

From: [Grants, OMB](#)
To: [Carrillo, Lisa](#); [Yatchum, Karen](#); [Merrill, Toni](#)
Cc: [Oliver, Auria](#); [Schoel, Daniel](#); [Carrillo, Lisa](#)
Subject: RE: Grants Database - SAMHSA Treatment Drug Courts
Date: Monday, February 19, 2024 2:58:36 PM
Attachments: [SW-OMB Grants Review form SAMHSA Treatment Drug Courts.pdf](#)
[image001.png](#)
[image002.png](#)
[image003.png](#)
[image004.png](#)
[image005.png](#)
[image006.png](#)
[image007.png](#)
[image009.png](#)

Hello Lisa,

OMB has no objection to Human Services moving forward with the grant application. Please see the attached documentation.

Samantha Wexler

Grants Analyst, ARPA
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From: Grants <no-reply@sharepointonline.com>
Sent: Monday, February 19, 2024 9:58 AM
To: Wexler, Samantha <swexler@pinellas.gov>
Subject: Grants Database - SAMHSA Treatment Drug Courts

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 [SAMHSA Treatment Drug Courts](#) has been added



Carrillo, Lisa

2/19/2024 9:57 AM

Program Manager: Carrillo, Lisa

Program Manager Phone #: 727-464-8272

County Department: Human Services

Director's Name: Yatchum, Karen

Application Submitter: Carrillo, Lisa

OMB Analyst (CIP or Operating):

Granting Agency: HHS / SAMHSA

CFDA/CSFA #: 93.243

Funding Opportunity Link: <https://www.samhsa.gov/grants/grant-announcements/ti-24-004>

Grant Funding Program Name: SAMHSA Treatment Drug Courts

Grant Funding Type: Project

Grant Award Type: Reimbursement

Grant Funding Program Funding Cap (\$): \$2,000,000.00

Amount Requested: \$2,000,000.00

Does this Grant Cover Administrative or Management Costs?: No

Amount Requested to Cover Administrative or Management Costs: \$0.00

What fiscal year(s) will the award amount be made available?: FY25-29

Match Amount: \$0.00

Required Match Type: None

Anticipated Match Source (Fund/Center/Program): N/A

Is the Match in the Current Budget?: No

Will the Match need to be added to the Budget?: No

Total Cost of Project (including Grant, County match, and other Resources): \$2,000,000.00

Granting Agency Contact Name: Jon Berg

Granting Agency Phone or Email: 240-276-1609 or TreatmentDrugCourts@samhsa.hhs.org

Granting Agency Address:

OPUS Project Title:

Duration: Multi Year

Proposed Abstract (Project) This grant application is requesting funding for the enhancement of the Sixth Judicial Circuit Court's adult drug and/or family treatment program(s). This funding will allow for the continued enhancement of treatment and

Scope of Work: support services for individuals involved in the criminal justice system who have substance abuse issues. The program budget is \$400,000 per year for up to 5 years, totaling \$2,000,000.

Benefit Summary (How will this benefit the County, Dept, etc?): Drug Treatment Courts programs exist to provide participants support to help them overcome their substance abuse issues and the opportunity to become productive, drug free members of their communities.

Director Approval (Attach): No

Is the proposal submitted for a different Department?: Yes

If submitting for a different department, what is that department name?: Judiciary

Grant Application Due Date: 4/1/2024

Source of Notification of Grant Solicitation: Administering Agency

If Other, provide source:

FOR OMB USE ONLY BELOW THIS LINE: **PLEASE DO NOT ENTER DATA BELOW THIS LINE**

Grant Status: Submitted to OMB

OPUS Project #:

Grant Contract #:

Award Amount:

OMB Comments:

Granicus #: