

Alcohol and Other Drug Abuse (AODA)/Inner City Services

It is further understood and agreed by both parties through this attachment to the CY 2017 "State and County Contract Covering Social Services and Community Prevention Programs" that:

I. Funds Provided/Period Covered

Funds are provided from the Federal Substance Abuse Prevention and Treatment Block Grant (SAPTBG - 100%, CFDA# 93.959). The contract period is January 1, 2017, through December 31, 2017.

II. Purpose and Service Conditions on the Use of the Additional Funds

A. Scope of Services: These additional funds shall be used by the County to fund programs in community prevention, access, and outreach including programs to high risk, minority, inner city youth by a county or a private, non-profit organization to combat alcohol and other drug abuse problems in the inner city areas for **primary prevention efforts**.

B. Primary Prevention - 45 CFR §96.125

The SAPTBG provides that prevention programs are **for individuals who do not require treatment** for a substance use disorder. Such programs and activities may include education, mentoring, and other activities designed to reduce the risk of substance abuse by individuals. Early intervention activities and SBIRT (Screening, Brief Intervention, and Referral to Treatment) are **not** primary prevention.

The following preventative interventions and prevention strategies are acceptable for addressing intravenous drug use prevention: Institute of Medicine Classification - Universal, Selective, and Indicated.

- a. Universal: Activities targeted to the general public or a whole population group that has not been identified on the basis of individual risk. Universal Direct.— Interventions directly serve an identifiable group of participants but who have not been identified on the basis of individual risk (e.g., school curriculum, after school program, parenting class). This also could include interventions involving interpersonal and ongoing/repeated contact (e.g., coalitions).
- b. Universal Indirect.— Interventions support population-based programs and environmental strategies (e.g., establishing ATOD policies, modifying ATOD advertising practices). This also could include interventions involving programs and policies implemented by coalitions.

2. Selective: Activities targeted to individuals or a subgroup of the population whose risk of developing a disorder is significantly higher than average.
3. Indicated: Activities targeted to individuals in high-risk environments, identified as having minimal but detectable signs or symptoms foreshadowing disorder or having biological markers indicating predisposition for disorder but not yet meeting diagnostic levels. (Adapted from The Institute of Medicine Model of Prevention)

There are six primary prevention strategies typically funded by principal agencies administering the SAPT Block Grant. Here are the definitions of those strategies:

- 1) Information Dissemination - This strategy provides knowledge and increases awareness of the nature and extent of alcohol and other drug use, abuse, and addiction, as well as their effects on individuals, families, and communities. It also provides knowledge and increases awareness of available prevention and treatment programs and services. It is characterized by one-way communication from the source to the audience, with limited contact between the two. Examples of this strategy include:
 - Clearinghouse/information resources centers
 - Resource directories
 - Media campaigns
 - Brochures
 - Radio and TV public service announcements
 - Speaking engagements
 - Health fairs and other health promotion, e.g., conferences, meetings, seminars
 - Information lines/Hot lines
 - Other, specify
- 2) Education - This strategy builds skills through structured learning processes. Critical life and social skills include decision making, peer resistance, coping with stress, problem solving, interpersonal communication, and systematic and judgmental abilities. There is more interaction between facilitators and participants than in the information strategy. Examples of this strategy include:
 - Parenting and family management
 - Ongoing classroom and/or small group sessions
 - Peer leader/helper programs
 - Education programs for youth groups
 - Mentors
 - Preschool ATOD prevention programs
 - Other, specify
- 3) Alternatives - This strategy provides participation in activities that exclude alcohol and other drugs. The purpose is to meet the needs filled by alcohol and other drugs with

healthy activities, and to discourage the use of alcohol and drugs through these activities. Examples of this strategy include:

- Drug free dances and parties
- Youth/adult leadership activities
- Community drop-in centers
- Community service activities
- Outward Bound
- Recreation activities
- Other, specify

4) Problem Identification and Referral - This strategy aims at identification of those who have indulged in illegal/age-inappropriate use of tobacco or alcohol and those individuals who have indulged in the first use of illicit drugs in order to assess if their behavior can be reversed through education. It should be noted however, that this strategy does not include any activity designed to determine if a person is in need of treatment. Examples of this strategy include:

- Employee Assistance Programs
- Student Assistance Programs
- Driving while under the influence/driving while intoxicated education programs
- Other, specify

5) Community-Based Process - This strategy provides ongoing networking activities and technical assistance to community groups or agencies. It encompasses neighborhood-based, grassroots empowerment models using action planning and collaborative systems planning. Examples of this strategy include:

- Community and volunteer training, e.g., neighborhood action training, impactor training, staff/officials training
- Systematic planning
- Multi-agency coordination and collaboration/coalition
- Community team-building
- Accessing services and funding
- Other, specify

6) Environmental - This strategy establishes or changes written and unwritten community standards, codes, and attitudes, thereby influencing alcohol and other drug use by the general population. Examples of this strategy include:

- Promoting the establishment or review of alcohol, tobacco, and drug use policies in schools
- Guidance and technical assistance on monitoring enforcement governing availability and distribution of alcohol, tobacco, and other drugs
- Modifying alcohol and tobacco advertising practices

- Product pricing strategies
- Other, specify

C. Requirements Regarding HIV – 45 CFR §96.128

Funds may **not** be used for HIV early intervention programs/services.

D. Restrictions on the Expenditure of the Grant Vendor/Sub-Contractor Compliance, 45 CFR §96.135

When a subcontract is issued by the County, conditions on prohibited expenditures **must** be adhered to and monitored by the County. **Counties are expected to develop a policy to ensure that all vendors/sub-contractors comply with all of the requirements.**

1. The program does **not** expend SAPTBG funds to make payments to intended recipients of health services.
2. The program does **not** expend SAPTBG funds to purchase or improve land; purchase, construct, or permanently improve (other than minor remodeling) any building or other facility; or purchase major medical equipment.
3. The program does **not** expend SAPTBG funds to satisfy any requirement for the expenditure of non-Federal funds as a condition for the receipt of Federal funds.
4. The program does **not** expend SAPTBG funds to provide financial assistance to any entity other than a public or nonprofit private entity.
5. The program does **not** expend SAPTBG funds to provide individuals with hypodermic needles or syringes.

E. Payment Schedule, 45 CFR §96.137

The County must use the SAPTBG funds as the “payment of last resort.”

III. Fiscal Conditions on the Earnings of the Additional Funds

These additional funds are earned under the following conditions:

- A. In accordance with your application goals, objectives, performance measures, reporting requirements, and budget.
- B. The Department shall apply these conditions in determining the close of the contract. The amount of a subsequent audit adjustment on the funds in this contract shall be based upon these conditions.

IV. Fiscal and Client Reporting on the Use of the Additional Funds

Use of these funds shall be reported to the Department on the F-00642 (Profile #589) and the F-20942 Form according to the schedule outlined in the State/County Contract.

- A. All organizations and agencies that provide substance use disorder prevention services using SAPTBG funds must report fiscal, program, individual, and population data using the Substance Abuse Prevention-Services Information System (SAP-SIS). Reports are due by the date specified in the annual numbered memo.
- B. Semi-annual program and progress reports on each program goal and objective including fiscal reports on budget line items shall be submitted to the Bureau of Prevention, Treatment and Recovery (BPTR) by July 30 and January 31 of the following year in a format provided by the BPTR (Form #F-20389).
- C. An annual program report must be submitted to the BPTR within 30 days after the calendar year of program operations in a format provided by the BPTR.
- D. Failure to report these funds and the clients served by them as specified above may result in the loss of these funds by the County and their repayment by the County to the Department.

V. Payment Procedures

These funds shall be paid in accordance with the State/County contract.

VI. Availability of Funds

The Department shall pay the County for the services it provides or purchases as set forth in this contract within the limits of funds appropriated.

VII. Subcontractors

Requirements herein stated and in the base State/County contract apply to any sub-grants or grants. The contracting agency has primary responsibility to take constructive steps to ensure the compliance of its subcontractors. The County must inform the sub-grantees of the Federal award information set forth herein.

VIII. Additional Requirements - 42 USC § 300x-28,

- A. Improvement of process for appropriate referrals for treatment.

With respect to individuals seeking treatment services, a funding agreement for a grant under section 300x-21 of this title is that the County involved will improve (relative to fiscal year 1992) the process in the State for referring the individuals to treatment facilities that can provide to the individuals the treatment modality that is most appropriate for the individuals.

- B. Continuing education

With respect to any facility for treatment services or prevention activities [1] that is receiving amounts from a grant under section 300x–21 of this title, a funding agreement for a County for a grant under such section is that continuing education in such services or activities (or both, as the case may be) will be made available to employees of the facility who provide the services or activities.

C. Coordination of various activities and services

A funding agreement for a grant under section 300x–21 of this title and per 45CFR § 96.132(c) is that the State involved will coordinate prevention and treatment activities with the provision of other appropriate services (including health, social, correctional and criminal justice, educational, vocational rehabilitation, and employment services).

The County shall coordinate prevention and treatment activities with the provision of other appropriate services (including health, social, correctional and criminal justice, educational, vocational rehabilitation, and employment services). In evaluating compliance with this section, the State will consider such factors as the existence of memoranda of understanding between various service providers/agencies and evidence that the County has included prevention and treatment services coordination in its grants and contracts.

D. Allocation regarding primary prevention programs, 42 USC § 300x–22

A funding agreement for a grant under section 300x–21 of this title is that, in expending this grant, the County involved—

(1) Will expend not less than 100 percent for programs for individuals who do not require treatment for substance abuse, which programs—

- a. Educate and counsel the individuals on such abuse; and
- b. provide for activities to reduce the risk of such abuse by the individuals.

(2) Will, in carrying out paragraph (1)—

- a. Give priority to programs for populations that are at risk of developing a pattern of such abuse; and
- b. Ensure that programs receiving priority under subparagraph develop community-based strategies for the prevention of such abuse, including strategies to discourage the use of alcoholic beverages and tobacco products by individuals to whom it is unlawful to sell or distribute such beverages or products.