Q. When is the 5 Year Comprehensive Strategic Plan due to SAMHSA?
A. March 1, 2016

Q. What is the total length of the funding period for Year 1 of the grant?
A. December 1, 2016 to June 30, 2017

Q. Is the funding period for Year 1 from time of award to June 30, 2017? If so, should it be anticipated that the entire Year 1 budget (maximum of $250,000) be spent between time of funding and June 30, 2017 (i.e., less than 12 months of funding)?
A. The anticipation is that the funds will be spent in total for year one, but there is an option for a budget revision if the funds are not able to be spent.

Q. Will the funding periods for Years 2-5 be SFY18 (Year 2), SFY19 (Year 3), SFY20 (Year 4), SFY21 (Year 5)?
A. Yes.

Q. How will sub-recipients be identified for local-level implementation?
A. The plan for the identification of sub-recipients will be developed throughout the development of the 5-year plan process.

Q. When will sub-recipients be identified for local-level implementation?
A. Local level implementation timelines will be included in the 5-year plan.

Q. How many sub-recipients are expected to be funded for local-level implementation?
A. The number of sub-recipient communities will be determined during the development of the 5-year plan.

Q. What tasks does “facilitate the development of a statewide public health campaign to raise awareness and change social norms about the dangers of sharing medication” (Scope of Work, Bullet 8) entail?
A. It is anticipated that the awarded applicant will contract with a media/advertisement agency to lead this work. This entity will work with the SPF Rx workgroup, evaluators and other integral stakeholders to develop the campaign.

Q. What tasks does “plan for developing a Public Health Campaign” (Proposal Narrative, #1) entail?
A. It is anticipated that the awarded applicant discusses a plan on how they will develop a public health campaign; ie: contract with a vendor, etc.

Q. Will an RFP for the vendor that will be responsible for developing and implementing the campaign be released?

A. It is anticipated that the awarded applicant will be responsible for this process.

Q. Will the selected Planning, Evaluation, Training, & Technical Assistance Team be working with the SPF Rx Project Director, SPF Rx Workgroup, and a selected advertising vendor to facilitate the development of the campaign?

A. Yes. It is anticipated that these funds will cover the selected vendor.

Q. Will the selected Planning, Evaluation, Training, & Technical Assistance Team be responsible for the actual development of the campaign?

A. No, the vendor would be responsible for the actual development.

Q. Will the selected Planning, Evaluation, Training, & Technical Assistance Team be responsible for the implementation of the campaign?

A. No, it is anticipated that OhioMHAS communication staff, community entities and other stakeholders will assist with this.

Q. The Scope of Work states that Year 1 includes both Project Management, Strategic Plan Development & Evaluation and Years 2-5 are exclusively evaluation. Will the Planning, Evaluation, Training, & Technical Assistance Team be responsible for providing any training and technical assistance at the state-level during Years 2-5?

A. This is not anticipated at this time.

Q. Will the Planning, Evaluation, Training, & Technical Assistance Team be responsible for providing any training and technical assistance at the sub-recipient level during Years 2-5?

A. This is dependent upon the results of the 5-year plan, who the sub-recipients are and what EBP’s are identified for implementation.

Q. Please confirm if the following was about total costs or direct costs: Proposals will be accepted for no more than $250,000 for the first year and no more than $74,000 in subsequent years

A. This is about total costs.

Q. Can you please define which organizations/groups you are referring to when you say the following under “scope of work”: SPF Rx Workgroup partners and stakeholders: This is an invited group of state and local stakeholders; Communities, diversions sources, and state and community organizations.
A. The SPF Rx workgroup is an invited group of state and local stakeholders and the others are related to anyone who may utilize the OARRS data.

Q. Can you please provide editable Budget and Budget Narrative documents.

A. These will be posted on the OhioMHAS website as soon as possible.

Q. Is there a cap on indirect costs?

A. The indirect cost rate allowable on all OhioMHAS awards is up to 10% of the award. This is consistent with the federal Super Circular. Any indirect cost rate that exceeds 10% and does not meet the following conditions may not be considered for funding. A different indirect cost rate may be used if it has been approved by a federal department (e.g., SAMHSA for federal awards). Documentation for higher rates should be included in your proposal in order for OhioMHAS to validate the requested indirect cost rate.