advance payments and/or reimbursement of cost?			
2. If advance payments have been made to the organization:			
a. Are funds maintained in a bank with sufficient federal deposit insurance?			
b. Is there an understanding of the terms of the advance (i.e. to be used before costs can be submitted for reimbursement)?			

PURCHASING, RECEIVING, AND ACCOUNTS PAYABLE	YES	NO	N/A
The following conditions are indicative of satisfactory control over purchasing, receiving, and accounts payable.			
1. Prenumbered purchase orders are used for all items of cost and expense.			
2. There are procedures to ensure procurement at competitive prices.			
3. Receiving reports are used to control the receipt of merchandise.			
4. There is effective review by a responsible official following prescribed procedures for program coding, pricing, and extending vendors' invoices.			
5. Invoices are matched with purchase orders and receiving reports.			
6. Costs are reviewed for charges to direct and indirect cost centers in accordance with applicable grant agreements and applicable Federal Management circulars pertaining to cost principles.			
7. When accrual accounting is required, the organization has adequate controls such as checklists for statement closing procedures to ensure that open invoices and un-invoiced amounts for goods and services received are properly accrued or recorded in the books or controlled through worksheet entries.			
8. There is adequate segregation of duties in that different individuals are responsible for (a) purchase (b) receipt of merchandise or services, and (c) voucher approval.			

PURCHASING	YES	NO	N/A
1. Is the purchasing function separate from accounting and receiving?			
2. Does the organization obtain competitive bids for items, such as rental or service agreements, over specified amounts?			
3. Is the purchasing agent required to obtain additional approval on purchase orders above a stated amount?			
4. Are there procedures to obtain the best possible price for items not subject to competitive bidding requirements, such as approved vendor lists and supply item catalogs?			
5. Are purchase orders required for purchasing all equipment and services?			
6. Are purchase orders controlled and accounted for by prenumbering and keeping a logbook?			
7. Are the organization's normal policies, such as competitive bid requirements, the same as grant agreements and related regulations?			
8. Is the purchasing department required to maintain control over items or dollar amounts requiring the ADECA to give advance approval?			

9. Under the terms of 2 CFR 200, certain costs and expenditures incurred by units of State and local governments are allowable only upon specific prior approval of the grantor Federal agency. The grantee organization should have established policies and procedures governing the prior approval of expenditures in the following categories.			
a. Automatic data processing costs.			
b. Building space rental costs.			
c. Costs related to the maintenance and operation of the organization's facilities.			
d. Costs related to the rearrangement and alteration of the organization's facilities.			
e. Allowances for depreciation and use of publicly owned buildings.			
f. The cost of space procured under a rental purchase or a lease-with-option-to-purchase agreement.			
g. Capital expenditures.			
h. Insurance and indemnification expenses.			
i. The cost of management studies.			
j. Preagreement costs.			
k. Professional services costs.			
l. Proposal costs.			
10. Under the terms of 2 CFR 200 certain costs incurred by units of State and local governments are <u>not</u> allowable as charges to Federal grants. The grantee organization should have established policies and procedures to preclude charging Federal grant programs with the following types of costs.			
a. Bad debt expenses.			
b. Contingencies.			
c. Contribution and donation expenditures			
d. Entertainment expenses.			
e. Fines and penalties.			
f. Interest and other financial costs.			
g. Legislative expenses.			
h. Charges representing the nonrecovery of costs under grant agreements.			

RECEIVING	YES	NO	N/A
1. Does the organization have a receiving function to handle receipt of all materials and equipment?			
2. Are supplies and equipment inspected and counted before acceptance for use?			
3. Are quantities and descriptions of supplies and equipment checked by the receiving department against a copy of the purchase order or some other form of notification?			
4. Is a logbook or permanent copy of the receiving ticket kept in the receiving department?			
ACCOUNTS PAYABLE	YES	NO	N/A
1. Is control established over incoming vendor invoices?			
2. Are receiving reports matched to the vendor invoices and purchase orders, and are all of these documents kept in accessible files?			

3. Are charges for services required to be supported by evidence of performance by individuals other than the ones who incurred the obligations?			
4. Are extensions on invoices and applicable freight charges checked by accounts payable personnel?			
5. Is the program to be charged entered on the invoice and checked against the purchase order and approved budget?			
6. Is there an auditor of disbursements who reviews each voucher to see that proper procedures have been followed?			
7. Are checks adequately cross referenced to vouchers?			
8. Are there individuals responsible for accounts payable other than those responsible for cash receipts?			
9. Are accrual accounts kept for items which are not invoiced or paid on a regular basis?			
10. Are unpaid vouchers totaled and compared with the general ledger on a monthly basis?			

CASH DISBURSEMENTS	YES	NO	N/A
The following conditions are indicative of satisfactory controls over cash disbursements: i. Duties are adequately separated; different persons prepare checks, sign checks, reconcile bank accounts, and have access to cash receipts. ii. All disbursements are properly supported by evidence of receipt and approval of the related goods and services. iii. Blank checks are <u>not</u> signed. iv. Unissued checks are kept in a secure area. v. Bank accounts are reconciled monthly. vi. Bank accounts and check signers are authorized by the board of directors or trustees. vii. Petty cash vouchers are required for each fund disbursement. viii. The petty cash fund is kept on an imprest basis.			
1. Are checks controlled and accounted for with safeguards over unused, returned, and voided checks?			
2. Is the drawing of checks to cash or bearer prohibited?			
3. Do supporting documents, such as invoices, purchase orders, and receiving reports, accompany checks for the check signers' review?			
4. Are vouchers and supporting documents appropriately cancelled (stamped or perforated) to prevent duplicate payments?			
5. If check signing plates are used, are they adequately controlled (i.e., maintained by a responsible official who reviews and accounts for prepared checks)?			
6. Are two signatures required on all checks or on checks over stated amounts?			
7. Are check signers responsible officials or employees of the organization?			
8. Is the person who prepares the check or initiates the voucher other than the person who mails the check?			
9. Are bank accounts reconciled monthly and are differences resolved?			
10. Concerning petty cash disbursements:			

a. Is petty cash reimbursed by check and are disbursements reviewed at that time?			
b. Is there a maximum amount, reasonable in the circumstances, for payments made in cash?			
c. Are petty cash vouchers written in ink to prevent alteration?			
d. Are petty cash vouchers canceled upon reimbursement of the fund to prevent their reuse?			

PAYROLL	YES	NO	N/A
The following conditions are indicative of satisfactory controls of payroll: i. Written authorizations are on file for all employees covering rates of pay, withholdings and deductions. ii. The organization has written personnel policies covering job descriptions, hiring procedures, promotions, and dismissals. iii. Distribution of payroll charges is based on documentation prepared outside the payroll department. iv. Payroll charges are reviewed against program budgets and deviations are reported to management for follow-up action. v. Adequate timekeeping procedures, including the use of time clock or attendance sheets and supervisory review and approval, are employed for controlling paid time. vi. Payroll checks are prepared and distributed by individuals independent of each other. vii. Other key payroll and personnel duties such as timekeeping, salary authorization and personnel administration are adequately separated.			
1. Are payroll and personnel policies governing compensation in accordance with the requirements of grant agreements?			
2. Are there procedures to ensure that employees are paid in accordance with approved wage and salary rates?			
3. Is the distribution of payroll charges checked by a second person and are aggregate amounts compared to the approved budget?			
4. Are wages paid at or above the Federal minimum wage?			
5. Are procedures adequate for controlling: (a) Overtime wages, (b) Overtime work authorization, and (c) Supervisory approval of overtime?			
6. Are payroll checks distributed by persons not responsible for preparing the checks?			

PROPERTY AND EQUIPMENT	YES	NO	N/A
The following conditions are indicative of satisfactory control over property and equipment: i. There is an effective system of authorization and approval of capital equipment expenditures. ii. Accounting practices for recording capital assets are reduced to writing. iii. Detailed records of individual capital assets are kept and periodically balanced with the general ledger accounts. iv. There are effective procedures for authorizing and accounting for disposals. v. Property and equipment is stored in a secure place.			

1. Are executive authorizations and approvals required for originating expenditures for capital items?			
2. Are expenditures for capital items reviewed for board approval before funds are committed?			
3. Does the organization have established policies covering capitalization and depreciation?			
4. Does the organization charge depreciation or use allowances on property and equipment against any grant programs that it administers?			
5. Is historical cost the basis for computing depreciation or use allowances?			
6. Are the organization's depreciation policies or methods of computing use allowances in accordance with the standards outlined in Federal circulars or agency regulations?			
7. Are there detailed records showing the asset values of individual units of property and equipment?			
8. Are detailed property records periodically balanced to the general ledger?			
9. Are detailed property records periodically checked by physical inventory?			
10. Are differences between book records and physical counts reconciled and are the records adjusted to reflect shortages?			
11. Are there procedures governing the use of property and equipment?			

INDIRECT COSTS	YES	NO	N/A
1. Does the organization have an indirect cost allocation plan or a negotiated indirect cost rate?			
2. Is the plan prepared in accordance with the provisions of 2 CFR 200?			
3. Has audit cognizance for the plan been established and are the rates accepted by all participating Federal and State agencies?			
4. Does the organization have procedures which provide assurance that consistent treatment is applied in the distribution of charges as direct or indirect costs to all grants?			

ATTACHMENT 7: CORE STRATEGIES AND APPROVED USES CROSSWALK

Please complete this form as completely as possible, including the allocation of funds for each strategy and/or approve use; outcomes and whether the focus is on SDoH or Acute Crisis/Residential.

Schedule A Core Strategies	Description
A. Naloxone or other FDA-approved drug to reverse opioid overdoses	1. Expand training for first responders, schools, community support groups and families; and 2. Increase distribution to individuals who are uninsured or whose insurance does not cover the needed service.
B. Medication-Assisted Treatment (MAT) Distribution and other opioid-related treatment	1. Increase distribution of MAT to non-Medicaid eligible or uninsured individuals; 2. Provide education to school-based and youth-focused programs that discourage or prevent misuse; 3. Provide MAT education and awareness training to healthcare providers, EMTs, law enforcement, and other first responders; and 4. Treatment and Recovery Support Services such as residential and inpatient treatment, intensive outpatient treatment, outpatient therapy or counseling, and recovery housing that allow or integrate medication with other support services.
C. Pregnant & Postpartum Women	1. Expand Screening, Brief Intervention, and Referral to Treatment (“SBIRT”) services to non Medicaid eligible or uninsured pregnant women; 2. Expand comprehensive evidence-based treatment and recovery services, including MAT, for women with co-occurring Opioid Use Disorder (“OUD”) and other Substance Use Disorder (“SUD”)/Mental Health disorders for uninsured individuals for up to 12 months postpartum; and 3. Provide comprehensive wrap-around services to individuals with Opioid Use Disorder (OUD) including housing, transportation, job placement/training, and childcare
D. Expanding Treatment for Neonatal abstinence Syndrome	1. Expand comprehensive evidence-based and recovery support for NAS babies; 2. Expand services for better continuum of care with infant-need dyad; and 3. Expand long-term treatment and services for medical monitoring of NAS babies and their families.
E. Expansion of Warm Hand-off Programs and Recovery Services	1. Expand services such as navigators and on-call teams to begin MAT in hospital emergency departments; 2. Expand warm hand-off services to transition to recovery services; 3. Broaden scope of recovery services to include co-occurring SUD or mental health conditions. ; 4. Provide comprehensive wrap-around services to individuals in recovery including housing, transportation, job placement/training, and childcare; and 5. Hire additional social workers or other behavioral health workers to facilitate expansions above.
F. Treatment for Incarcerated Population	1. Provide evidence-based treatment and recovery support including MAT for persons with OUD and co-occurring SUD/MH disorders within and transitioning out of the criminal justice system; and 2. Increase funding for jails to provide treatment to inmates with OUD.

G. Prevention Programs	1. Funding for media campaigns to prevent opioid use (similar to the FDA’s “Real Cost” campaign to prevent youth from misusing tobacco); 2. Funding for evidence-based prevention programs in schools.; 3. Funding for medical provider education and outreach regarding best prescribing practices for opioids consistent with the 2016 CDC guidelines, including providers at hospitals (academic detailing); 4. Funding for community drug disposal programs; and 5. Funding and training for first responders to participate in pre-arrest diversion programs, post overdose response teams, or similar strategies that connect at-risk individuals to behavioral health services and supports.
H. Expanding Syringe Services Programs	1. Provide comprehensive syringe services programs with more wrap-around services including linkage to OUD treatment, access to sterile syringes, and linkage to care and treatment of infectious diseases.
I. Evidence-based data collection and research analyzing the effectiveness of the abatement strategies in the State	No further description provided
Schedule B Approved Uses	
A. Treat Opioid Use Disorder	Support treatment of Opioid Use Disorder (OUD) and any co-occurring Substance Use Disorder or Mental Health (SUD/MH) conditions through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following: 1. Expand availability of treatment for OUD and any co-occurring SUD/MH conditions, including all forms of Medication-Assisted Treatment (MAT) approved by the U.S. Food and Drug Administration. 2. Support and reimburse evidence-based services that adhere to the American Society of Addiction Medicine (ASAM) continuum of care for OUD and any co-occurring SUD/MH conditions 3. Expand telehealth to increase access to treatment for OUD and any co-occurring SUD/MH conditions, including MAT, as well as counseling, psychiatric support, and other treatment and recovery support services. 4. Improve oversight of Opioid Treatment Programs (OTPs) to assure evidence-based or evidence informed practices such as adequate methadone dosing and low threshold approaches to treatment. 5. Support mobile intervention, treatment, and recovery services, offered by qualified professionals and service providers, such as peer recovery coaches, for persons with OUD and any co-occurring SUD/MH conditions and for persons who have experienced an opioid overdose. 6. Treatment of trauma for individuals with OUD (e.g., violence, sexual assault, human trafficking, or adverse childhood experiences) and family members (e.g., surviving family members after an overdose or overdose fatality), and training of health care personnel to identify and address such trauma. 7. Support evidence-based withdrawal management services for people with OUD and any co-occurring mental health conditions. 8. Training on MAT for health care providers, first responders, students, or other supporting professionals, such as peer recovery coaches or recovery outreach specialists, including tele mentoring to assist community-based providers in rural or underserved areas. 9. Support workforce development for addiction professionals who work with persons with OUD and any co-occurring SUD/MH conditions. 10. Fellowships for addiction medicine specialists for direct patient care, instructors, and clinical research for treatments.

	11. Scholarships and supports for behavioral health practitioners or workers involved in addressing OUD and any co-occurring SUD or mental health conditions, including but not limited to training, scholarships, fellowships, loan repayment programs, or other incentives for providers to work in rural or underserved areas. 12. Provide funding and training for clinicians to obtain a waiver under the federal Drug Addiction Treatment Act of 2000 (DATA 2000) to prescribe MAT for OUD, and provide technical assistance and professional support to clinicians who have obtained a DATA 2000 waiver. 13. Dissemination of web-based training curricula, such as the American Academy of Addiction Psychiatry's Provider Clinical Support Service-Opioids web-based training curriculum and motivational interviewing. 14. Development and dissemination of new curricula, such as the American Academy of Addiction Psychiatry's Provider Clinical Support Service for Medication-Assisted Treatment.
B. Support People in Treatment and Recovery	Support people in treatment for or recovery from OUD and any co-occurring SUD/MH conditions through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following: 1. Provide comprehensive wrap-around services to individuals with OUD and any co-occurring SUD/MH conditions, including housing, transportation, education, job placement, job training, or childcare. 2. Provide the full continuum of care of treatment and recovery services for OUD and any co-occurring SUD/MH conditions, including supportive housing, peer support services and counseling, community navigators, case management, and connections to community-based services. 3. Provide counseling, peer-support, recovery case management and residential treatment with access to medications for those who need it to persons with OUD and any co-occurring SUD/MH conditions. 4. Provide access to housing for people with OUD and any co-occurring SUD/MH conditions, including supportive housing, recovery housing, housing assistance programs, training for housing providers, or recovery housing programs that allow or integrate FDA-approved medication with other support services. 5. Provide community support services, including social and legal services, to assist in deinstitutionalizing persons with OUD and any co-occurring SUD/MH conditions. 6. Support or expand peer-recovery centers, which may include support groups, social events, computer access, or other services for persons with OUD and any co-occurring SUD/MH conditions. 7. Provide or support transportation to treatment or recovery programs or services for persons with OUD and any co-occurring SUD/MH conditions. 8. Provide employment training or educational services for persons in treatment for or recovery from OUD and any co-occurring SUD/MH conditions. 9. Identify successful recovery programs such as physician, pilot, and college recovery programs, and provide support and technical assistance to increase the number and capacity of

	high-quality programs to help those in recovery. 10. Engage non-profits, faith-based communities, and community coalitions to support people in treatment and recovery and to support family members in their efforts to support the person with OUD in the family. 11. Training and development of procedures for government staff to appropriately interact and provide social and other services to individuals with or in recovery from OUD, including reducing stigma. 12. Support stigma reduction efforts regarding treatment and support for persons with OUD, including reducing the stigma on effective treatment. 13. Create or support culturally appropriate services and programs for persons with OUD and any co occurring SUD/MH conditions, including new Americans. 14. Create and/or support recovery high schools. 15. Hire or train behavioral health workers to provide or expand any of the services or supports listed above.
C. Connect people Who Need Help to the Help they Need (Connections to Care)	Provide connections to care for people who have – or at risk of developing – OUD and any co-occurring SUD/MH conditions through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following: 1. Ensure that health care providers are screening for OUD and other risk factors and know how to appropriately counsel and treat (or refer if necessary) a patient for OUD treatment. 2. Fund Screening, Brief Intervention and Referral to Treatment (SBIRT) programs to reduce the transition from use to disorders, including SBIRT services to pregnant women who are uninsured or not eligible for Medicaid. 3. Provide training and long-term implementation of SBIRT in key systems (health, schools, colleges, criminal justice, and probation), with a focus on youth and young adults when transition from misuse to opioid disorder is common. 4. Purchase automated versions of SBIRT and support ongoing costs of the technology. 5. Expand services such as navigators and on-call teams to begin MAT in hospital emergency departments. 6. Training for emergency room personnel treating opioid overdose patients on post-discharge planning, including community referrals for MAT, recovery case management or support services. 7. Support hospital programs that transition persons with OUD and any co-occurring SUD/MH conditions, or persons who have experienced an opioid overdose, into clinically-appropriate follow-up care through a bridge clinic or similar approach. 8. Support crisis stabilization centers that serve as an alternative to hospital emergency departments for persons with OUD and any co-occurring SUD/MH conditions or persons that have experienced an opioid overdose. 9. Support the work of Emergency Medical Systems, including peer support specialists, to connect individuals to treatment or other appropriate services following an opioid overdose or other opioid related adverse event. 10. Provide funding for peer support specialists or recovery coaches in

	emergency departments, detox facilities, recovery centers, recovery housing, or similar settings; offer services, supports, or connections to care to persons with OUD and any co-occurring SUD/MH conditions or to persons who have experienced an opioid overdose. 11. Expand warm hand-off services to transition to recovery services. 12. Create or support school-based contacts that parents can engage with to seek immediate treatment services for their child; and support prevention, intervention, treatment, and recovery programs focused on young people. 13. Develop and support best practices on addressing OUD in the workplace. 14. Support assistance programs for health care providers with OUD. 15. Engage non-profits and the faith community as a system to support outreach for treatment. 16. Support centralized call centers that provide information and connections to appropriate services and supports for persons with OUD and any co-occurring SUD/MH conditions.
D. Address the Needs of Criminal-Justice Involved Persons	Address the needs of persons with OUD and any co-occurring SUD/MH conditions who are involved in, are at risk of becoming involved in, or are transitioning out of the criminal justice system through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following: 1. Support pre-arrest or pre-arraignment diversion and deflection strategies for persons with OUD and any co-occurring SUD/MH conditions, including established strategies such as: a. Self-referral strategies such as the Angel Programs or the Police Assisted Addiction Recovery Initiative (PAARI); b. Active outreach strategies such as the Drug Abuse Response Team (DART) model; c. “Naloxone Plus” strategies, which work to ensure that individuals who have received naloxone to reverse the effects of an overdose are then linked to treatment programs or other appropriate services; d. Officer prevention strategies, such as the Law Enforcement Assisted Diversion (LEAD) model; e. Officer intervention strategies such as the Leon County, Florida Adult Civil Citation Network or the Chicago Westside Narcotics Diversion to Treatment Initiative; or f. Co-responder and/or alternative responder models to address OUD-related 911 calls with greater SUD expertise

E. Address the Needs of Pregnant or Parenting Women and their families, including babies with neonatal abstinence syndrome	Address the needs of pregnant or parenting women with OUD and any co-occurring SUD/MH conditions, and the needs of their families, including babies with neonatal abstinence syndrome (NAS), through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following: 1. Support evidence-based or evidence-informed treatment, including MAT, recovery services and supports, and prevention services for pregnant women – or women who could become pregnant – who have OUD and any co-occurring SUD/MH conditions, and other measures to educate and provide support to families affected by Neonatal Abstinence Syndrome. 2. Expand comprehensive evidence-based treatment and recovery services, including MAT, for uninsured women with OUD and any co-occurring SUD/MH conditions for up to 12 months postpartum. 3. Training for obstetricians or other healthcare personnel that work with pregnant women and their families regarding treatment of OUD and any co-occurring SUD/MH conditions. 4. Expand comprehensive evidence-based treatment and recovery support for NAS babies; expand services for better continuum of care with infant-need dyad; expand long-term treatment and services for medical monitoring of NAS babies and their families. 5. Provide training to health care providers who work with pregnant or parenting women on best practices for compliance with federal requirements that children born with Neonatal Abstinence Syndrome get referred to appropriate services and receive a plan of safe care. 6. Child and family supports for parenting women with OUD and any co-occurring SUD/MH conditions. 7. Enhanced family supports and child care services for parents with OUD and any co-occurring SUD/MH conditions. 8. Provide enhanced support for children and family members suffering trauma as a result of addiction in the family; and offer trauma-informed behavioral health treatment for adverse childhood events. 9. Offer home-based wrap-around services to persons with OUD and any co-occurring SUD/MH conditions, including but not limited to parent skills training. 10. Support for Children’s Services – Fund additional positions and services, including supportive housing and other residential services, relating to children being removed from the home and/or placed in foster care due to custodial opioid use.
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F. Prevent Over-Prescribing and Ensure Appropriate Prescribing and Dispensing of Opioids	Support efforts to prevent over-prescribing and ensure appropriate prescribing and dispensing of opioids through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following: 1. Fund medical provider education and outreach regarding best prescribing practices for opioids consistent with Guidelines for Prescribing Opioids for Chronic Pain from the U.S. Centers for Disease Control and Prevention, including providers at hospitals (academic detailing). 2. Training for health care providers regarding safe and responsible opioid prescribing, dosing, and tapering patients off opioids. 3. Continuing Medical Education (CME) on appropriate prescribing of opioids. 4. Support for non-opioid pain treatment alternatives, including training providers to offer or refer to multi-modal, evidence-informed treatment of pain. 5. Support enhancements or improvements to Prescription Drug Monitoring Programs (PDMPs), including but not limited to improvements that: a. Increase the number of prescribers using PDMPs; b. Improve point-of-care decision-making by increasing the quantity, quality, or format of data available to prescribers using PDMPs, by improving the interface that prescribers use to access PDMP data, or both; or c. Enable states to use PDMP data in support of surveillance or intervention strategies, including MAT referrals and follow-up for individuals identified within PDMP data as likely to experience OUD in a manner that complies with all relevant privacy and security laws and rules. 6. Ensuring PDMPs incorporate available overdose/naloxone deployment data, including the United States Department of Transportation's Emergency Medical Technician overdose database in a manner that complies with all relevant privacy and security laws and rules. 7. Increase electronic prescribing to prevent diversion or forgery. 8. Educate Dispensers on appropriate opioid dispensing.
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G. Prevent Misuse of Opioids	Support efforts to discourage or prevent misuse of opioids through evidence-based or evidence informed programs or strategies that may include, but are not limited to, the following: 1. Fund media campaigns to prevent opioid misuse. 2. Corrective advertising or affirmative public education campaigns based on evidence. 3. Public education relating to drug disposal. 4. Drug take-back disposal or destruction programs. 5. Fund community anti-drug coalitions that engage in drug prevention efforts. 6. Support community coalitions in implementing evidence-informed prevention, such as reduced social access and physical access, stigma reduction – including staffing, educational campaigns, support for people in treatment or recovery, or training of coalitions in evidence-informed implementation, including the Strategic Prevention Framework developed by the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA). 7. Engage non-profits and faith-based communities as systems to support prevention. 8. Fund evidence-based prevention programs in schools or evidence-informed school and community education programs and campaigns for students, families, school employees, school athletic programs, parent-teacher and student associations, and others. 9. School-based or youth-focused programs or strategies that have demonstrated effectiveness in preventing drug misuse and seem likely to be effective in preventing the uptake and use of opioids. 10. Create of support community-based education or intervention services for families, youth, and adolescents at risk for OUD and any co-occurring SUD/MH conditions. 11. Support evidence-informed programs or curricula to address mental health needs of young people who may be at risk of misusing opioids or other drugs, including emotional modulation and resilience skills. 12. Support greater access to mental health services and supports for young people, including services and supports provided by school nurses, behavioral health workers or other school staff, to address mental health needs in young people that (when not properly addressed) increase the risk of opioid or other drug misuse.
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H. Prevent Overdose Deaths and Other Harms (Harm reduction)	Support efforts to prevent or reduce overdose deaths or other opioid-related harms through evidence based or evidence-informed programs or strategies that may include, but are not limited to, the following: 1. Increase availability and distribution of naloxone and other drugs that treat overdoses for first responders, overdose patients, individuals with OUD and their friends and family members, individuals at high risk of overdose, schools, community navigators and outreach workers, persons being released from jail or prison, or other members of the general public. 2. Public health entities provide free naloxone to anyone in the community 3. Training and education regarding naloxone and other drugs that treat overdoses for first responders, overdose patients, patients taking opioids, families, schools, community support groups, and other members of the general public. 4. Enable school nurses and other school staff to respond to opioid overdoses, and provide them with naloxone, training, and support. 5. Expand, improve, or develop data tracking software and applications for overdoses/naloxone revivals. 6. Public education relating to emergency responses to overdoses. 7. Public education relating to immunity and Good Samaritan laws. 8. Educate first responders regarding the existence and operation of immunity and Good Samaritan laws. 9. Syringe service programs and other evidence-informed programs to reduce harms associated with intravenous drug use, including supplies, staffing, space, peer support services, referrals to treatment, fentanyl checking, connections to care, and the full range of harm reduction and treatment services provided by these programs. 10. Expand access to testing and treatment for infectious diseases such as HIV and Hepatitis C resulting from intravenous opioid use. 11. Support mobile units that offer or provide referrals to harm reduction services, treatment, recovery supports, health care, or other appropriate services to persons that use opioids or persons with OUD and any co-occurring SUD/MH conditions. 12. Provide training in harm reduction strategies to health care providers, students, peer recovery coaches, recovery outreach specialists, or other professionals that provide care to persons who use opioids or persons with OUD and any co-occurring SUD/MH conditions. 13. Support screening for fentanyl in routine clinical toxicology testing.
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I. First Responders	In addition to items in sections C, D, and H relating to first responders, support the following: 1. Educate law enforcement or other first responders regarding appropriate practices and precautions when dealing with fentanyl or other drugs. 2. Provision of wellness and support services for first responders and others who experience secondary trauma associated with opioid-related emergency events.
J. Leadership, Planning and Coordination	Support efforts to provide leadership, planning, coordination, facilitation, training and technical assistance to abate the opioid epidemic through activities, programs, or strategies that may include, but are not limited to, the following: 1. Statewide, regional, local, or community regional planning to identify root causes of addiction and overdose, goals for reducing harms related to the opioid epidemic, and areas and populations with the greatest needs for treatment intervention services; to support training and technical assistance; or to support other strategies to abate the opioid epidemic described in this opioid abatement strategy list. 2. A dashboard to share reports, recommendations, or plans to spend opioid settlement funds; to show how opioid settlement funds have been spent; to report program or strategy outcomes; or to track, share, or visualize key opioid-related or health-related indicators and supports as identified through collaborative statewide, regional, local, or community processes. 3. Invest in infrastructure or staffing at government or not-for-profit agencies to support collaborative, cross-system coordination with the purpose of preventing overprescribing, opioid misuse, or opioid overdoses, treating those with OUD and any co-occurring SUD/MH conditions, supporting them in treatment or recovery, connecting them to care, or implementing other strategies to abate the opioid epidemic described in this opioid abatement strategy list. 4. Provide resources to staff government oversight and management of opioid abatement programs.
K. Training	In addition to the training referred to throughout this document, support training to abate the opioid epidemic through activities, programs, or strategies that may include, but are not limited to, the following: 1. Provide funding for staff training or networking programs and services to improve the capability of government, community, and not-for-profit entities to abate the opioid crisis. 2. Support infrastructure and staffing for collaborative cross-system coordination to prevent opioid misuse, prevent overdoses, and treat those with OUD and any co-occurring SUD/MH conditions, or implement other strategies to abate the opioid epidemic described in this opioid abatement strategy list (e.g., health care, primary care, pharmacies, PDMPs, etc.).

L. Research	Support opioid abatement research that may include, but is not limited to, the following: 1. Monitoring, surveillance, data collection, and evaluation of programs and strategies described in this opioid abatement strategy list. 2. Research non-opioid treatment of chronic pain. 3. Research on improved service delivery for modalities such as SBIRT that demonstrate promising but mixed results in populations vulnerable to opioid use disorders. 4. Research on novel harm reduction and prevention efforts such as the provision of fentanyl test strips. 5. Research on innovative supply-side enforcement efforts such as improved detection of mail-based delivery of synthetic opioids. 6. Expanded research on swift/certain/fair models to reduce and deter opioid misuse within criminal justice populations that build upon promising approaches used to address other substances (e.g. Hawaii HOPE and Dakota 24/7). 7. Epidemiological surveillance of OUD-related behaviors in critical populations including individuals entering the criminal justice system, including but not limited to approaches modeled on the Arrestee Drug Abuse Monitoring (ADAM) system. 8. Qualitative and quantitative research regarding public health risks and harm reduction opportunities within illicit drug markets, including surveys of market participants who sell or distribute illicit opioids. 9. Geospatial analysis of access barriers to MAT and their association with treatment engagement and treatment outcomes.
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ATTACHMENT 8: ROMA LOGIC MODEL

 COMMUNITY SERVICES DEPARTMENT FY 20XX Opioid Settlement Fund (OSF) ROMA Logic Model <i>All INFO MUST FIT ON THIS PAGE</i> 							
Agency Name			Program Name				
Name of person completing this logic model:			Email of person completing this logic model:			Phone # of person completing this logic model:	
Identified Problem, Need, or Situation	Service or Activity	Outcome <i>General statement of results expected</i>	Projected Indicator <i># to achieve/# to be served; %; time frame</i>	Actual Indicator <i># achieved/# served; %; time frame</i>	Measurement Tool	Data Procedures	Frequency <i>Data Collection and Reporting</i>
					Output Tool:	Who does it?:	Data Collection:
					Outcome Tool:	What is the process?:	
						Where is the data stored?:	Data Reporting:
Mission Statement:							

ROMA Logic Model Checklist

- Was the mission of the organization or program identified? (foundation)
- Is the need statement clear? (not a “need for a service” but the identification of what is needed or lacking) (Column 1)
- Does the service or activity match the need? (Columns 1-2)
- Does the outcome (column 3) match the need (column 1)? Can the outcome be produced by the identified service? (column 2) Ensure the outcomes are the required outcomes listed in the guidance (column 3)?
- Is the outcome realistic, clear, and attainable? (Column 3) (does the outcome avoid words like “received” as this makes the statement appear to relate only to the receipt of a service and not an outcome – rather say what has changed)
- Does the projected indicator provide a way to measure the outcome? Are the indicators realistic, clear, and attainable/ SMART? (column 4)
- Does the projected indicator include number to achieve the outcome, number to be served, the percent that represents the relationship between these two numbers and a timeframe? (column 4)
- If this is a logic model created after services have been delivered, identify the actual indicator, including actual numbers who achieved, actual number who were served, the percent that represents the relationship between the actual numbers, and the time frame (column 5). (This section is usually left blank).
- Analysis guidance: Are the actual results consistent with the projected numbers? What is the agency’s ability to target its performance? Note: this is the percent that represents the relationship between the number who actually achieved and the number projected to achieve.
- Was a specific measurement tool(s) identified? Were both output and outcome measurement tools identified? (Column 6)
- Are the data collection procedures and personnel specific? (Column 7)
- Is the frequency of data collection sufficient to support monitoring progress and outcomes? Are the intervals of reporting clearly identified? (Column 8)

ATTACHMENT 9: CONTINUOUS QUALITY MANAGEMENT/IMPROVEMENT

OVERVIEW:

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.

Quality infrastructure is the structure and supports that allow the organization to measure performance and improve processes. Quality infrastructure components include leadership, quality improvement teams, quality related training/capacity building, and a written quality management plan. It is often difficult to sustain a success quality management program if the infrastructure components are missing or weak.

When most people think about quality management, performance measurement and quality improvement come to mind. Performance measurement is the routine collection and analysis of data. The analysis is completed by defining the data elements used to calculate the numerator and denominator. Performance measures must be based on established professional standards and/or evidenced based research, when possible.

Quality improvement is a method that uses the tools of quality in an effective, logical and systematic process to solve problems, improve efficiency and eliminate non-value adding steps in the work flow. There are many methods for quality improvement process, but in general they all involve an ongoing cycle of planning, implementation, analysis, improvement. It is important to conduct performance measurement and quality improvement activities in balance. Regularly measuring performance to see if the project is having an impact is critical.

A successful quality management program should:

- Have identified leadership, accountability, and dedicated resources available to the program.
- Use data and measurable outcomes to determine progress toward evidenced-based benchmarks.
- Focus on linkages, efficiencies, and provider and client expectations in addressing outcome improvement.
- Be adaptive to change and fit within the framework of other programmatic quality assurance and quality improvement activities (i.e., Joint Commission on the Accreditation of Healthcare Organizations [JCAHO], Medicaid, and other HRSA programs).
- Ensure that data collected are fed back into the quality improvement process so that goals are accomplished and improved outcomes are realized

WHY:

In order to continuously improve systems of care, evaluations of the quality of care should consider the service delivery process, quality of personnel and resources available, and the outcomes. The overall purpose of a quality management program is to ensure that:

- Services adhere to established service standards, treatment guidelines and established clinical practice, if applicable.
- Strategies are developed for improvement of services provided, including clinical services and supportive services.
- Demographic, clinical and utilization data are used to evaluate service trends and quality of care.

- Appropriate leaders and stakeholders are included throughout the quality improvement process.
- Continuous processes to improve quality of care are in motion.

Ensuring service effectiveness through evaluation has long been a priority of CSD. Over the past several years CSD has worked with funded agencies and key stakeholders to establish measurable outputs and outcomes. Extensive training has been provided on the value of and process to implement a quality management plan. Data collection and performance reports have led to recommendations supporting program improvements. This next phase of CSD's efforts to improve the quality of services is to add additional structure and contractual requirements, as well as dedicated financial resources. With providing additional funding support it is anticipated that CSD funded agencies through CQM will develop and deliver community trainings to translate knowledge from their research, planning and evaluation to improve quality.

HOW:

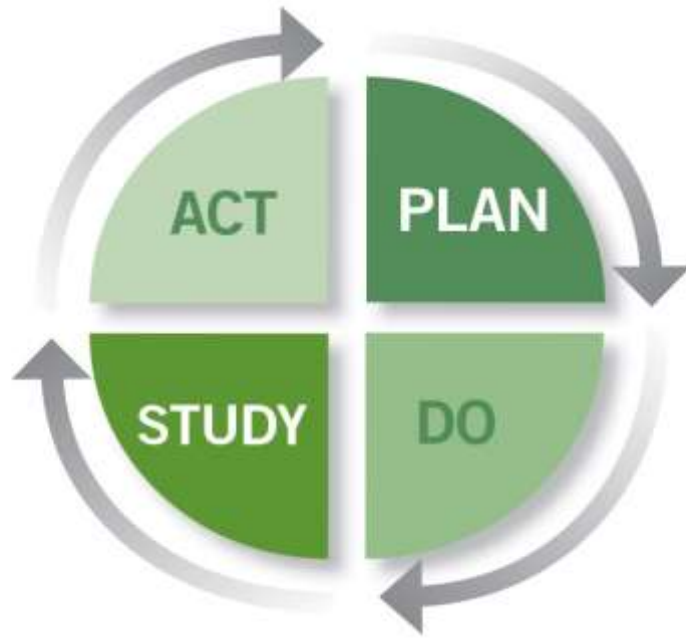
Funded agencies' expenses for Continuous Quality Improvement (CQI) activities are administrative and may be budgeted up to 5% of the contract amount.

Funded service providers must have:

- An active CQM project during the entire length of the contract; this can be one project that spans the length of the contract or multiple projects.
- Established processes for ensuring that services are provided in accordance with established treatment guidelines and standards of care, if applicable.
- Incorporated quality improvement activities into funding proposals (NOFO) and adhere to quality management contractual requirements

PLAN:

CQM Projects will follow the Plan-Do-Study-Act (PDSA) cycle, which is a systematic process for gaining valuable learning and knowledge for the continual improvement of a product, process, or service. The cycle begins with the Plan step. This involves identifying a goal or purpose, formulating a theory, defining success metrics and putting a plan into action. These activities are followed by the Do step, in which the components of the plan are implemented, such as making a product. Next comes the Study step, where outcomes are monitored to test the validity of the plan for signs of progress and success, or problems and areas for improvement. The Act step closes the cycle, integrating the learning generated by the entire process, which can be used to adjust the goal, change methods, reformulate a theory altogether, or broaden the learning – improvement cycle from a small-scale experiment to a larger implementation Plan. These four steps can be repeated over and over as part of a never-ending cycle of continual learning and improvement (definitions come from the Deming Institute). Training and templates for projects will be provided by CSD staff.



Continuous Quality Management Project

Plan Do Study Act (PDSA) Form

Start Date:

End Date:

Project Title:

Agency Name:

Project Lead:

Aim Statement (What you are trying to accomplish?):

- **Specific**- targeted population
- **Measurable**- what to measure and clearly stated goal
- **Achievable**- brief plan to accomplish it
- **Relevant**- why is it important to do now
- **Time Specific**- anticipated length of cycle

Test/Implementation Plan (Think about what changes you can make that will result in an improvement):

What change are you testing with the PDSA cycle(s)? Who will be involved in this PDSA? How long will the change take to implement? What resources will you need? List your action steps along with person(s) responsible and timeline.

Prediction:

Data Collection Plan (Think about how you will know the change is an improvement):

What data/measures will be collected? Who will collect the data? When will the collection of data take place? How will the data (measures or observations) be collected and displayed? What decisions will be made based on the data?

ATTACHMENT 10: BUDGET WORKSHEET

Example of Blank template

FY 2026 PROGRAM BUDGET WORKSHEET											
PBCSD Funded Budget Items		Proposed Program Name	Palm Beach County	PBC Program Confirmed	PBC Program Pending	PBC Program Pending	Total Program Funding				
Program Period: FY 2026	TOTAL PROGRAM FUNDING AMOUNT =		\$	\$	\$	\$	\$				
Program Expenses	Schedule A Core Strategies	Schedule B Approved Uses	Narrative	Total	Total	Total	Total				
Personnel			\$	\$	\$	\$	\$				
Program Manager											
Program Assistant											
Fringe Benefits - Program											
Community Educator											
Building /Occupancy			\$	\$	\$	\$	\$				
Rent/Lease											
Building Maintenance											
Insurance											
Utilities			\$	\$	\$	\$	\$				
Electric											
Water											
Telephone											
Project Supplies/Equipment			\$	\$	\$	\$	\$				
Office Supplies											
Postage/Shipping											
Printing											
Materials/Program Supplies											
Equipment Rental											
Professional Fees			\$	\$	\$	\$	\$				
Conference Registration Fees											
Training											
Travel/Mileage											
TOTAL PROGRAM EXPENSES =			\$	\$	\$	\$	\$				
Administrative Expenses			Narrative								
Personnel			\$	\$	\$	\$	\$				
Executive Position #1											
Consulting Fees			\$	\$	\$	\$	\$				
XYZ Consultants											
TOTAL ADMINISTRATIVE EXPENSES =			\$	\$	\$	\$	\$				
Administrative % of PBC Award			#DIV/0!								

Example of Completed Budget Submission

FY 2026 PROGRAM BUDGET WORKSHEET

PBCSD Funded Budget Items		Proposed Program Name	Palm Beach County Program	PBC Program Funder #2 Confirmed	PBC Program Funder #3 Pending	PBC Program Funder #4 Pending	Total Program Funding (All Sources)
Program Period: FY 2026			Proposed				
		TOTAL PROGRAM FUNDING AMOUNT =	\$ 120,195.00	\$ 45,000.00	\$ 19,000.00	\$ 7,500.00	\$ 191,695.00
			Amount	Amount	Amount	Amount	Amount
Program Expenses	Schedule A Core Strategies	Schedule B Approved Uses	Narrative				
Personnel							
Program Manager	E. Expansion of Warm Hand-off Programs and Recovery Services	C. Connect people Who Need Help to the Help they Need (Connections to Care)	Program manager position for community support. Salary expense is 100% funded by PBC FAA award and includes fringe benefits.	\$ 72,445.00	\$ 17,500.00	\$ 7,500.00	\$ 142,445.00
Program Assistant	E. Expansion of Warm Hand-off Programs and Recovery Services	C. Connect people Who Need Help to the Help they Need (Connections to Care)	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)	\$ 30,000.00			\$ 55,000.00
Fringe Benefits - Program Assistant	E. Expansion of Warm Hand-off Programs and Recovery Services	B. Support People in Treatment and Recovery	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 \$900.00.	\$ 900.00			\$ 900.00
Community Educator	E. Expansion of Warm Hand-off Programs and Recovery Services	B. Support People in Treatment and Recovery	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
Building /Occupancy				\$ 27,050.00	\$ -	\$ -	\$ 27,050.00
Programmatic Rent/Lease	D. Expanding Treatment for Neonatal abstinence Syndrome		Note: rent for areas that house administration should be listed separately under admin section* 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 parties.	\$ 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

FY 2026 PROGRAM BUDGET WORKSHEET

PBCSD 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 =	\$ 120,195.00	\$ 45,000.00	\$ 19,000.00	\$ 7,500.00	\$ 191,695.00
			Amount	Amount	Amount	Amount	Amount
Program Expenses	Schedule A Core Strategies	Schedule B Approved Uses					
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	\$ 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 =	\$ 109,745.00	\$ 45,000.00	\$ 19,000.00	\$ 7,500.00	\$ 181,245.00
Administrative Expenses		Narrative					
Personnel			\$ 7,500.00	\$ -	\$ -	\$ -	\$ 7,500.00
Executive Position #1 (UL)		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 = %	\$ 7,500.00				\$ 7,500.00
Consulting Fees			\$ 2,950.00	\$ -	\$ -	\$ -	\$ 2,950.00
QVZ Consultants		Accounting and audit expenses for FAA program. Annual Accounting fee = \$950. Annual Audit fee = \$2,000. Total expense = \$2,950	\$ 2,950.00				\$ 2,950.00
		TOTAL ADMINISTRATIVE EXPENSES =	\$ 10,450.00	\$ -	\$ -	\$ -	\$ 10,450.00
Administrative % of PBC Award			9.52%				

ATTACHMENT 11: SCOPE OF WORK

FY 2026 – 2028 SCOPE OF WORK AND SERVICES

Agency Name:

Program Name:

Location:

Funding Priority:

Scope of Work

A. Program Description:

B. Priority/Focus Population: Will be defined as ...

- i. **Eligibility Criteria:** Individuals must be residents of Palm Beach County with a substance use or co-occurring disorder.
- ii. **Documentation of Eligibility:** All Individuals will be screened for eligibility. Supporting documentation of eligibility will be retained in each Participant's file.

C. Individuals Served: A minimum of # unduplicated Individuals.

D. Service Delivery:

- i. AGENCY shall

ATTACHMENT 12: INSURANCE REQUIREMENTS

Prior to execution of the agreement by the COUNTY, the AGENCY must obtain all insurance required under this article and have such insurance approved by the COUNTY's Risk Management Department.

- A. AGENCY shall, at its sole expense, agree to maintain in full force and effect at all times during the term of the agreement, insurance coverage and limits (including endorsements), as described herein. AGENCY shall agree to provide the COUNTY with at least ten (10) day prior notice of any cancellation, non-renewal or material change to the insurance coverages. The requirements contained herein, as well as COUNTY's review or acceptance of insurance maintained by AGENCY are not intended to and shall not in any manner limit or qualify the liabilities and obligations assumed by AGENCY under the Agreement. Where permitted by the policy, coverage shall apply on a primary and non-contributory basis.
- B. **Commercial General Liability** AGENCY shall maintain Commercial General Liability at a limit of liability not less than **\$500,000** Each Occurrence. Coverage shall not contain any endorsement excluding Contractual Liability or Cross Liability unless granted in writing by COUNTY's Risk Management Department.
- B. **Business Automobile Liability** AGENCY shall maintain Business Automobile Liability at a limit of liability not less than **\$500,000** Each Accident for all owned, non-owned and hired automobiles. In the event AGENCY does not own any automobiles, the Business Auto Liability requirement shall be amended allowing AGENCY to agree to maintain only Hired & Non-Owned Auto Liability. This amended requirement may be satisfied by way of endorsement to the Commercial General Liability, or separate Business Auto coverage form.
- C. **Workers' Compensation Insurance & Employers Liability** AGENCY shall maintain Workers' Compensation & Employers Liability in accordance with Florida Statute Chapter 440.
- D. **Professional Liability** AGENCY shall maintain Professional Liability or equivalent Errors & Omissions Liability at a limit of liability not less than **\$1,000,000** Each Claim. When a self-insured retention (SIR) or deductible exceeds **\$10,000**, COUNTY reserves the right, but not the obligation, to review and request a copy of AGENCY's most recent annual report or audited financial statement. For policies written on a "Claims-Made" basis, AGENCY shall maintain a Retroactive Date prior to or equal to the effective date of the agreement. The Certificate of Insurance providing evidence of the purchase of this coverage shall clearly indicate whether coverage is provided on an "occurrence" or "claims - made" form. If coverage is provided on a "claims - made" form the Certificate of Insurance must also clearly indicate the "retroactive date" of coverage. In the event the policy is canceled, non-renewed, switched to an Occurrence Form, retroactive date advanced, or any other event triggering the right to purchase a Supplement Extended Reporting Period (SERP) during the life of the agreement, AGENCY shall purchase a SERP with a minimum reporting period not less than three (3) years.
- E. **Additional Insured** AGENCY shall endorse the COUNTY as an Additional Insured with a CG 2026 Additional Insured - Designated Person or Organization endorsement, or its equivalent, to the Commercial General Liability. The Additional Insured endorsement shall read "Palm Beach County Board of County Commissioners, a Political Subdivision of the State of Florida, its Officers, Employees and Agents."

- F. **Waiver of Subrogation** AGENCY hereby waives any and all rights of Subrogation against the COUNTY, its officers, employees and agents for each required policy. When required by the insurer, or should a policy condition not permit an insured to enter into a pre-loss contract to waive subrogation without an endorsement to the policy, then AGENCY shall agree to notify the insurer and request the policy be endorsed with a Waiver of Transfer of rights of Recovery Against Others, or its equivalent. This Waiver of Subrogation requirement shall not apply to any policy, which specifically prohibits such an endorsement, or which voids coverage should AGENCY enter into such a contract on a pre- loss basis.
- G. **Certificate(s) of Insurance** No later than the execution of the agreement, AGENCY shall deliver to the COUNTY's representative as identified in Article 24, a Certificate(s) of Insurance evidencing that all types and amounts of insurance coverages required by the agreement have been obtained and are in full force and effect. The Certificate of Insurance shall be issued to
- Palm Beach County Board of Commissioners c/o
Community Services Department
810 West Datura Street West
Palm Beach, FL 33401
ATTN: Office of Behavioral Health and Substance Use Disorders
- H. **Umbrella or Excess Liability** If necessary, AGENCY may satisfy the minimum limits required above for Commercial General Liability, Business Auto Liability, and Employer's Liability coverage under Umbrella or Excess Liability. The Umbrella or Excess Liability shall have an Aggregate limit not less than the highest "Each Occurrence" limit for either Commercial General Liability, Business Auto Liability, or Employer's Liability. The COUNTY shall be specifically endorsed as an "Additional Insured" on the Umbrella or Excess Liability, unless the Certificate of Insurance notes the Umbrella or Excess Liability provides coverage on a "Follow-Form" basis.
- I. **Right to Review** COUNTY, by and through its Risk Management Department, in cooperation with the contracting/monitoring department, reserves the right to review, modify, reject or accept any required policies of insurance, including limits, coverage, or endorsements, herein from time to time throughout the term of the agreement. COUNTY reserves the right, but not the obligation, to review and reject any insurer providing coverage because of its poor financial condition or failure to operate legally.

ATTACHMENT 13 – UNIT RATE

FY 2026 – 2028 OSF AGENCIES UNITS OF SERVICE RATE AND DEFINITION

Agency Name:
Subcategory:
Program Name:

Service	Unit Cost / Actual Cost	Total FY 2026	Total FY 2027	Total FY 2028	Total 3 Year Contract Amount
Program Direct Services:					
CQM: Actual cost of staff expenses* for direct CQM services.					
Admin Costs (capped at 5%)					
Total Contract over a three (3) year period					

**To support Continuous Quality Management (CQM) activities, approved CQM expenses cannot exceed 5% of the Total Contract/Program Award.*

Actual Cost/Unit Cost expenses shall mean expenses authorized by the COUNTY pursuant to this Agreement and reasonably incurred by AGENCY directly in connection with AGENCY'S performance of its duties and Scope of Work pursuant to this Agreement. AGENCY will sustain the program for the full Agreement period regardless of the rate of expenditure of above funds.

For actual cost reimbursement items, backup documentation must be submitted along with the invoice and signed cover letter that may include but is not limited to the following: program general ledger, copies of paid receipts, copies of checks, invoices, or any other applicable documents acceptable to the Palm Beach County Department of Community Services. Additional items may be requested as part of the invoice submission, or via desk and/or on-site monitoring on a periodic basis.

ATTACHMENT 14

OSF SUBRECIPIENT AGREEMENT

This Agreement is made as of the _____ day of _____, 20__, by and between Palm Beach County, a Political Subdivision of the State of Florida, by and through its Board of County Commissioners, hereinafter referred to as the COUNTY, and _____, hereinafter referred to as the AGENCY, a not-for-profit corporation authorized to do business in the State of Florida, whose Federal Tax I.D. is _____.

WHEREAS, the COUNTY, pursuant to the Florida Opioid Allocation and Statewide Response Agreement, **(EXHIBIT K)**, is the designated recipient of Opioid Settlement Funds; and

WHEREAS, the AGENCY has proposed providing certain services funded by Opioid Settlement Funds; and

WHEREAS, the Board of County Commissioners (BCC) unanimously approved the Behavioral Health and Substance Use Disorder Plan 2024 (2024 Plan) and an opioid settlement fund expense plan on October 22, 2024; and as approved, the 2024 Plan includes: Opioid Settlement Funds be allocated with ninety (90) percent of funds going towards Social Determinants of Health and ten (10) percent towards Deep End Treatment; the COUNTY'S collective and collaborative efforts have been directed at planning, developing and executing a comprehensive person-centered, recovery-oriented ecosystem of care; the COUNTY measures its initiatives primarily through a resilience and recovery capital framework because of its ability to capture resilience, health, well-being, social determinants of health and risk factors; and

WHEREAS, the COUNTY is committed to a syndemic approach to address the needs of communities overburdened by concurrent or sequential epidemics of HIV, Behavioral Health, Substance Use Disorders, and/or Housing Instability; and

WHEREAS, the ecosystem, at the Macro level, is concerned with interaction and interdependence of individuals with their surrounding physical, social, and cultural systems to holistically assess how individuals affect and are affected by such systems; and makes accessible a network of services and supports that is person-centered and builds on the strengths and resilience of individuals, families, and communities to achieve improved health, wellness, and quality of life; and

WHEREAS, the Micro level aims to increase an individual's resilience and recovery capital through a network of "Recovery Hubs" and other support services providing non-clinical resources, including peer support, employment and job training linkages, and social and recreational activities intended for people in or seeking recovery; and

WHEREAS, the federal Substance Abuse and Mental Health Services Administration (SAMHSA) indicates resilience is a key component to a system of care and that an extensive literature review found that resilience is unanimously negatively associated with depression, anxiety and trauma symptoms in youth, and is therefore, meaningful for screening purposes in at-risk populations/situations and further offers better mental health and health outcomes not only in adolescents and children's populations, but in the adult population as well; and

WHEREAS, the COUNTY has utilized Recovery Capital Indexing (RCI) to measure and assess resilience and recovery capital since 2019 and is key to measuring the system of care's success, providing a comprehensive picture of a person's well-being that allows for a personalized approach to recovery and wellness; and

WHEREAS, critical to the BCC's goals of establishing a person-centered, recovery-oriented ecosystem is the emphasis placed on social determinants of health, setting a clear system of care path that is focused on improved long-term recovery outcomes and increased resiliency; and

WHEREAS, the AGENCY has agreed to ensure access to funded services for COUNTY departments, divisions and/or programs; and to ensure that individuals referred from COUNTY departments, divisions and/or programs will receive services on a timely basis.

NOW, THEREFORE, in consideration of the mutual promises contained herein, the COUNTY and the AGENCY agree as follows:

ARTICLE 1 INCORPORATION OF RECITALS

The foregoing recitals are true and correct and incorporated herein by reference.

ARTICLE 2 FUNDED SERVICES

The AGENCY agrees to provide Tiny Homes Purchase Assistance services to residents with substance use disorders of Palm Beach County as set forth in **EXHIBIT A - SCOPE OF WORK AND SERVICES**. The AGENCY also agrees to provide deliverables, including reports, as specified in **EXHIBIT A** and **EXHIBIT G - AGENCY'S PROGRAMMATIC REQUIREMENTS**. No changes in the scope of work or services are to be conducted without the written approval of Palm Beach County Community Services Department (the DEPARTMENT). The AGENCY receiving funds must be an agency within Palm Beach County and the AGENCY'S services, with these contracted funds, are limited to meeting the needs of Palm Beach County residents.

No part of the funding is intended to benefit any specific individual or recipient. All funding is intended for the overall benefit of all recipients of the services provided by the programs being funded herein.

ARTICLE 3 ORDER OF PRECEDENCE

Conflicting provisions hereof, if any, shall prevail in the following descending order of precedence: (1) Laws passed by Congress, which are codified in provisions of the United States Code (U.S.C.) applicable to the funding source for this Agreement; (2) Rules or regulations adopted by a federal agency, which are codified in the Code of Federal Regulations (C.F.R) and applicable to the funding source for this Agreement; (3) the federal award or funding document for this Agreement; (4) the provisions of the Agreement, including **EXHIBIT A, EXHIBIT B, EXHIBIT G, and EXHIBIT K;** and (5) all other documents, including but not limited to, memorandum(s) of understanding and agreements, if any, cited herein or incorporated herein by reference.

ARTICLE 4 SCHEDULE

The AGENCY shall commence services on October 1, 2026, and complete services on June 30, 2028.

The parties shall amend this Agreement if there is a change to the Scope of Work/Implementation Plan, funding, and/or federal, state, and local laws or policies affecting this Agreement.

Monthly billing, reports and other items shall be delivered or completed in accordance with the detailed schedule set forth in **EXHIBIT A, EXHIBIT B, EXHIBIT G, and EXHIBIT K.**

ARTICLE 5 PAYMENTS TO THE OPIOID SETTLEMENT FUNDS FUNDED AGENCY

The COUNTY shall pay to the AGENCY for services rendered under this Agreement not to exceed a total amount of **DOLLARS AND ZERO CENTS (\$) OVER THE TERM OF THIS AGREEMENT.**

The AGENCY will bill the COUNTY on a monthly basis, or as otherwise provided, at the amounts set forth in **EXHIBIT B** for services rendered toward the completion of the Scope of Work. Where incremental billings for partially completed items are permitted, the total billings shall not exceed the estimated percentage of completion as of the billing date.

The program and unit cost definitions for this Agreement year are set forth in **EXHIBIT B**. In accordance with **EXHIBIT K**, where itemized reimbursement for authorized travel expenses is permitted in this Agreement, AGENCY shall submit bills for any travel expenses in accordance with section 112.061 Florida Statutes. All requests for payments of this Agreement shall include an original cover memo on AGENCY letterhead signed by the Chief Executive Officer, Chief Financial Officer or their designee.

The AGENCY is obligated to provide the COUNTY with the properly completed requests for all funds to be paid relative to this Agreement. Any amounts not submitted by the AGENCY shall remain the COUNTY'S and the COUNTY shall have no further obligation with respect to such amounts.

Invoices. Payment of invoices shall be contingent on timely receipt of all required reports. Invoices received from the AGENCY pursuant to this Agreement will be submitted through the Services and Activities Management Information System (SAMIS) website, reviewed and approved by the COUNTY'S representative, to verify that services have been rendered in conformity with the Agreement. Approved invoices will then be sent to the Finance Department for payment. Invoices will normally be paid within forty-five (45) days following the COUNTY representative's approval, in accordance with the Local Government Prompt Payment Act sections 218.70-218.80, as may be amended. Any payment due by COUNTY under the terms of this Agreement shall be withheld until all reports due from the AGENCY and necessary adjustments have been approved by the COUNTY. In the event that the AGENCY has drawn down all possible funds prior to the end of the contract period and does not comply with all reporting requirements, the COUNTY will take this into consideration during the next funding year.

Should this Agreement have approved subcontractor(s), the AGENCY shall pay the subcontractor(s) within ten (10) business days of receipt of payment from the COUNTY.

COUNTY funding can be used to match grants from non-COUNTY sources; however, the grantee cannot submit reimbursement requests for the same expenses to more than one funding source or under more than one COUNTY funded program.

Final Invoice: In order for both parties herein to close their books and records, the AGENCY will clearly state "final invoice" on the AGENCY'S final/last billing to the COUNTY. This shall constitute AGENCY'S certification that all services have been properly performed and all charges and costs have been invoiced to the COUNTY. Any other charges not properly included on this final invoice are waived by the AGENCY.

VSS Registration Required. In order to do business with the COUNTY, agencies are required to create a Vendor Registration Account OR activate an existing Vendor Registration Account through the Purchasing Department's Vendor Self Service (VSS) system, which can be accessed at <https://pbcvssp.co.palm-beach.fl.us/webapp/vssp/AltSelfService>. If AGENCY intends to use subagencies, AGENCY must also ensure that all subagencies are registered as agencies in VSS. All subcontractor agreements must include a contractual provision requiring that the subagency register in VSS. COUNTY will not finalize a contract award until the COUNTY has verified that the AGENCY and all of its subagencies are registered in VSS.

ARTICLE 6 AVAILABILITY OF FUNDS

The obligations of the COUNTY under this Agreement for the current or any subsequent State fiscal year are subject to the availability of funds lawfully appropriated for its purpose by the BCC, and received from the State of Florida pursuant to **EXHIBIT K** .

ARTICLE 7 TRUTH-IN-NEGOTIATION CERTIFICATE

Signature of this Agreement by the AGENCY shall also act as the execution of a truth-in-negotiation certificate certifying that the wage rates, over-head charges, and other costs used to determine the compensation provided for in this Agreement are accurate, complete and current as of the date of the Agreement and no higher than those charged to the AGENCY'S most favored customer for the same or substantially similar service.

The said rates and costs shall be adjusted to exclude any significant sums should the COUNTY determine that the rates and costs were increased due to inaccurate, incomplete or noncurrent wage rates or due to inaccurate representations of fees paid to outside consultants. The COUNTY shall exercise its rights under this Article within three (3) years following final payment.

ARTICLE 8 AMENDMENTS TO OPIOID SETTLEMENT FUNDING LEVELS

This Agreement may be amended to decrease and/or increase funds for the delivery of services depending upon the utilization and rate of expenditure of funds, or reallocations deemed necessary by the COUNTY.

At anytime during the term of this Agreement, if the AGENCY indicates in a written notice as set forth in Article 32 that it will not be able to spend a portion of the contracted amount in any or all of the service categories, or sweeps are needed due to underspending as determined by the COUNTY, the Department Director, or Assistant Director is authorized to decrease the funding amount without the need for an amendment to this Agreement. The Department Director or Assistant Director shall provide written notice to the AGENCY of the amount of the decrease in funding. Such notice shall not be deemed a cancellation of the Agreement. All remaining terms and conditions of this Agreement shall remain in full effect throughout the term of the Agreement.

AGENCY shall be subject to decrease of funds if funds are not utilized at the anticipated rate of expenditures. The anticipated rate of expenditures is determined by dividing the Agreement service amount by the months in the Agreement unless otherwise provided for in this Agreement. A ten percent (10%) increase over the monthly expenditure rate must be pre-approved by the COUNTY. The anticipated rate of expenditure will be determined on a per service basis. The formula for

reduction of funds shall be as follows:

At one quarter of the service period the AGENCY shall have provided at a minimum twenty percent (20%) of their anticipated services. If the minimum has not been reached ten percent (10%) of the unspent funds allocated for that service period can be swept through a budget reduction at the discretion of the COUNTY.

At one half of the service period the AGENCY shall have provided at a minimum forty percent (40%) of their anticipated services. If the minimum has not been reached fifty percent (50%) of the unspent funds allocated for that service period can be swept through a budget reduction at the discretion of the COUNTY.

At three quarters of the service period the AGENCY shall have provided at a minimum seventy-five percent (75%) of their anticipated services. If the minimum has not been reached one hundred percent (100%) of the unspent funds allocated for that service period can be swept through a budget reduction at the discretion of the COUNTY.

In the event that funds become available due to other agencies budgets being decreased, a currently funded agency may apply for those funds. AGENCY may become eligible for an increase in funding if they have spent their funds at the anticipated rate and can present a proposal for the utilization of additional funds by delivering additional units of service.

Any increase or decrease of funding for any of the AGENCY'S contracted programs of up to 10% may be approved by the Director of Community Services or Designee. Any increase or decrease of funding over 10% must be approved by the BCC.

ARTICLE 9 INSURANCE

The AGENCY shall maintain at its sole expense, in force and effect at all times during the term of this Agreement, insurance coverage and limits (including endorsements) as described herein. Failure to

maintain at least the required insurance shall be considered default of the Agreement. The requirements contained herein, as well as COUNTY'S review or acceptance of insurance maintained by AGENCY, are not intended to and shall not in any manner limit or qualify the liabilities and obligations assumed by AGENCY under the Agreement. AGENCY agrees to notify the COUNTY at least ten (10) days prior to cancellation, non-renewal or material change to the required insurance coverage. Where the policy allows, coverage shall apply on a primary and non-contributory basis.

- A. **Commercial General Liability:** AGENCY shall maintain Commercial General Liability at a limit of liability not less than \$500,000 combined single limit for bodily injury and property damage each occurrence. Coverage shall not contain any endorsement(s) excluding Contractual Liability or Cross Liability.
- B. **Additional Insured Endorsement:** The Commercial General Liability policy shall be endorsed to include, "Palm Beach County Board of County Commissioners, a Political Subdivision of the State of Florida, its Officers, Employees, and Agents" as an Additional Insured. A copy of the endorsement shall be provided to COUNTY upon request.
- C. **Workers' Compensation Insurance & Employer's Liability:** AGENCY shall maintain Workers' Compensation & Employer's Liability in accordance with Chapter 440 of the Florida Statutes.
- D. **Professional Liability:** AGENCY shall maintain Professional Liability, or equivalent Errors & Omissions Liability, at a limit of liability not less than \$1,000,000 each occurrence, and \$2,000,000 per aggregate. When a self-insured retention (SIR) or deductible exceeds \$10,000, COUNTY reserves the right, but not the obligation, to review and request a copy of AGENCY'S most recent annual report or audited financial statement. For policies written on a "claims- made" basis, AGENCY warrants the Retroactive Date equals or precedes the effective date of this Agreement. In the event the policy is canceled, non-renewed, switched to an Occurrence Form, retroactive date advanced, or any other event triggering the right to purchase a Supplement Extended Reporting Period (SERP) during the term of this Agreement, AGENCY shall purchase a SERP with a minimum reporting period not less than three (3) years after the expiration of the Agreement term. The requirement to purchase a SERP shall not relieve the AGENCY of the obligation to provide replacement coverage. The Certificate of Insurance providing evidence of the purchase of this coverage shall clearly indicate whether coverage is provided on an "occurrence" or "claims-made" form. If coverage is provided on a "claims-made" form the Certificate of Insurance must also clearly indicate the "retroactive date" of coverage.
- E. **Waiver of Subrogation:** Except where prohibited by law, AGENCY hereby waives any and all rights of Subrogation against the COUNTY, its officers, employees and agents for each required policy except Professional Liability. When required by the insurer, or should a policy condition not permit an insured to enter into a pre-loss agreement to waive subrogation without an endorsement, then AGENCY shall notify the insurer and request the policy be endorsed with a Waiver of Transfer of Rights of Recovery Against Others, or its equivalent. This Waiver of Subrogation requirement shall not apply to any policy that includes a condition to the policy specifically prohibiting such an endorsement or voids coverage should AGENCY enter into such an agreement on a pre-loss basis.
- F. **Certificates of Insurance:** On execution of this Agreement, renewal, within forty-eight (48) hours of a request by COUNTY, and upon expiration of any of the required coverage

throughout the term of this Agreement, the AGENCY shall deliver to the COUNTY or COUNTY'S designated representative a signed Certificate(s) of Insurance evidencing that all types and minimum limits of insurance coverage required by this Agreement have been obtained and are in force and effect. Certificates shall be issued to:

Palm Beach County Board of County Commissioners and may be

addressed:

Palm Beach County Board of County Commissioners c/o
Community Services Department
810 Datura Street
West Palm Beach, FL 33401
ATTN: Contracts Manager

G. Right to Revise or Reject: COUNTY, by and through its Risk Management Department in cooperation with the contracting/monitoring department, reserves the right to review, modify, reject, or accept any required policies of insurance, including limits, coverage, or endorsements.

ARTICLE 10 INDEMNIFICATION

AGENCY shall protect, defend, reimburse, indemnify, save and hold the COUNTY, its agents, employees, officers and elected officials harmless from and against any and all claims, liability, expense, loss, cost, damages or causes of action of every kind or character, including attorney's fees and costs, whether at trial or appellate levels or otherwise, arising during and as a result of their performance of the terms of this Agreement or due to the acts or omissions of AGENCY.

AGENCY will hold the COUNTY harmless and will indemnify the COUNTY for any funds that the COUNTY is obligated to refund the State of Florida based on the AGENCY'S provision of services, or failure to provide services, pursuant to this Agreement. The AGENCY also agrees that funds made available pursuant to this Agreement shall not be used by the AGENCY for the purpose of initiating or pursuing litigation against the COUNTY.

ARTICLE 11 SUCCESSORS AND ASSIGNS

The COUNTY and the AGENCY each binds itself and its partners, successors, executors, administrators and assigns to the other party and to the partners, successors, executors, administrators and assigns of such other party, in respect to all covenants of this Agreement. Except as above, neither the COUNTY nor the AGENCY shall assign, sublet, convey or transfer its interest in this Agreement without the prior written consent of the other.

ARTICLE 12 WARRANTIES AND LICENSING REQUIREMENTS

The AGENCY represents and warrants that it has and will continue to maintain all licenses and approvals required to conduct its business, and that it will at all times conduct its business activities in a reputable manner. Proof of such licenses and approvals shall be submitted to the COUNTY'S representative upon request.

The AGENCY shall comply with all laws, ordinances and regulations applicable to the services contemplated herein, to include those applicable to conflict of interest and collusion. The AGENCY is presumed to be familiar with all federal, state, and local laws, ordinances, codes and regulations that may in any way affect the services offered.

The AGENCY represents and warrants that it is governed by a Board, or other appropriate body, whose members have no monetary conflict of interest. Further, the members must also serve the AGENCY without compensation, and the composition of the governing body must reasonably reflect Palm Beach County and/or client demographics.

The AGENCY shall comply with all legal criminal history record check regulations required for the population they serve. AGENCY will have and comply with a policy that requires them to conduct a Level 1 or Level 2 Criminal Background Check as appropriate on applicants and volunteers being considered for positions that will provide services or will be around children, the elderly and other vulnerable adult populations, prior to start date. AGENCY may hire employees prior to obtaining the Level 2 background check results; however, the employees are only permitted to attend training and orientation during this period while they are waiting for their background check results. They are not allowed to have any contact with the clients during this period. Live Scan Screening proof must be provided that shows the scan was completed prior to an employee's start date. All criminal background checks shall be done at the expense of the AGENCY.

ARTICLE 13 PERSONNEL

The AGENCY warrants that all services shall be performed by skilled and competent personnel to the highest professional standards in the field. Any changes or substitutions in the AGENCY'S key personnel, or any personnel turnover which could adversely impact the AGENCY'S ability to provide services as may be listed herein must be made known to the COUNTY'S representative within five (5) working days of the change. AGENCY shall establish and consistently utilize an allocation methodology for personnel costs for program activities supported by multiple sources.

All of the services required hereinunder shall be performed by the AGENCY or under its supervision. The AGENCY further represents that it has, or will secure at its own expense, all necessary personnel required to perform the services under this Agreement, and that they shall be fully qualified and, if required, authorized, permitted, and/or licensed under State and local law to perform such services. Such personnel shall not be employees of or have any contractual relationship with the COUNTY.

All of the AGENCY'S personnel (and all subcontractors), while on COUNTY premises, will comply with all COUNTY requirements governing conduct, safety and security.

ARTICLE 14 SUBCONTRACTING

The COUNTY reserves the right to accept the use of a subcontractor, or to reject the selection of a particular subcontractor, and to inspect all facilities of any subcontractors in order to make a determination as to the capability of the subcontractor to perform properly under this Agreement.

If a subcontractor fails to perform or make progress, as required by this Agreement, and it is necessary to replace the subcontractor to complete the work in a timely fashion, the AGENCY shall promptly do so, subject to acceptance of the new subcontractor by the COUNTY.

ARTICLE 15 NONDISCRIMINATION

The COUNTY is committed to assuring equal opportunity in the award of contracts and complies with all laws prohibiting discrimination. Pursuant to Palm Beach County Resolution R2025-0748, as may be amended, the AGENCY warrants and represents that throughout the term of the Agreement, including any renewals thereof, if applicable, all of its employees are treated equally during employment without regard to race, color, religion, disability, sex, age, national

origin, ancestry, marital status, familial status, sexual orientation, or genetic information. Failure to meet this requirement shall be considered default of the Agreement.

As a condition of entering into this Agreement, the AGENCY represents and warrants that it will comply with the COUNTY'S Commercial Nondiscrimination Policy as described in Resolution R2025- 0748, as amended. As part of such compliance, the AGENCY shall not discriminate on the basis of race, color, national origin, religion, ancestry, sex, age, marital status, familial status, sexual orientation, disability, or genetic information in the solicitation, selection, hiring or commercial treatment of subcontractors, vendors, suppliers, or commercial customers, nor shall the AGENCY retaliate against any person for reporting instances of such discrimination. The AGENCY shall provide equal opportunity for subcontractors, vendors and suppliers to participate in all of its public sector and private sector subcontracting and supply opportunities, provided that nothing contained in this clause shall prohibit or limit otherwise lawful efforts to remedy the effects of discrimination.

The AGENCY understands and agrees that a material violation of this clause shall be considered a material breach of this Agreement and may result in termination of this Agreement, disqualification or debarment of the company from participating in COUNTY contracts, or other sanctions. This clause is not enforceable by or for the benefit of, and creates no obligation to, any third party. AGENCY shall include this language in its subcontracts.

ARTICLE 16 REMEDIES

This Agreement shall be governed by the laws of the State of Florida. Any legal action necessary to enforce the Agreement will be held in a court of competent jurisdiction located in Palm Beach County, Florida. No remedy herein conferred upon any party is intended to be exclusive of any other remedy, and each and every such remedy shall be cumulative and shall be in addition to every other remedy given hereunder or now or hereafter existing at law or in equity, by statute or otherwise. No single or partial exercise by any party of any right, power, or remedy hereunder shall preclude any other or further exercise thereof.

No provision of this Agreement is intended to, or shall be construed to, create any third party beneficiary or to provide any rights to any person or entity not a party to this Agreement, including but not limited to any citizen or employees of the COUNTY and/or AGENCY.

ARTICLE 17 HIRING OF MECHANICS OR LABORERS

For those solicitations and contracts including the employment of mechanics or laborers, the Agreement must provide for compliance with 40 U.S.C § 3702, as supplemented by Department of Labor regulations (29 C.F.R. 5). Specifically, AGENCY shall be required to compute the wages of every mechanic and laborer based on a standard work week of 40 hours. Work in excess of the standard work week is permissible provided that the worker is compensated at a rate of not less than one and one half (1½) times the basic rate of pay for all hours worked in excess of 40 hours in the work week.

ARTICLE 18 OPIOID SETTLEMENT FUNDS FUNDED AGENCY'S PROGRAMMATIC REQUIREMENTS

AGENCY agrees to fully comply with all of the reporting requirements in **EXHIBIT E - COMMUNITY SERVICES DEPARTMENT INCIDENT REPORTING FORM** and the Agency's Programmatic Requirements contained in **EXHIBIT G**, attached hereto and incorporated herein by reference.

ARTICLE 19 ACCESS AND AUDITS

The AGENCY shall maintain adequate records to justify all charges, expenses, and costs incurred in estimating and performing the work for at least five (5) years after completion or termination of this Agreement. The COUNTY shall have access to such books, records, and documents at the AGENCY'S place of business during normal business hours, as required in this Article for the purpose of inspection or audit.

AGENCY shall establish policies and procedures and provide a statement confirming that the accounting system or systems established by the AGENCY has appropriate internal controls, checking the accuracy and reliability of accounting data, and promoting operating efficiency.

AGENCY will provide a final close-out report and **EXHIBIT C - FINANCIAL RECONCILIATION STATEMENT**, accounting for all funds expended hereunder, no later than 30 days from the Agreement end date.

The AGENCY shall submit quarterly the **EXHIBIT D - CASH FLOW COMMITMENT STATEMENT** along with the following statements:

- ♦ Statement of Cash Flows
- ♦ Statement of Activities
- ♦ Statement of Financial Position

Palm Beach County has established the Office of the Inspector General in Palm Beach County Code 2-421 through 2-440, as may be amended, that is authorized and empowered to review past, present and proposed COUNTY contracts, transactions, accounts and records. The Inspector General has the power to subpoena witnesses, administer oaths, require the production of records, and audit, investigate, monitor, and inspect the activities of the AGENCY, its officers, agents, employees, and lobbyists in order to ensure compliance with Agreement requirements and detect corruption and fraud.

Failure to cooperate with the Inspector General or interference or impeding any investigation shall be in violation of Palm Beach County Code 2-421 through 2-440, and punished pursuant to section 125.69, Florida Statutes, in the same manner as a second degree misdemeanor.

The AGENCY shall have all audits completed by an Independent Certified Public Accountant (IPA), who shall either be a Certified Public Accountant or a Public Accountant licensed under Chapter 473, Florida Statutes. The IPA shall state that the audit complied with the applicable accounting principles.

- A. The annual financial audit report shall include all management letters and the AGENCY'S response to all findings, including corrective actions to be taken.
- B. The annual financial audit report shall include a schedule of financial assistance specifically identifying all contracts, agreements and grant revenue by sponsoring agency and contract/agreement grant number if required by the Single Audit Act.
- C. The audit is due within nine (9) months after the end of the AGENCY'S fiscal year.
- D. AGENCY is required to provide COUNTY with a copy of all grant audits and monitoring reports by other funding entities.

- E. AGENCY shall establish policies and procedures and provide a statement, noting that the accounting system or systems established by the AGENCY have appropriate internal controls verifying the accuracy and reliability of accounting data, and promoting operating efficiency.
- F. Two bound originals (electronic or hard copy) of the audit is due within 30 days after receipt of the financial audit report by the Independent Certified Public Accountant or a Public Accountant licensed under Chapter 473, Florida Statutes, or nine (9) months after the close of the fiscal year. The complete financial audit report, including all items specified herein, shall be sent directly to:

Fiscal Manager
Palm Beach County Community Services Department
810 Datura Street
West Palm Beach, Florida 33401

Electronic submission via email is acceptable. Please submit audit reports to the Fiscal Manager and Financial Analyst at teaton@pbcgov.org.

ARTICLE 20 CONFLICT OF INTEREST

The AGENCY represents that it presently has no interest and shall acquire no interest, either direct or indirect, which would conflict in any manner with the performance of services required hereunder, as provided for in Chapter 112, Part III, Florida Statutes and Palm Beach County Code of Ethics. The AGENCY further represents that no person having any such conflict of interest shall be employed for said performance of services.

The AGENCY shall promptly notify the COUNTY'S representative, in writing, by certified mail, of all potential conflicts of interest of any prospective business association, interest or other circumstance that may influence or appear to influence the AGENCY'S judgment or quality of services being provided hereunder. Such written notification shall identify the prospective business association, interest or circumstance, and the nature of work that the AGENCY may undertake, and shall request an opinion of the COUNTY as to whether the association, interest or circumstance would, in the opinion of the COUNTY, constitute a conflict of interest if entered into by the AGENCY. The COUNTY agrees to notify the AGENCY of its opinion by certified mail within thirty (30) days of receipt of notification by the AGENCY. If, in the opinion of the COUNTY, the prospective business association, interest or circumstance would not constitute a conflict of interest by the AGENCY, the COUNTY shall so state in the notification and the AGENCY shall, at its option, enter into said association, interest or circumstance and it shall be deemed not in conflict of interest with respect to services provided to the COUNTY by the AGENCY under the terms of this Agreement.

ARTICLE 21 DRUG-FREE WORKPLACE

The AGENCY shall implement and maintain a drug-free workplace program of at least the following items:

- A. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
- B. Inform employees about the dangers of drug abuse in the workplace, the AGENCY'S policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.

- C. Give each employee engaged in providing the services that are under Agreement a copy of the statement specified in Item Number 1 above.
- D. In the statement specified in Item Number 1 above, notify the employees that, as a condition of providing the services that are under Agreement, the employee will abide by the terms of the statement and will notify the AGENCY of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 893, Florida Statutes, or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction or plea.
- E. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, for any employee who is so convicted or so pleads.
- F. Make a good faith effort to continue to maintain a drug-free workplace through implementation of section 287.087, Florida Statutes.

ARTICLE 22 AMERICANS WITH DISABILITIES ACT (ADA)

The AGENCY shall meet all the requirements of the Americans With Disabilities Act (ADA), which shall include, but not be limited to, posting a notice informing service recipients and employees that they can file any complaints of ADA violations directly with the Equal Employment Opportunity Commission (EEOC), One Northeast First Street, Sixth Floor, Miami, Florida 33132.

ARTICLE 23 INDEPENDENT CONTRACTOR RELATIONSHIP

The AGENCY is, and shall be, in the performance of all work services and activities, under this Agreement, an Independent Contractor, and not an employee, agent, or servant of the COUNTY. All persons engaged in any of the work or services performed pursuant to this Agreement shall at all times, and in all places, be subject to the AGENCY'S sole direction, supervision, and control. The AGENCY shall exercise control over the means and manner in which it and its employees perform the work, and in all respects the AGENCY'S relationship and the relationship of its employees to the COUNTY shall be that of an Independent Contractor and not as employees or agents of the COUNTY.

The AGENCY does not have the power or authority to bind the COUNTY in any promise, contract or representation other than specifically provided for in this Agreement.

ARTICLE 24 CONTINGENT FEES

The AGENCY warrants that it has not employed or retained any company or person, other than a bona fide employee working solely for the AGENCY to solicit or secure this Agreement and that it has not paid or agreed to pay any person, company, corporation, individual, or firm, other than a bona fide employee working solely for the AGENCY, any fee, commission, percentage, gift, or any other consideration contingent upon or resulting from the award or making of this Agreement.

ARTICLE 25 PUBLIC ENTITY CRIMES

As provided in sections 287.132-133, Florida Statutes, by entering into this Agreement or performing any work in furtherance hereof, the AGENCY certifies that it, its affiliates, suppliers, and subcontractors who will perform hereunder, have not been placed on the convicted vendor list maintained by the State of Florida Department of Management Services within the 36 months immediately preceding the date hereof. This notice is required by section 287.133(3)(a), Florida Statutes.

ARTICLE 26 EXCUSABLE DELAYS

The AGENCY shall not be considered in default by reason of any failure in performance if such failure arises out of causes reasonably beyond the control of the AGENCY or its subcontractors and without their fault or negligence. Such causes include, but are not limited to: acts of God; natural or public health emergencies; labor disputes; freight embargoes; and abnormally severe and unusual weather conditions.

Upon the AGENCY'S request, the COUNTY shall consider the facts and extent of any failure to perform the work and, if the AGENCY'S failure to perform was without it or its subcontractors fault or negligence, the Agreement Schedule and/or any other affected provision of this Agreement shall be revised accordingly; subject to the COUNTY'S rights to change, terminate, or stop any or all of the work at any time.

ARTICLE 27 ARREARS

The AGENCY shall not pledge the COUNTY'S credit or make it a guarantor of payment or surety for any contract, debt, obligation, judgment, lien, or any form of indebtedness. The AGENCY further warrants and represents that it has no obligation or indebtedness that would impair its ability to fulfill the terms of this Agreement.

ARTICLE 28 DISCLOSURE AND OWNERSHIP OF DOCUMENTS

The AGENCY shall deliver to the COUNTY'S representative for approval and acceptance, and before being eligible for final payment of any amounts due, all documents and materials prepared by and for the COUNTY under this Agreement.

The AGENCY agrees that copies of any and all property, work product, documentation, reports, computer systems and software, schedules, graphs, outlines, books, manuals, logs, files, deliverables, photographs, videos, tape recordings or data relating to the Agreement that have been created as a part of the AGENCY'S services or authorized by the COUNTY as a reimbursable expense, whether generated directly by the AGENCY, or by or in conjunction or consultation with any other party whether or not a party to the Agreement, whether or not in privity of Agreement with the COUNTY or the AGENCY, and wherever located shall be the property of the COUNTY.

To the extent allowed by Chapter 119, Florida Statutes, all written and oral information not in the public domain or not previously known, and all information and data obtained, developed, or supplied by the COUNTY or at its expense will be kept confidential by the AGENCY and will not be disclosed to any other party, directly or indirectly, without the COUNTY'S prior written consent unless required by a lawful court order. All drawings, maps, sketches, programs, data base, reports and other data developed, or purchased, under this Agreement for or at the COUNTY'S expense shall be and remain the COUNTY'S property and may be reproduced and reused at the discretion of the COUNTY.

All covenants, agreements, representations and warranties made herein, or otherwise made in writing by any party pursuant hereto, including but not limited to any representations made herein relating to disclosure or ownership of documents, shall survive the execution and delivery of this Agreement and the consummation of the transactions contemplated hereby.

Notwithstanding any other provision in this Agreement, all documents, records, reports and any other materials produced hereunder shall be subject to disclosure, inspection and audit, pursuant to the Palm Beach County Office of the Inspector General Palm Beach County Code 2-421 through 2- 440, as may be amended.

ARTICLE 29 TERMINATION

This Agreement may be terminated by the AGENCY upon sixty (60) days' prior written notice to the COUNTY in the

event of substantial failure by the COUNTY to perform in accordance with the terms of this Agreement through no fault of the AGENCY. It may also be terminated, in whole or in part, by the COUNTY, with cause upon five (5) business days' written notice to the AGENCY or without cause upon ten (10) business days' written notice to the AGENCY. Unless the AGENCY is in breach of this Agreement, the AGENCY shall be paid for services rendered to the COUNTY'S satisfaction through the date of termination. After receipt of a Termination Notice, except as otherwise directed by the COUNTY, in writing, the AGENCY shall: Stop work on the date and to the extent specified.

- ♦ Terminate and settle all orders and subcontracts relating to the performance of the terminated work.
- ♦ Transfer all work in process, completed work, and other materials related to the terminated work to the COUNTY.
- ♦ Continue and complete all parts of the work that have not been terminated.

In the event the COUNTY does not receive Opioid Settlement Funding from the State of Florida pursuant to **EXHIBIT K**, this Agreement shall be immediately terminated effective on the date COUNTY is notified that such funding will not continue.

ARTICLE 30 SEVERABILITY

If any term or provision of this Agreement, or the application thereof to any person or circumstances shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, or the application of such terms or provision, to persons or circumstances other than those as to which it is held invalid or unenforceable, shall not be affected, and every other term and provision of this Agreement shall be deemed valid and enforceable to the extent permitted by law.

ARTICLE 31 MODIFICATION OF WORK

The COUNTY reserves the right to make changes in scope of work, including alterations, reductions therein or additions thereto. Upon receipt by the AGENCY of the COUNTY'S notification of a contemplated change, the AGENCY shall, in writing: (1) provide a detailed estimate for the increase or decrease in cost due to the contemplated change, (2) notify the COUNTY of any estimated change in the completion date, and (3) advise the COUNTY if the contemplated change shall affect the AGENCY'S ability to meet the completion dates or schedules of this Agreement.

If the COUNTY so instructs in writing, the AGENCY shall suspend work on that portion of the scope of work affected by a contemplated change, pending the COUNTY'S decision to proceed with the change.

If the COUNTY elects to make the change, the COUNTY shall initiate an Amendment to the Agreement and the AGENCY shall not commence work on any such change until such written Amendment is signed by the AGENCY and approved and executed on behalf of the COUNTY.

ARTICLE 32 NOTICES

All notices required in this Agreement shall be sent by certified mail - return receipt requested, hand delivery, or other delivery service requiring signed acceptance. If sent to the COUNTY, notices shall be addressed to:

Director, Behavioral Health / Substance Abuse Disorder Palm Beach
County Community Services Department
810 Datura Street
West Palm Beach, FL 33401

and if sent to the AGENCY, shall be mailed to: Michael Wright,

MGR

Michael Wright Consulting Services 810

Datura Street

WPB, FL 33401

ARTICLE 33 STANDARDS OF CONDUCT FOR EMPLOYEES

The AGENCY must establish safeguards to prevent employees, consultants, or members of governing bodies from using their positions for purposes that are, or give the appearance of being, motivated by a desire for private financial gain for themselves or others such as those with whom they have family, business, or other ties. Therefore, each institution receiving financial support must have written policy guidelines on conflict of interest and the avoidance thereof. These guidelines should reflect State and local laws and must cover financial interests, gifts, gratuities and favors, nepotism, and other areas such as political participation and bribery. These rules must also indicate the conditions under which outside activities, relationships, or financial interest are proper or improper, and provide for notification of these kinds of activities, relationships, or financial interests to a responsible and objective institution official. For the requirements of code of conduct applicable to procurement under grants, see the procurement standards prescribed by 2 C.F.R. 200.317-327 - Procurement Standards.

The rules of conduct must contain a provision for prompt notification of violations to a responsible and objective AGENCY official and must specify the type of administrative action that may be taken against an individual for violations. Administrative actions, which would be in addition to any legal penalty(ies), may include oral admonishment, written reprimand, reassignment, demotion, suspension, or separation. Suspension or separation of a key official must be reported promptly to the COUNTY.

The AGENCY shall provide a copy of the rules of conduct to each officer, employee, board member, and subagency that is working on the grant supported project or activity and the rules must be enforced to the extent permissible under State and local law or to the extent to which the COUNTY determines it has legal and practical enforcement capacity.

The rules need not be formally submitted to and approved by the COUNTY; however, they must be made available for review upon request, for example, during a site visit.

ARTICLE 34 SCRUTINIZED COMPANIES

As provided in section 287.135, Florida Statutes, by entering into this Agreement or performing any work in furtherance hereof, the AGENCY certifies that it, its affiliates, suppliers, subcontractors and consultants who will perform hereunder, have not been placed on the Scrutinized Companies that boycott Israel List, or is engaged in a boycott of Israel, pursuant to section 215.4725, Florida Statutes. Pursuant to section 287.135(3)(b), Florida Statutes, if AGENCY is found to have been placed on the Scrutinized Companies that Boycott Israel List or is engaged in a boycott of Israel, this Agreement may be terminated at the option of the COUNTY.

A. When contract value is greater than \$1 million: As provided in section 287.135, Florida Statutes, by entering into this Agreement or performing any work in furtherance hereof, the AGENCY certifies that it, its affiliates, suppliers, and subagencies who will perform hereunder, have not been placed on the Scrutinized Companies With Activities in Sudan List

or Scrutinized Companies With Activities in The Iran Terrorism Sectors List created pursuant to section 215.473, Florida Statutes or is engaged in business operations in Cuba or Syria. Pursuant to section 287.135(3)(a), Florida Statutes, as may be amended, if AGENCY is found to have been placed on the Scrutinized Companies with Activities in Sudan List, or been engaged in business operations in Cuba or Syria, or has been placed on a list created pursuant to section 215.473, Florida Statutes, relating to scrutinized active business operations in Iran, this Agreement may be terminated at the option of the COUNTY.

If the COUNTY determines, using credible information available to the public, that a false certification has been submitted by AGENCY, this Agreement may be terminated and a civil penalty equal to the greater of \$2 million or twice the amount of this Agreement shall be imposed, pursuant to section 287.135, Florida Statutes. Said certification must also be submitted at the time of Agreement renewal, if applicable.

ARTICLE 35 PUBLIC RECORDS

Notwithstanding anything contained herein, as provided under section 119.0701, Florida Statutes, if the AGENCY: (i) provides a service; and (ii) acts on behalf of the COUNTY as provided under section 119.011(2) Florida Statutes, the AGENCY shall comply with the requirements of section 119.0701, Florida Statutes, as it may be amended from time to time. The AGENCY is specifically required to:

- A. Keep and maintain public records required by the COUNTY to perform services as provided under this Agreement.
- B. Upon request from the COUNTY'S Custodian of Public Records, provide the COUNTY with a copy of the requested records or allow the records to be inspected or copied within a reasonable time at a cost that does not exceed the cost provided in Chapter 119 or as otherwise provided by law. The AGENCY further agrees that all fees, charges and expenses shall be determined in accordance with Palm Beach County PPM CW-F-002, Fees Associated with Public Records Requests, as it may be amended or replaced from time to time.
- C. Ensure that public records that are exempt, or confidential and exempt from public records disclosure requirements are not disclosed except as authorized by law for the duration of the Agreement term and following completion of the Agreement, if the AGENCY does not transfer the records to the public agency.
- D. Upon completion of the Agreement, the AGENCY shall transfer, at no cost to the COUNTY, all public records in possession of the AGENCY unless notified by COUNTY'S representative/liaison, on behalf of the COUNTY'S Custodian of Public Records, to keep and maintain public records required by the COUNTY to perform the service. If the AGENCY transfers all public records to the COUNTY upon completion of the Agreement, the AGENCY shall destroy any duplicate public records that are exempt, or confidential and exempt from public records disclosure requirements. If the AGENCY keeps and maintains public records upon completion of the Agreement, the AGENCY shall meet all applicable requirements for retaining public records. All records stored electronically by the AGENCY must be provided to COUNTY, upon request of the COUNTY'S Custodian of Public Records, in a format that is compatible with the information technology systems of COUNTY, at no cost to COUNTY.

Failure of the AGENCY to comply with the requirements of this Article shall be a material breach of this Agreement. COUNTY shall have the right to exercise any and all remedies available to it, including but not limited to, the right to terminate for cause. AGENCY acknowledges that it has familiarized itself with the requirements of Chapter 119, Florida Statutes, and other requirements of state law applicable to public records not specifically set forth herein.

IF THE AGENCY HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO THE AGENCY’S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS AGREEMENT, PLEASE CONTACT THE CUSTODIAN OF PUBLIC RECORDS AT RECORDS REQUEST, PALM BEACH COUNTY PUBLIC AFFAIRS DEPARTMENT, 301 N. OLIVE AVENUE, WEST PALM BEACH, FL 33401, BY E-MAIL AT RECORDSREQUEST@PBCGOV.ORG OR BY TELEPHONE AT 561- 355-6680.

ARTICLE 36 CRIMINAL HISTORY RECORDS CHECK

The AGENCY, AGENCY’S employees, subcontractors of AGENCY and employees of subcontractors shall comply with Palm Beach County Code, Section 2-371 - 2-377, the Palm Beach County Criminal History Records Check Ordinance (Ordinance), for unescorted access to critical facilities (Critical Facilities) or criminal justice information facilities (CJI Facilities) as identified in Resolutions R2013- 1470, R2015-0572, and R2024-0549 as may be amended. The AGENCY is solely responsible for the financial, schedule, and/or staffing implications of this Ordinance. Further, the AGENCY acknowledges that its Agreement price includes any and all direct or indirect costs associated with compliance with this Ordinance, except for the applicable FDLE/FBI fees that shall be paid by the COUNTY.

This Agreement may include sites and/or buildings that have been designated as either Critical Facilities or CJI Facilities pursuant to the Ordinance and above-mentioned Resolutions, as amended. COUNTY staff representing the DEPARTMENT will contact the AGENCY and provide specific instructions for meeting the requirements of this Ordinance. Individuals passing the background check will be issued a badge. The AGENCY shall make every effort to collect the badges of its employees and its subcontractors’ employees upon conclusion of the Agreement and return them to the COUNTY. If the AGENCY or its subcontractor(s) terminates an employee who has been issued a badge, the AGENCY must notify the COUNTY within two (2) hours. At the time of termination, the AGENCY shall retrieve the badge and shall return it to the COUNTY in a timely manner.

The COUNTY reserves the right to suspend the AGENCY if the AGENCY 1) does not comply with the requirements of COUNTY Code Section 2-371 - 2-377, as amended; 2) does not contact the COUNTY regarding a terminated AGENCY employee or subcontractor employee within the stated time; or 3) fails to make a good faith effort in attempting to comply with the badge retrieval policy.

ARTICLE 37 DIGITAL ACCESSIBILITY COMPLIANCE

AGENCY acknowledges that the COUNTY is a public entity subject to Title II of the Americans with Disabilities Act (ADA) and applicable federal accessibility regulations. AGENCY represents and warrants that all websites, web-based applications, digital services, electronic documents, multimedia, and other electronic content created, developed, provided, submitted, maintained, or delivered under this Contract that may be electronically displayed, accessed, distributed, or made available to the public by the COUNTY shall conform to the Web Content Accessibility Guidelines (WCAG) 2.1, Level AA, or any successor standard adopted by the U.S. Department of Justice.

All electronic documents submitted to the COUNTY, including but not limited to PDFs, reports, forms, presentations, and public-facing materials, shall be provided in an accessible format compliant with the applicable accessibility standard at the time of delivery. AGENCY shall ensure that any updates, revisions, or modifications to such digital content remain compliant throughout the term of this Agreement. Upon request, AGENCY shall provide documentation reasonably demonstrating accessibility compliance. If any deliverable is determined by the COUNTY to be noncompliant, AGENCY shall promptly remediate the noncompliance at no additional cost to the COUNTY and within a timeframe

specified by the COUNTY. AGENCY shall ensure that any third-party digital content or platforms used in performance of this Agreement either comply with the requirements herein or that an accessible alternative acceptable to the COUNTY is provided.

The Parties further acknowledge that the compliance date associated with the applicable regulations has been extended from April 24, 2026, to April 26, 2027. Accordingly, unless otherwise required by applicable law, neither Party shall be obligated to comply with such regulations prior to April 26, 2027. In the event the compliance date is further extended, modified, suspended, or otherwise altered by any governmental or regulatory authority, the Parties agree that their respective obligations under this Agreement shall automatically conform to such revised compliance date or requirement, without the necessity of further amendment to this Agreement.

Failure to comply with this subsection shall constitute a material breach of this Agreement.

ARTICLE 38 PALM BEACH COUNTY OFFICE OF INSPECTOR GENERAL

The COUNTY has established the Office of the Inspector General in Palm Beach County Code 2-421 through 2-440, as may be amended, which is authorized and empowered to review past, present and proposed COUNTY contracts, transactions, accounts and records. The Inspector General has the power to subpoena witnesses, administer oaths and require the production of records, and audit, investigate, monitor, and inspect the activities of the AGENCY, its officers, agents, employees, and lobbyists in order to ensure compliance with Agreement requirements and detect corruption and fraud.

Failure to cooperate with the Inspector General or interference or impeding any investigation shall be in violation of Palm Beach County Code Section 2-421 through 2-440, and punished pursuant to section 125.69, Florida Statutes, in the same manner as a second-degree misdemeanor.

ARTICLE 39 AUTHORITY TO PRACTICE

The AGENCY hereby represents and warrants that it has and will continue to maintain all licenses and approvals required to conduct its business, and that it will at all times conduct its business activities in a reputable manner. Proof of such licenses and approvals shall be submitted to the COUNTY'S representative upon request.

ARTICLE 40 DISCRIMINATORY VENDOR LIST

An entity or affiliate who has been placed on the Discriminatory Vendor List may not: contract to provide goods or services to a public entity; contract with a public entity for the construction or repair of a public building or public work; lease real property to a public entity; award or perform work as a vendor, supplier, subcontractor, or agency under contract with any public entity; nor transact business with any public entity. The Florida Department of Management Services is responsible for maintaining the Discriminatory Vendor List and intends to post the list on its website. Questions regarding the Discriminatory Vendor List may be directed to the Florida Department of Management Services, Office of Supplier Diversity at (850) 487-0915.

ARTICLE 41 FEDERAL AND STATE TAX

The COUNTY is exempt from payment of Florida State Sales and Use Taxes. The COUNTY will sign an exemption

certificate submitted by the AGENCY. The AGENCY shall not be exempted from paying sales tax to its suppliers for materials used to fulfill contractual obligations with the COUNTY, nor is the AGENCY authorized to use the COUNTY'S Tax Exemption Number in securing such materials.

The AGENCY shall be responsible for payment of its own and its share of its employees' payroll, payroll taxes and benefits with respect to this Agreement.

ARTICLE 42 FACILITIES / OFFICE SPACE

The COUNTY shall grant the AGENCY the right, revocable license and privilege of accessing and using room(s) (the Premises), contingent on availability, at the following COUNTY locations:

810 Datura Street
West Palm Beach, FL 33401

6415 Indiantown Road
Jupiter, FL 33450

1440 Martin Luther King Boulevard Riviera
Beach, FL 33404

1699 Wingfield Street Lake
Worth, FL 33460

38754 State Road #80, Room #216 Belle
Glade, FL 33430

The room shall be used solely and exclusively for general office purposes and meeting AGENCY obligations under the terms of this Agreement. Additional provisions on the license, use and restrictions regarding the Premises are detailed in **EXHIBIT F - USE OF AND RESTRICTIONS REGARDING THE PREMISES**, which is attached hereto and incorporated herein.

ARTICLE 43 BYRD ANTI-LOBBYING AND DEBARMENT AND SUSPENSION

A completed **EXHIBIT I - CERTIFICATION REGARDING LOBBYING, BYRD ANTI-LOBBYING AMENDMENT** and **EXHIBIT J - CERTIFICATION REGARDING DEBARMENT AND SUSPENSION** are required at time of Agreement execution. Upon request, the AGENCY agrees to provide the COUNTY with subsequent certification(s) for it and/or its suppliers, subrecipients and subagencies after Agreement award.

This Agreement is a covered transaction for purposes of 2 C.F.R. 180 and 2 C.F.R. 3000. As such the AGENCY is required to verify that none of the AGENCY, its principals (defined at 2 C.F.R. 180.995), or its affiliates (defined at 2 C.F.R. 180.905) are excluded (defined at 2 C.F.R. 180.935).

The AGENCY must comply with 2 C.F.R. 180, subpart C and 2 C.F.R. 3000, subpart C while this Agreement is valid and throughout the period of any contract that may arise from this Agreement, and must include a requirement to comply with these regulations in any lower tier covered transaction it enters into.

This certification is a material representation of fact relied upon by the COUNTY. If it is later determined that the AGENCY did not comply with 2 C.F.R. 180, subpart C and 2 C.F.R. 3000, subpart C, in addition to remedies available to the Federal Government serving as Grantor and COUNTY as Recipient, the Federal Government may pursue available remedies, including but not limited to suspension and/or debarment.

The AGENCY must comply with the requirements of 2 C.F.R. 3000, subpart C while this offer is valid and throughout the period of any contract that may arise from this offer. The AGENCY further agrees to include a provision requiring such compliance in its lower tier covered transactions.

ARTICLE 44 FEDERAL SYSTEM FOR AWARD MANAGEMENT

A contract award shall not be made to parties listed on the government-wide exclusions set forth in the System for Award Management (SAM) found at www.sam.gov, which contains the names of parties debarred, suspended, or otherwise excluded by agencies, as well as parties declared ineligible under statutory or regulatory authority.

ARTICLE 45 SUBAWARD DATA AND FEDERAL CERTIFICATIONS AND ASSURANCES

AGENCY must complete and comply with the Federal Certifications and Assurances contained in the following Exhibits, which are attached hereto and incorporated herein by reference:

- a. **EXHIBIT I** - Certification Regarding Lobbying, Byrd Anti-Lobbying Amendment
- b. **EXHIBIT J** - Certification Debarment and Suspension

ARTICLE 46 CLEAN AIR ACT AND THE FEDERAL WATER POLLUTION CONTROL ACT

AGENCY agrees to comply with all applicable standards, orders or regulations issued pursuant to 42 U.S.C. § 7401 et seq. - Clean Air Act, as amended, and 33 U.S.C. § 1251 et seq. - Federal Water Pollution Control Act, as amended.

The AGENCY agrees to report each violation to the COUNTY, and understands and agrees that the COUNTY will, in turn, report each violation, as required by the federal awarding agency and the appropriate Environmental Protection Agency Regional Office.

The AGENCY agrees to include these requirements in each subcontract exceeding \$100,000 financed in whole or in part with Federal assistance money.

ARTICLE 47 SCIENTIFIC RESEARCH AND DEVELOPMENT AND COPYRIGHT AND PATENT RIGHTS

Those solicitations or contracts providing federal funds in support of scientific research and development must comply with the requirements of 37 C.F.R. 401 - Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements, and any implementing regulations issued by the awarding agency.

COUNTY shall be the exclusive owner of any patent rights arising as a result of any discovery or invention that arises or is developed in the course of or under this Agreement. The COUNTY shall hold the copyright to works produced or purchased under this Agreement. FEMA and the Federal Government hold a royalty-free, non-exclusive and irrevocable license to produce, publish, or to otherwise authorize others to use, for Federal Government purposes, copyrighted material that was developed under a Federal award or purchased under a Federal award.

ARTICLE 48 MANDATORY STANDARDS AND POLICIES RELATING TO ENERGY EFFICIENCY

AGENCY is required to comply with mandatory standards and policies related to energy efficiency that are contained in the State energy conservation plan issued in accordance with the 42 U.S.C. 6201 - Energy Policy and Conservation Act (Pub. L. 94-163, 89 Stat. 871).

ARTICLE 49 PROCUREMENT OF RECOVERED MATERIALS

AGENCY is to provide COUNTY with those goods designated by the Environmental Protection Agency (EPA), at 40 C.F.R. 247.1 et seq., that contain the highest percentage of recovered materials practicable while maintaining a satisfactory level of competition for goods valued above \$10,000 or where the value of the goods procured during the preceding fiscal year exceeded \$10,000. Categories of goods with the highest percentage of recovered materials include construction products; landscaping products; miscellaneous products; non-paper office products; paper and paper products; park and recreation products; transportation products; and vehicular products.

ARTICLE 50 PROGRAM FRAUD AND FALSE OR FRAUDULENT OR RELATED ACTS

AGENCY acknowledges that 31 U.S.C. Chapter 38 - Administrative Remedies for False Claims and Statements applies to the AGENCY'S actions pertaining to this Agreement.

ARTICLE 51 FEDERAL CRIMINAL LAW/FALSE STATEMENTS ACT

AGENCY acknowledges that it must comply with 31 U.S.C. § 3729 - The False Statement Act, which sets forth liability for, among other things, any person who knowingly submits a false claim to the Federal Government or causes another to submit a false claim to the government or knowingly makes a false record or statement to get a false claim paid by the government. For example, a false claim could include false billing documentation submitted by the COUNTY received from an agency or subcontractor under the Agreement.

ARTICLE 52 REGULATIONS

The AGENCY shall comply with all federal, state and local laws, ordinances and regulations applicable to the services contemplated herein, to include those applicable to conflict of interest and collusion. The AGENCY is presumed to be familiar with all federal, state and local laws, ordinances, codes and regulations that may in any way affect the services offered, and any other applicable federal requirements now in effect or imposed in the future.

ARTICLE 53 E-VERIFY - EMPLOYMENT ELIGIBILITY

AGENCY warrants and represents that it is in compliance with section 448.095, Florida Statutes, as may be amended, and that it: (1) is registered with the E-Verify System at E-Verify.gov, and uses the E-Verify System to electronically verify the employment eligibility of all newly hired workers; and (2) has verified that all of AGENCY'S subcontractors performing the duties and obligations of this Agreement are registered with the E-Verify System, and use the E-Verify System to electronically verify the employment eligibility of all newly hired workers.

AGENCY shall obtain from each of its subcontractors an affidavit stating that the subcontractor does not employ, contract with, or subcontract with an Unauthorized Alien, as that term is defined in section 448.095(1)(k), Florida Statutes, as may be amended. AGENCY shall maintain a copy of any such affidavit from a subcontractor for, at a minimum, the duration of the subcontract and any extension thereof. This provision shall not supersede any provision of this Agreement that requires a longer retention period.

COUNTY shall terminate this Agreement if it has a good faith belief that AGENCY has knowingly violated section 448.09(1), Florida Statutes, as may be amended. If COUNTY has a good faith belief that AGENCY'S subcontractor has knowingly violated section 448.09(1), Florida Statutes, as may be amended, COUNTY shall notify AGENCY to terminate its contract with the subcontractor and AGENCY shall immediately terminate its Agreement with the subcontractor. If COUNTY terminates this Agreement pursuant to the above, AGENCY shall be barred from being awarded a future contract by COUNTY for a period of one (1) year from the date on which this Agreement was terminated. In the event of such contract termination, AGENCY shall also be liable for any additional costs incurred by COUNTY as a result of the termination.

ARTICLE 54 DISCLOSURE OF FOREIGN GIFTS AND CONTRACTS WITH FOREIGN COUNTRIES OF CONCERN

Pursuant to section 286.101, Florida Statutes, as may be amended, by entering into this Agreement or performing any work in furtherance thereof, the Agency certifies that it has disclosed any current or prior interest of, any contract with, or any grant or gift received from a foreign country of concern where such interest, contract, or grant or gift has a value of \$50,000 or more and such interest existed at any time or such contract or grant or gift was received or in force at any time during the previous five (5) years.

ARTICLE 55 HUMAN TRAFFICKING AFFIDAVIT

AGENCY warrants and represents that it does not use coercion for labor or services as defined in section 787.06, Florida Statutes. AGENCY has executed **EXHIBIT H**, Nongovernmental Entity Human Trafficking Affidavit, which is attached hereto and incorporated herein by reference.

ARTICLE 56 COUNTERPARTS

This Agreement, including the exhibits referenced herein, may be executed in one or more counterparts, all of which shall constitute collectively but one and the same Agreement. The COUNTY may execute the Agreement through electronic or manual means.

ARTICLE 57 ENTIRETY OF CONTRACTUAL AGREEMENT

The AGENCY agrees that the scope of work has been developed from the AGENCY'S funding application and that the COUNTY expects performance by the AGENCY in accordance with such application. In the event of a conflict between the application and this Agreement, this Agreement shall control.

The COUNTY and the AGENCY both further agree that this Agreement sets forth the entire Agreement between the parties, and that there are no promises or understandings other than those stated herein.

None of the provisions, terms and conditions contained in this Agreement may be added to, modified, superseded or otherwise altered, except by written instrument executed by the parties hereto.

REMAINDER OF PAGE INTENTIONALLY BLANK

IN WITNESS WHEREOF, the Board of County Commissioners of Palm Beach County, Florida has made and executed this CONTRACT on behalf of the COUNTY and AGENCY has hereunto set his/her hand the day and year above written.

ATTEST:

MICHAEL A. CARUSO
CLERK of the CIRCUIT COURT & COMPTROLLER

**PALM BEACH COUNTY BOARD OF
COUNTY COMMISSIONERS**

BY: _____
Deputy Clerk

BY: _____
Sara Baxter, Mayor

AGENCY:

BY:

Authorized Signature

AGENCY'S Signatory Name Typed

APPROVED AS TO FORM AND LEGAL SUFFICIENCY APPROVED AS TO TERMS AND CONDITIONS
Community Services Department

BY: _____
Assistant County Attorney

BY: _____
Department Director

**2026-2028 OSF AGENCY
SCOPE OF WORK AND SERVICES**

Agency Name:
Program Name:
Location:
Funding Priority:

Scope of Work

- E. Program Description:**
- F. Priority/Focus Population:** Will be defined as ...
 - i. **Eligibility Criteria:** Adult residents of Palm Beach County ages 18 and over with a substance use or co-occurring disorder.
 - ii. **Documentation of Eligibility:** All Individuals will be screened for eligibility. Supporting documentation of eligibility will be retained in each Participant's file.
- G. Individuals Served:** A minimum of # unduplicated Individuals.
- H. Service Delivery:**
 - i. AGENCY shall

2026 – 2028 OSF AGENCIES**UNITS OF SERVICE RATE AND DEFINITION****Agency Name:****Subcategory:** Tiny Homes Community-Based Transitional Housing**Program Name:**

Service	Unit Cost / Actual Cost	Total Contract Amount
Prefabricated Tiny Homes:		
Admin Costs (capped at 5%)		
Total Contract Amount		

Actual Cost/Unit Cost expenses shall mean expenses authorized by the COUNTY pursuant to this Agreement and reasonably incurred by AGENCY directly in connection with AGENCY'S performance of its duties and Scope of Work pursuant to this Agreement. AGENCY will sustain the program for the full Agreement period regardless of the rate of expenditure of above funds.

For actual cost reimbursement items, backup documentation must be submitted along with the invoice and signed cover letter that may include but is not limited to the following: program general ledger, copies of paid receipts, copies of checks, invoices, or any other applicable documents acceptable to the Palm Beach County Department of Community Services. Additional items may be requested as part of the invoice submission, or via desk and/or on-site monitoring on a periodic basis

FINANCIAL RECONCILIATION STATEMENT

As required by the provisions of the Agreement/Contract between Palm Beach County ("the County") and Agency Name ("Agency") **[Contract Number]** effective _____, 202_, for _____[describe subject of Agreement/Contract], attached is a final financial reconciliation of the funds provided by County.

As shown in the attached (mark applicable box):

☐ All funds provided by Palm Beach County were spent in accordance with the provisions of the Agreement/Contract; and total administrative expenses did not exceed five percent (5%)

OR

☐ There were under expenditures in the amount of \$_____, which pursuant to the Contract/Agreement, will be returned to Palm Beach County by _____ **[date]**; all other funds were spent in accordance with the provisions of the Agreement/Contract.

The undersigned states that he/she is the CFO or other individual dually authorized as stipulated in the contract to sign this type of document. The information attached is a true and accurate representation of the expenditure of Palm Beach County funds under the Agreement/Contract.

Signature

Date

Print Name

CASH FLOW COMMITMENT STATEMENT

As the authorized representative of the applicant agency, I hereby certify that our agency has adequate cash available (or access to a credit line) to cover up to three (3) months cash expenses.

AGENCY NAME

Authorized Representative

Date

Attachments:

- a. Statement of Cash flows
- b. Statement of Activities
- c. Statement of Financial Position



COMMUNITY SERVICES DEPARTMENT

Incident - Notification Form



Agency / Program: _____

Date Incident Occurred: _____

Person Completing Form: _____

Date of Report: _____

Email address (Optional): _____

Phone #: _____

Method of Communication: (Please check the appropriate box)

- ☐ Drop Off
☐ Standard Mail
☐ Secured Line
☐ Certified Mail
☐ Encrypted Email

Incidents Reported: (Please check the appropriate box)

➤ Timeline to notify County – Incidents related to Children should be notified between 2-4 hours.

- ☐ Client injury/accident requiring medical attention or hospitalization that could pose an Agency liability
☐ Allegation of neglect, physical, mental and sexual abuse of a client by an Agency staff
☐ Incidents that may portray the Agency in a negative manner (service delivery, safety and/or fiscal)

➤ Timeline to notify County – Incidents related to Adults should be notified between 4-8 hours.

- ☐ Client injury/ accident requiring medical attention or hospitalization that could pose an Agency liability
☐ Allegation of neglect, physical, mental and sexual abuse of a client by an Agency staff
☐ Incidents that may portray the Agency in a negative manner (service delivery, safety and/or fiscal)

➤ Timeline to notify County – within 14 business days.

- ☐ Resignation/Termination of CEO, President, or CFO
☐ Resignation/Termination of key funded staff
☐ Program funded staff vacancy over 90 days
☐ Loss of funding from another Funder that could impact services
☐ Temporary interruption of service delivery (i.e. natural and unnatural disasters)
☐ Other (Issues that impact service delivery to Program clients) Specify (_____)

Summary of incident: (Do not include the name of the client or staff involved in incident)

Will there be an investigation?

- ☐ Yes
☐ No
☐ N/A

Individual Completing Report: Print Name

Position / Title

Individual Completing Report: Signature

Date

USE OF AND RESTRICTIONS REGARDING THE PREMISES

1. **License for Premises:** In addition to the availability of the room in the buildings mentioned in **Facilities/Office Space** article of this Contract/Agreement and once requested and approved by the DEPARTMENT, the AGENCY shall have the non-exclusive license over, upon and across the Premises, together with the common areas to allow AGENCY access and use of the Premises. The AGENCY shall be entitled to use the Premises without charge. The COUNTY will provide the AGENCY with office furniture and equipment, including a desk, chairs, a file cabinet and a telephone. The AGENCY accepts the Premises in "as is" condition. The AGENCY shall establish procedures with regard to space utilization and permitted uses. Said procedures shall include, but not be limited to, coordination between the COUNTY and the AGENCY of said use. The AGENCY shall, at AGENCY'S sole cost and expense, comply with all regulations of federal, state, county, municipal and other applicable governmental authorities, now in force or which may hereafter be in force, pertaining to the AGENCY or its use of the Premises, and shall faithfully observe in the use of the Premises all municipal and county ordinances and state and federal statutes now in force or which may hereafter be in force.
2. **Additional Uses:** The AGENCY shall not use, permit or suffer the use of the Premises or any other part of the premises for any other business or purpose whatsoever, except as specifically set forth in this Contract/Agreement and this exhibit without the prior written approval of the Director of the COUNTY'S Department of Facilities Development & Operations.
3. **Improvements, Maintenance, Repairs and Utilities:** The COUNTY shall maintain, repair and keep the Premises in good condition and repair at COUNTY'S sole cost and expense; provided however, in the event the AGENCY damages the Premises, COUNTY shall complete the necessary repairs and the AGENCY shall reimburse COUNTY for all expenses incurred by COUNTY in doing so. Furthermore, COUNTY shall provide utilities and janitorial services to the Premises that are necessary for the Premises to be used for general office purposes. In no event shall COUNTY be liable for an interruption or failure in the supply of any utilities to the Premises. No improvements, alterations or additions to the Premises shall be performed by the AGENCY.
4. **Waste and Nuisance:** The AGENCY shall not commit or suffer to be committed any waste or nuisance or other act or thing which may result in damage or depreciation of value of the Premises or which may affect COUNTY'S fee interest in the Premises. The AGENCY shall not store or dispose of any contaminants including, but not limited to, hazardous or toxic substances, chemicals or other agents on the Premises.
5. **COUNTY'S Right to Enter:** COUNTY shall have the right to enter the Premises at any time necessary, without notice, to implement its responsibilities pursuant to this Contract/Agreement and for purposes of inspection of the Premises generally.
6. **Revocation of License:** Notwithstanding anything to the contrary contained in this Contract/Agreement, the rights to use COUNTY property granted to the AGENCY in this Contract/Agreement and this exhibit amount only to a license to use the Premises, which license is expressly revocable by COUNTY for any reason whatsoever upon notice to the AGENCY. Upon AGENCY'S receipt of notice from COUNTY of the revocation of the license granted hereby, the AGENCY shall vacate the Premises within thirty (30) days, whereupon the AGENCY'S rights of use pursuant to this Contract/Agreement and this exhibit shall terminate and COUNTY shall be relieved of all further obligations hereunder accruing subsequent to the date of such termination.
7. **Surrender of Premises:** Upon expiration or earlier termination of the AGENCY'S license

to use the Premises, the AGENCY, at its sole cost and expense, shall remove all of its personal property from the Premises and shall surrender the Premises to the COUNTY in at least the same condition the Premises were in as of the date of this Contract/Agreement, reasonable wear and tear excepted.

8. **Indemnity:** To the extent permitted by law, AGENCY shall indemnify, defend and save COUNTY, its agents, officers, and employees harmless from and against any and all claims, actions, damages, liability and expense, whether at trial or appellate level or otherwise, in connection with loss of life, personal injury and/or damage to or destruction of property arising from or out of the occupancy or use by AGENCY of the Premises or any part thereof; or any act, error or omission of AGENCY, its agents, contractors, employees, volunteers or invitees. In case COUNTY shall be made a party to any litigation commenced against AGENCY or by AGENCY against any third party, then AGENCY shall protect and hold COUNTY, its agents, officers, and employees harmless and pay all costs and attorney's fees incurred by COUNTY in connection with such litigation, whether at trial or appellate level or otherwise. This Section shall survive termination or expiration of this Contract/Agreement. Nothing herein shall be construed as a waiver of sovereign immunity or the statutory limits of liability set forth in section 768.28, Florida Statutes.

AGENCY'S PROGRAMMATIC REQUIREMENTS OPIOID SETTLEMENT FUND (OSF)

Failure to provide the information required by this Article in a timely fashion and in the format required, and to comply with the requirements of this Article will constitute a material breach of this Contract and may result in termination of this Contract.

The AGENCY agrees to specific programmatic requirements, including but not limited to, the following.

1. AGENCY shall maintain separate financial records for Opioid Settlement Fund (OSF) Contracts and account for all receipts and expenditures, including direct and indirect cost allocations in accordance with Generally Accepted Accounting Principles (GAAP), by individual service categories, and by administrative and program costs. OSF's cost allocations are to be completed and posted by service category, delineating program and administrative costs, to the general ledger on a monthly basis. The backup documentation, including copies of paid receipts, copies of checks, invoices, or any other applicable documents acceptable to the DEPARTMENT, will be requested as part of desk and/or on-site monitoring on a periodic basis. Allowable administrative expenses shall not exceed five percent (5%) of Opioid Settlement Contract funds and shall be included in the overall budget presented for approval. All administrative costs shall be maintained within individual service categories and shall be accounted for in the detailed general ledger. Monthly submissions are due by the twenty- fifth (25th) day of each month following the month in which services were delivered.
2. AGENCY will ensure that all expenditures shall be in accordance with all Federal, State, and local laws and **EXHIBIT J** (State of Florida Opioid Settlement Agreement).
3. The AGENCY shall submit quarterly **EXHIBIT D - CASH FLOW COMMITMENT STATEMENT**, along with the following financial statements:
 - a. Statement of Cash Flows
 - b. Statement of Activities
 - c. Statement of Financial Position
4. AGENCY shall be registered and have an Active Status with the Florida Department of State, have been incorporated for at least one AGENCY fiscal year, and have provided services for at least six months. If approved for funding, a formal contract shall be executed, and payment will be made by reimbursement of documented expenses and/or pursuant to **EXHIBIT B** or any amendments thereto.
5. AGENCY shall promptly reimburse the COUNTY for any funds that are misused, misspent, unspent, or are for any reason deemed to have been spent on ineligible expenses.
6. AGENCY shall maintain records in accordance with the Public Records Law, Chapter 119, Florida Statutes.
7. AGENCY shall promptly provide data for state and COUNTY mandatory OSF funding reporting requirements.

8. AGENCY shall ensure that no private or confidential data collected, maintained or used during the course of the Contract period or thereafter shall be disseminated, except as authorized by statute.
9. AGENCY shall allow COUNTY, through the DEPARTMENT, to both fiscally and programmatically monitor the AGENCY to assure that its fiscal, programmatic, and conduct, as outlined in **EXHIBIT A**, **EXHIBIT B**, and in this Article are adhered to. All contracted programs/services will be monitored at least yearly and possibly twice-yearly or more as warranted. The DEPARTMENT staff will utilize and review other Funder's licensing or accreditation monitoring results. A copy of all grant audits and monitoring reports by other funding entities are required to be provided to the COUNTY. Services will be monitored against administrative, operational and programmatic standards designed to measure program efficiency and effectiveness. The AGENCY shall maintain business and accounting records detailing the performance of the Contract. Authorized representatives or agents of the COUNTY and/or the DEPARTMENT shall have access to records upon reasonable notice for purposes of review, analysis, inspection and audit.
10. AGENCY shall be monitored by the information within the Contract, **EXHIBIT A**, **EXHIBIT B**, and current monitoring tool.
11. AGENCIES with findings during the monitoring phase shall complete a Partnership Agreement within 30 days outlining who is responsible for ensuring that a finding will be corrected, as well as how and when findings will be resolved.
12. Data Entry:

AGENCY shall provide the DEPARTMENT with participant-level data as requested. AGENCY shall attend data collection and reporting trainings as required by the DEPARTMENT. Data shall be entered for each program into the designated reporting system or, if approved by COUNTY, a spreadsheet that shall be provided monthly to demonstrate that participants are served. Data submitted shall clearly document all participant admissions and discharges under this Contract, as well as all programs, program participants, services, and strategies employed under this Contract, as applicable. Data entered in the designated website reporting system or spreadsheet shall be consistent with the data maintained in the AGENCY'S files. Data entered incorrectly shall be corrected within the timeframe designated by the DEPARTMENT upon discovery of error or notification of error, whichever occurs first. Failure to provide this information in a timely fashion and in the format required is a material breach of this Contract and a basis for termination of this Contract. AGENCY shall enter participant data into the designated data reporting system or spreadsheet within one (1) business day of a participant's activity in the program. Required data for collection shall include gender, veteran status, race-census categories, ethnicity- census categories, date of birth and age, and living arrangement at program entry and exit.

Final participant data entry shall be completed by October 15th of each year to ensure compliance with this Contract, as well as to determine AGENCY'S progress in attaining its outcomes as outlined in **EXHIBIT A**.
13. AGENCY agrees to not use or disclose protected health information, defined as individually identifiable health information (IIHI), other than permitted or required by this Contract or as required by law.

14. AGENCY must enter all programmatic data into the DEPARTMENT designated data entry system.
15. Required Data Systems for AGENCIES receiving COUNTY funds in the Behavioral Health Substance Use Disorder Category:

AGENCY agrees to partner in the DEPARTMENT's designated data entry system, to execute the necessary Partner and User Contracts, and to fully comply with the terms and conditions as set forth in the Partner and User Contracts, unless otherwise directed by the DEPARTMENT.

AGENCY shall complete required system training prior to entering data in the identified DEPARTMENT-designated data entry system.

The DEPARTMENT's - designated data entry system and any other data reporting system(s) designated by the COUNTY shall be the source for data collection and for all data used to determine compliance with programmatic contractual requirements. AGENCY shall submit quarterly programmatic outcomes and fiscal utilization reports using the templates provided by the DEPARTMENT. The templates for these reports can be found on the FAA website, located at [Community Services - Financially Assisted Agencies FAA Agreement Resources](#). Quarterly programmatic outcome and utilization reports shall be submitted to the Office of Behavioral Health Substance Use Disorder Grant Compliance Specialist staff directly by no later than 15 days following the end of each quarter (October 15, January 15, April 15, July 15).

16. If AGENCY provides care coordination services, AGENCY shall provide documentation of executed Memorandum of Understanding (MOU) with other behavioral health providers that are required to meet the needs of families within multiple regions across the COUNTY.
17. AGENCY shall comply with applicable county, state and federal certification and/or licensure requirements relevant to services delivered within the service categories.

AGENCY shall adhere to behavioral health and substance use disorders provider service requirements, and maintain good standing with the State of Florida, Department of Children and Families (DCF) licensing requirements for the appropriate level of substance use treatment services, as applicable, for services AGENCY is providing under this Contract.

18. AGENCY shall ensure that subrecipients, if any, adhere to the same licensure standards as if they were a recipient of funding directly.
19. OSF Service Category Requirements for AGENCIES receiving COUNTY-approved opioid settlement funds include but are not limited to:
20. AGENCY shall have clearly written eligibility criteria and processes that include the following:
 - a. Participants must be a resident of Palm Beach County.
 - b. Specific programmatic eligibility requirements as stated in **EXHIBIT A**.
 - c. AGENCY'S applicable policies and procedures and shall be in alignment with

Participant eligibility as described in **EXHIBIT A**.

- d. AGENCY shall access federal, state and entitlement funding when available to ensure the most efficient use of COUNTY funds.
 - e. Services shall take place in Palm Beach County.
21. AGENCY shall adhere to the following guiding principles for all substance use and/or co- occurring disorder services:
- a. AGENCY utilize the designated Resiliency/Recovery Capital Indexing tool (RCI), which shall be administered to young adult and adult populations experiencing substance use and/or co-occurring disorders. In addition, the RCI shall be used once a Participant is stable enough to obtain a valid and reliable baseline score and re-administered every thirty (30) days thereafter.
 - b. AGENCY is required to administer Satisfaction Surveys during program engagement and at program end date. Survey results shall be reported on a rolling quarterly basis concurrent with required quarterly reporting due dates, based on the State fiscal year (October 15, January 15, April 15, July 15).
 - c. AGENCY shall:
 - Employ a person-centered, recovery-oriented delivery of services.
 - Incorporate strength-based individualized planning and use of data to determine effectiveness of services and participant perception of services.
 - Ensure individualized services are based on Participant’s needs and expressed priorities and goals.
 - Ensure Participant voice and choice are considered and that services are provided in partnership with participants.
 - Incorporate a holistic approach, inclusive of assessments of individualized needs.
 - Ensure services are provided in a trauma-informed manner and that Participants are provided a “no wrong-door” approach and appropriate warm hand-offs.
 - Ensure consistent implementation and integration into care planning and services utilizing the RCI for young adults and adults with substance use disorder and/or co- occurring disorders.
 - Employ flexibility and data if services are not producing expected outcomes.
 - Use evidence-based, evidence informed and/or promising practices when delivering services.
 - Utilize data to ensure decisions are data-driven and that data are shared across common providers for Participants with appropriate consents and inter-agency data agreements.
 - Ensure “warm hand-offs” are made to transition each individual from a provider or through a referral to an organization that will continue care or facilitate ongoing

care.

22. Disclosure of Incidents:

AGENCY shall inform COUNTY, by telephone and email to the Office of Behavioral Health Substance Use Disorder Grant Compliance Specialist staff designee, of all unusual incidents that involve any Participants within four to eight (4 – 8) hours of the occurrence of the incidents and follow up with **EXHIBIT E – COMMUNITY SERVICES DEPARTMENT INCIDENT NOTIFICATION FORM** within twenty-four (24) hours of the occurrence of said incident. This includes incidents occurring in or out of the facilities or on approved trips away from the facility. An unusual incident is defined as any alleged, suspected, or actual occurrence of an incident that adversely affects the health and safety of any participant served through the program funded in whole or part through County funds, including OSF funds. All of the incidents require that immediate action is taken to protect Participants from further harm, that an investigation is conducted to determine the cause of the incident and contributing factors, and that a prevention plan is developed to reduce the likelihood of further occurrences. Examples include but are not limited to physical, verbal or sexual abuse.

23. AGENCIES that provide services to, or will be in the vicinity of children, the elderly and other vulnerable adult populations, will have and comply with a policy that requires them to conduct a Level 2 Criminal Background Check prior to employment or volunteering and a rescreen every five (5) years for all volunteers and employees to maintain Level 2 standards. Contact with children, the elderly and other vulnerable adult populations, or confidential records is not permitted until screening is complete and the individual is deemed "Eligible"

24. AGENCY shall have an approved Succession Plan indicating how the AGENCY will communicate to the DEPARTMENT if Key Personnel, staff who are directly linked to the funded program, or Senior Management plans to leave the AGENCY. AGENCY shall provide an action plan and timeline for replacement to the COUNTY to the Office of Behavioral Health Substance Use Disorder Grant Compliance Specialist staff designee for approval annually.

25. AGENCY shall notify COUNTY Office of Behavioral Health Substance Use Disorder Grant Compliance Specialist staff designee through the DEPARTMENT'S Incident Notification Process and follow up with **EXHIBIT E** within five (5) business days of the following:

- a. Resignation/Termination of CEO, President and/or CFO.
- b. Resignation/Termination of Key OSF funded staff.
- c. OSF Funded Staff vacancy position for 90 days or more.
- d. Resignation/Termination of Key program staff, OSF Funded or not, who are providing services directly or indirectly.
- e. Loss of funding from another Funder that could impact service delivery.
- f. New credit lines established with creditors, or any other new debt incurred (including loans taken out on mortgages).
- g. Inability to have three (3) month's cash flow on hand.
- h. Temporary interruption of the delivery of services due to closure, emergency,

natural or unnatural disaster.

i. Other incidents that may occur unexpectedly and are not covered above.

26. AGENCY may provide Key Personnel appropriate training according to their staff qualifications and role, including but not limited to:
 - a. Trauma-Informed Care (TIC), Adverse Childhood Experiences (ACEs) and Motivational Interviewing (MI) training;
 - b. AGENCY shall ensure staff and Key Leadership Members participate in and understand the reasoning behind incorporating the Resiliency/Recovery Capital Index into the program and that AGENCY engages in training for administering and interpreting data in collaboration with COUNTY's designated vendor.

AGENCY can obtain a list of training resources on the FAA webpage.

27. AGENCY shall provide its By-Laws, as well as a roster of Board of Directors with titles, addresses, and phone numbers, inclusive of non-conflict signed statements.
28. AGENCY shall provide its revised budget, as applicable, if there are programmatic changes. This revised budget shall be reviewed, discussed and approved by the DEPARTMENT, Program and Fiscal Staff.
29. AGENCY shall submit information regarding available services and related information about Impact Partner and the funded program(s), as requested by 211 Palm Beach/Treasure Coast, Inc. Updated information shall be provided at least annually to 211 Palm Beach/Treasure Coast, Inc.
30. AGENCY Engagement

The DEPARTMENT and COUNTY rely on all agencies to help ensure that our community recognizes the importance of the work we do together. Palm Beach County residents should know about the specific work covered in this Contract, and also know about the DEPARTMENT: who it is, its role in funding, how it works, and what they – the taxpayers – are funding.

The names and logos of the AGENCY or program funded under this Contract and the DEPARTMENT and COUNTY are to be displayed in all communications, education and outreach materials. The DEPARTMENT is to be identified as the funder, or one of the funders if there are more than one. The two (2) approved logos are below:



Specific Activities – Mandatory:

To promote independence and enhance the quality of life in Palm Beach County by providing effective and essential services to residents in need.

Specific Activities – Recommended:

- When AGENCY describes the DEPARTMENT in written material (including news releases), use the language provided below and available on the DEPARTMENT'S website <http://discover.pbcgov.org/communityservices/Pages/default.aspx>.
 - Display the DEPARTMENT and COUNTY logo according to the guidelines at <https://discover.pbc.gov/communityservices/PDF/publications/CSD%20LOGO%20Guideline.pdf> on any printed promotional material paid for using the DEPARTMENT and COUNTY funds including stationery, brochures, flyers, posters, etc., describing or referring to a program or service funded by the DEPARTMENT and COUNTY.
 - Identify the DEPARTMENT and COUNTY as a funder in media interviews when possible, and
 - Notify the DEPARTMENT staff of any news release or media interview relating to this Contract or the program funded under this Contract sufficiently in advance (e.g., a minimum of two (2) weeks prior) so the coverage can be promoted using appropriate media channels, and
 - Place signage/LOGO in AGENCY'S main office/lobby and all additional work/service sites visible to the public, identifying the DEPARTMENT and COUNTY as a funder, and
 - Display the DEPARTMENT and COUNTY logo according to this posted guideline <https://discover.pbc.gov/communityservices/PDF/publications/CSD%20LOGO%20Guideline.pdf> on the AGENCY'S website with a hyperlink to the DEPARTMENT and COUNTY website <http://discover.pbcgov.org/communityservices/Pages/default.aspx>, and
 - Display the DEPARTMENT logo on signs and banners at events open to the public (excluding fund-raising events) promoting funded programs that AGENCY sponsors or participates in.
31. In accordance with section 119.0721(2), Florida Statutes, Social Security Numbers (SSN) may be disclosed to another governmental entity or its agents, employees, or contractors, **if disclosure is necessary** for the receiving entity to perform its duties and responsibilities. The receiving governmental entity, and its agents, employees, and contractors shall maintain the confidential and exempt status of such numbers.
32. AGENCY shall be responsible for establishing and maintaining a policy concerning formal cyber security training for all employees that serve Palm Beach County to ensure that the security and confidentiality of data and information systems are protected. The policy and training must be in place within ninety (90) days of the execution of this Contract, and will include, at a minimum:
- A testing component that will test at intervals throughout the year for all employees that serve Palm Beach County, regardless of funding source for their position; and
 - A tracking component so that AGENCY or the County can verify employee compliance. AGENCY shall furnish an Attestation Statement, within ninety (90) days of execution of this Contract, verifying that a cyber security training is in place for all employees that serve Palm Beach County.
33. AGENCY serving eligible participants/households must:
- Check Online System for Community Access to Resources and Social Services

(OSCARSS) when determining eligibility for individuals/households;

- Enroll participant(s)/household(s) into the DEPARTMENT-designated data system, and document all service(s) provided;
- Utilize the Resource and Referral Portal (RRP) in OSCARSS to provide referrals to community-based services such as self-sufficiency services/employment services, etc. as appropriate;
- Accept RRP referrals from Palm Beach County Community Services Department (CSD); and
- Participate in CSD events that will increase collaboration and enhance agency skills to achieve outcomes.

34. STATE AND COUNTY OSF REPORTING REQUIREMENTS – **EXHIBIT K**

- State and local governments shall follow their existing reporting and records retention requirements along with considering any additional recommendations/requirements from the Opioid Abatement Taskforce or Council.
- State and Local Governments shall ensure that any provider or sub-recipient of Opioid Funds at a minimum does the following:
 - Any provider shall establish and maintain books, records and documents (including electronic storage media) sufficient to reflect all income and expenditures of Opioid Funds.
 - Any provider shall retain and maintain all participant/client records, financial records, supporting documents, statistical records, and any other document (including electronic storage media) pertinent to the use of the Opioid Funds during the term of its receipt of Opioid Funds and retained for a period of six (6) years after it ceases to receive Opioid Funds or longer when required by law. In the event an audit is required by the State or Local Government, records shall be retained for a minimum period of six (6) years after the audit report is issued or until resolution of any audit findings or litigation based on the terms of any award or contract.
 - At all reasonable times for as long as records are maintained, persons duly authorized by State or Local Government auditors shall be allowed full access to and the right to examine any of the contracts and related records and documents, regardless of the form in which kept.
 - A financial and compliance audit shall be performed annually and provided to the State.
 - All providers shall comply and cooperate immediately with any inspection reviews, investigations, or audits deemed necessary by The Office of the Inspector General (section 20.055, F.S.) or the State.
 - No record may be withheld nor may any provider attempt to limit the scope of any of the foregoing inspections, reviews, copying, transfers or audits based on any claim that any record is exempt from public inspection or is confidential, proprietary or trade secret in nature; provided, however, that this provision does not limit any exemption to public inspection or copying to any such record.

35. ADDITIONAL OPIOID SETTLEMENT-SPECIFIC REPORTING AND ACCOUNTABILITY.

Agency shall request access from the Florida Department of Children and Families (DCF) to the Opioid Data Management System: [DCF-SAMH Office of Opioid Recovery User Access Request Form \[app.smartsheet.com\]](#).
[DCF-SAMH Office of Opioid Recovery User Access Request Form \[app.smartsheet.com\]](#)

Each Agency staff person needing access should complete the Smartsheet form.

An AGENCY receiving Opioid Settlement funds is required to submit data to the Opioid Data Management System web portal no later than 18th day of each month following service delivery.

This reporting will include the following information:

- Data on demographics
- Number of individuals served
- Services provided
- Diagnoses
- The cost associated with services.

AGENCY shall upload 837 forms into the Opioid Data Management System for client-specific services paid for with Opioid Settlement funds. This form is an electronic file with client specific data used for healthcare claims. AGENCYs who have an electronic health (or medical) record (EHR) system can produce these files and will be able to complete the required fields. AGENCYs without access to 837 file formats will use the CSV file format provided by the Department.

- Report expenditures for the previous fiscal year to the Department of Children and Families (DCF) by no later than August 31st.
- Report to DCF is due by July 1st of each year on how Opioid Funds will be expended in the upcoming fiscal year.
- The State Taskforce or Council will set other data sets that need to be reported to DCF to demonstrate effectiveness of expenditures on Approved Purposes.
- DCF has established a statewide Opioid Implementation and Financial Reporting System (“Florida Opioid Implementation and Financial Reporting System” (FOIFRS) to which providers may request access for the purpose of submitting implementation plans and financial reports.

EXHIBIT H

CONTRACT EXHIBIT

NONGOVERNMENTAL ENTITY HUMAN TRAFFICKING AFFIDAVIT

Section 787.06(13), Florida Statutes

THIS AFFIDAVIT MUST BE SIGNED AND NOTARIZED

I, the undersigned, am an officer or representative of _____
(CONTRACTOR) and attest that CONTRACTOR does not use coercion for labor or services as
defined in section 787.06, Florida Statutes.

**Under penalty of perjury, I hereby declare and affirm that the above stated facts are true
and correct.**

(Signature of Officer or Representative)

(Printed Name of Officer or Representative)

State of Florida, County of Palm Beach

Sworn to and subscribed before me by means of ☐ physical presence or ☐ online notarization
this, _____ day of _____, 20____, by _____.

Personally known ☐ OR produced identification ☐.

Type of identification produced _____.

NOTARY PUBLIC (Signature)

My Commission Expires:

State of Florida at large

(Notary Seal)

Certification Anti-Lobbying Placeholder

Certification of Debarment and Suspension Placeholder

State Agreemen