**[Name] County Opioid Settlement Grant: Scoring Sheet**

**Scoring Descriptions (see rubric on next page)**

|  |  |  |
| --- | --- | --- |
| **Score** | **Descriptor** | **Description** |
| **0** | **No response** | No response provided. |
| **1** | **Insufficient** | Response provides the minimum information but is still missing important details. |
| **2** | **Satisfactory** | Response answers the questions in full and meets the requirements. |
| **3** | **Excellent** | Response exceeds the requirements and provides additional key details. |

**Organization:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Possible Points**  | **0****No response** | **1****Insufficient** | **2****Satisfactory** | **3****Excellent** |
| **Section One: Organizational Information (3 points possible)** |
|  | Section is complete and the organization’s purpose relates to substance use and combating the overdose crisis. Demonstrates the organizational capacity to handle the project. |  |  |  |  |
| **Section Two: Funding Information (9 points possible)** |
|  | **Budget Narrative:** Provides a thorough breakdown of all proposed expenses, explaining each item's purpose and necessity for the project. Is consistent with the provided budget. |  |  |  |  |
| **Sustainability:** Demonstrates a strong ability to continue or expand the project or program beyond funding received from the settlement funds. |  |  |  |  |
| **Budget Template:** Provides reasonable, realistic, and necessary estimates. All costs fall within the approved remediation strategies. Is consistent with the budget narrative. |  |  |  |  |
| **Section Three: Project Information (12 points possible)** |
|  | **Project Details:** Provides a detailed explanation of the project including where, who, and a reasonable estimate of how many people will be directly served. Demonstrates the capacity and expertise to effectively carry out the proposed activities. |  |  |  |  |
| **Supporting Data:** Provides appropriate information to demonstrate the project is based on promising practices or is evidence based and is designed to address an existing community need  |  |  |  |  |
| **Data Collection:** Demonstrates a clear plan to collect and store data for the evaluation and continued improvement of the project or program |  |  |  |  |
| **Project Work Plan:** Clearly articulates how each activity contributes to achieving the objectives and goal(s). All activities fall within the approved remediation strategies. Outlines clear and reasonable outcomes, measures, and timeframes. |  |  |  |  |
| **Application Completeness & Overall Quality (6 points possible)** |
|  | Complete application with a current annual operating budget, state certification, licensure, or accreditation (if applicable), and letters of support.  |  | Completeness may only score 0 or 3. |  |
| Project aligns with core strategies outlined in Exhibit E and is feasible |  |  |  |  |

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| **Total:** |  | **/ 30 points** |

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| **COMMENTS/NOTES**  |
| **Section One: Organizational Information**  |
|  | **Organizational Information:** |
| **Section Two: Funding Information**  |
|  | **Budget Narrative:**  |
| **Sustainability:**  |
| **Budget Template:**  |
| **Section Three: Project Information**  |
|  | **Project Details:**  |
| **Supporting Data:**  |
| **Data Collection:**  |
| **Project Work Plan:**  |
| **Application Completeness & Overall Quality**  |
|  | **Completeness & Quality:** |