First Responders-Comprehensive Addiction and Recovery Act (FR-CARA)

FUNDER: Substance Abuse and Mental Health Services Administration (SAMHSA) – Center for Substance Abuse Prevention

DUE DATE > March 14, 2023

Link to Funding Opportunity:

https://www.samhsa.gov/sites/default/files/grants/pdf/fy-23-fr-cara-nofo.pdf



PURPOSE

The purpose of this program is to support first responders and members of other key community sectors to administer a drug or device approved or cleared under the Federal Food, Drug, and Cosmetic Act (FD&C Act) for emergency reversal of known or suspected opioid overdose.

Recipients will train and provide resources to first responders and members of other key community sectors at the state, tribal, and local levels on carrying and administering a drug or device approved or cleared under the FD&C Act for emergency treatment of known or suspected opioid overdose. Recipients will also establish processes, protocols, and mechanisms for referral to appropriate treatment and recovery support services, safety around fentanyl, carfentanil, other synthetic opioids (CDC) and other licit and illicit drugs associated with overdoses. With this program, SAMHSA aims to support First Responder's efforts to mitigate the overdose epidemic across the nation and provide targeted resources to populations disproportionately impacted by opioid use relative (relative to national averages).

ELIGIBILITY

Eligible Applicants are statutorily limited to public entities:

- State governments and territories (the District of Columbia, the Commonwealth of Puerto Rico, the Northern Mariana Islands, the Virgin Islands, Guam, American Samoa, the Republic of Palau, the Federated States of Micronesia, and the Republic of the Marshall Islands).• State governments, The District of Columbia, Guam, the Commonwealth of Puerto Rico, the Northern Mariana Islands, the Virgin Islands, American Samoa, the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau
- Governmental units within political subdivisions of a state, such as a county, city, or town.
- Federally recognized American Indian/Alaska Native tribes and tribal organizations, as defined in Section 5304(b) and Section 5304(c) of the Indian Self-Determination and Education Assistance Act.
- The FR-CARA program statutorily requires that no less than 20 percent of the funding be made to applicant organizations providing services to rural communities with high rates opioid use disorder.

FUNDING LEVEL

- Estimated Number of Awards: 34
- Award Amount Range: \$250,000-800,000 per year
 - Tribes/Tribal Organizations up to \$250,000 per year
 - Local Government entities up to \$500,000 per year
 - States up to \$800,000 per year
- Length of Project Period: 4 years
- Match or Cost Sharing Required: No



POPULATION OF FOCUS

First responders and members of other key community sectors at the state, tribal, and local levels who carry and administer emergency treatment for known or suspected opioid overdose.



DEFINITION OF FIRST RESPONDERS

- Firefighters,
- Law enforcement officers,
- Paramedics,
- Emergency medical technicians,
- Mobile crisis providers, or
- Other legally organized and recognized volunteer organizations that respond to adverse opioid related incidents.



Award recipients must use SAMHSA's funds to support direct services primarily, beginning in the project's 4th month. This includes the following activities:

• Provide resources to support the purchase and distribution of FD&C Act approved or cleared devices for emergency reversal of known or suspected opioid overdose by first responders and members of other key community sectors in the targeted catchment area. Note: These resources may include the purchase and distribution of FDA-approved overdose reversal drugs (e.g., naloxone).



Train and provide resources for first responders and members of other key community sectors (including direct service providers) on the following:

- Carrying and administering a device approved or cleared under the FD&C Act for emergency reversal of known or suspected opioid overdose;
- Education and safety measures around fentanyl, carfentanil, other synthetic opioids, and other licit and illicit drugs associated with overdoses;
- Establishing policies and procedures for the implementation of evidence-based trauma-informed care practices;
- Hire staff that represent the population of the community.



- Establish processes, protocols, and mechanisms for referral to appropriate treatment, which may include an outreach coordinator, peer support specialist or team, or mobile crisis services to connect individuals receiving opioid overdose reversal drugs to follow-up services.
- Develop a Naloxone Education and Distribution Plan and submit the plan in SPARS within the first 6 months of the award.
- Form or join an established advisory committee that meets the following requirements of the award. The advisory committee must include representatives from the Office of the Governor or Chief Executive Officer, tribal council, or office of the local chief executive, as applicable; and a core group of agencies identified by the recipient that must include agencies currently engaged in efforts to prevent drug overdose and overdose-related deaths. This may include: first responders, entities that distribute FDA-approved overdose reversal drugs, and representatives of agencies and organizations responsible for substance use disorder (SUD) prevention, treatment, mental health, recovery support, and harm reduction services.

The advisory committee should also include:

 Members of other key community sectors are also encouraged to be a part of the advisory committee, such as emergency medical services agencies, agencies and organizations working with prison and jail populations, offender reentry programs, physical and behavioral healthcare providers, including community health centers, community mental health centers, federally qualified health centers, and Certified Community Behavioral Health Clinics(CCBHCs), harm reduction agencies, organizations providing housing support, pharmacies, cultural support resources appropriate to the population of focus, family and children's support services (including school systems), LGBT centers, and other local psychosocial support providers.



- Translate tools and resources available to recipients of services;
- Develop strategies to provide, increase, or enhance access to services for people of all racial/ethnic/marginalized groups in the community;
- Create conflict and grievance resolutions processes that are culturally and linguistically appropriate.



STRATEGY

Based on our experience, these are our recommendations.

- We suggest that you carefully review the funding announcement and solidify MOUs as applicable and other stakeholders, including their roles and responsibilities.
- Review your evidence-based practices for effectiveness with the population of focus, including racial and cultural considerations.

NEXT STEPS

Helping you build toward your tomorrow.

SAE is available to collaborate with you to write the proposal, provide a review of your proposal, or to provide technical assistance in developing your program plan.

- Immediately validate that you have accounts in the System for Awards Management (SAM), Grants.gov, and era Commons;
- Create a table to assess your current level of implementation for each of the required activities and what you plan to expand or enhance with grant funding for each year of the funding period;
- Use this table to begin developing your staffing plan and program budget;
- Contact SAE for a free consultation to discuss this funding opportunity and your ideas for your proposal.



WE WELCOME THE OPPORTUNITY TO ASSIST YOU & YOUR TEAM. Reach out today to schedule a no-cost consultation.



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