Indiana State Department of Health

Grant Opportunity Announcement
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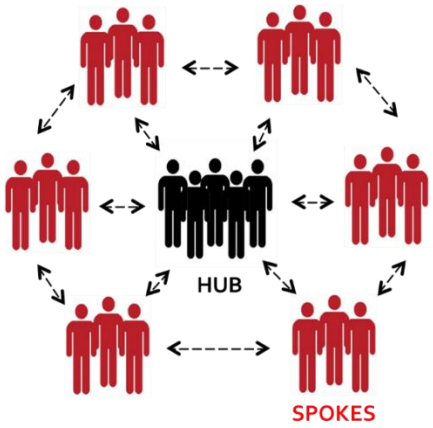
Project Description:

The Indiana State Department of Health's (ISDH) Division of Trauma and Injury Prevention (DTIP) has been awarded a grant from the Centers for Disease Control and Prevention (CDC) to increase comprehensiveness and timeliness of drug overdose surveillance data; make the Prescription Drug Monitoring Program more user-friendly; work with health systems, insurers, and communities to improve opioid prescribing; and build state and local capacity for public health programs related to substance use disorder. As part of these efforts, the ISDH is implementing the Indiana Communities Advancing Recovery Efforts (IN CAREs) ECHO.

The ECHO model is an innovative framework that uses videoconferencing technology to increase the knowledge, skills and performance of community stakeholders, particularly those located in rural and underserved areas. The IN CAREs ECHO connects a group of faculty experts (referred to as the "Hub") who have experience in reducing overdose (OD) deaths with a set of community-based teams (referred to as "Spokes") made up of leaders within each community. The Spoke teams are committed to working together to implement strategies and coordinate efforts to reduce opioid misuse, reduce morbidity and mortality associated with opioid use disorder (OUD), and increase linkage to care for those with OUD.



The ECHO model requires Spoke teams to participate in monthly 90-minute sessions over the course of ten months. A session will consist of a short, expert-led lecture (didactic) presentation

to improve content knowledge and share evidence-based best practices, followed by one community case presentation with clarifying questions and recommendations. As part of the community case presentation, Spoke teams will identify and share stories that illustrate progress, successes and challenges associated with their efforts. As part of this project, each participating Spoke will have post-ECHO action meetings to ensure that participants are applying the knowledge learned in the virtual ECHO sessions to implement changes in their communities.

To aid in the implementation of community changes, the ISDH will fund each Spoke to carry out prevention activities. The allowable activities fall under four strategies (listed below), with each strategy assigned a set dollar amount. Spokes must implement projects that fall under at least one strategy, but can implement projects that fall into all four strategies.

- Strategy 1: Primary Prevention for Opioid Misuse and Opioid Use Disorder
- Strategy 2: Linkage to Care for Recovery Services and Evidence-Based Treatment for OUD
- Strategy 3: Harm Reduction and Anti-Stigma Promotion
- Strategy 4: Additional Activities

Please see Appendix A for a comprehensive list of allowable activities with associated dollar amounts.

Eligibility:

The DTIP is releasing this grant opportunity for existing county-level stakeholder teams to apply to be Spoke teams as part of IN CAREs ECHO. All 92 Indiana counties are eligible to apply. If a county/region does not have a multidisciplinary stakeholder team or a team capable of implementing this project, interested organizations are encouraged to apply and provide a detailed plan on how they will establish a multidisciplinary stakeholder team.

Eligible applicants might include local health departments, hospitals, local government agencies, local coordinating councils, recovery-oriented systems of care, drug-free coalitions, and other community coalitions and not-for-profit organizations that have deep knowledge, and, ideally, have previous experience leading community health improvement activities. Each grantee will be referred to as a "Community Convener" and will serve as an organizer to assemble the multi-disciplinary Spoke team, including, but not limited to, the following sectors: public health, health care, behavioral health, emergency department (ED), EMS, law enforcement and faith leaders. Applicants are highly encouraged to include someone in active recovery on their Spoke team. Applicants must have a minimum of **five** different sectors represented on their team. No more than one organization will be chosen per county, so applicants are highly encouraged to work together to prevent a duplication of efforts and to coordinate a more comprehensive community response.

Funding:

The total funding amount available for this program is over $1.2 million dollars. Each Spoke team will be allocated a set dollar amount based on the strategies chosen as part of their

application. The maximum funding per applicant allowed will depend on the planned activities, and ranges from $25,000-$200,000. ISDH plans to award 10-15 organizations with funding and funds could change based on the final number of chosen applicants. Organizations who are awarded and meet all grant deliverables will be eligible to apply for continued funding after the end of this grant period.

Completed Grant Application Due:

Proposals are to be submitted via the online RedCap application (https://redcap.isdh.in.gov/surveys/?s=8FHFH7NEEW) by **5 p.m. EST Oct. 31, 2019.** Respondents will be notified of results by Nov. 30, 2019.

Webinar Call:

The ISDH will host a webinar call to provide potential applicants with more information about this grant opportunity and offer a chance to ask questions.
Date: Oct. 2, 2019
Time: 10 a.m. EST
Webinar access: At the indicated date and time, this webcast will be available via the Live Video options at the top-right side of the webpage: http://videocenter.isdh.in.gov/videos/

Proposal Requirements:

Please complete the online grant application which can be found at https://redcap.isdh.in.gov/surveys/?s=8FHFH7NEEW. The application will include contact information, organizational information, short answer questions, information about organizational capacity, and a budget template. For budget guidance, please see Appendix A for a list of activities that cannot be funded. All requested funding should be described in the budget. You do not have to complete the entire application at one time, but the entire completed application has to be submitted by **5 p.m. EST Oct. 31, 2019.**

Grantee Requirements:

Activity 1: Grantees will convene a local multidisciplinary stakeholder team. Each chosen grantee will be referred to as a "Community Convener" and will serve as an organizer to assemble a multi-disciplinary Spoke team, including, but not limited to, the following sectors: public health, health care, behavioral health, ED, EMS, recovery community, law enforcement, and faith leaders.

Activity 2: Grantees will participate in monthly ECHO sessions. Grantees are required to convene their Spoke teams and to tune in to monthly ECHO sessions. Grantees may be asked to present during an ECHO session. If unforeseen circumstances arise and Spoke teams are unable to attend a session, they must notify the ISDH as soon as possible.

Activity 3: Grantees will organize monthly post-ECHO action planning meetings with their Spoke teams. This allows grantees to implement positive community changes related to

substance use disorder based on the knowledge gleaned from the Project ECHO sessions. Each Spoke team will be awarded grant funding to carry out chosen projects.

Activity 4: Evaluation and reporting requirements. Grantees must: 1) provide quarterly reports (template provided) to the ISDH); 2) participate in the evaluation of this program; and 3) provide periodic oral updates, as requested by ISDH.

Project Timeline:

Subject to change

- **September – October 2019**
  - Grant application is released. Community Conveners apply for grant funding by Oct. 31, 2019.
- **November – December 2019**
  - Grant applicants are chosen and notified by Nov. 30, 2019.
  - Community Conveners select a location for monthly IN CAREs ECHO sessions.
  - Community Conveners receive necessary equipment to be able to connect to IN CAREs ECHO.
- **January 2020**
  - IN CAREs hosts first initial community welcome and onboarding mock ECHO session. Technological issues are identified and addressed.
- **February – October 2020**
  - IN CAREs hosts Project ECHO monthly sessions.
  - Spoke teams meet monthly for post-ECHO action planning meetings. Spoke teams implement chosen community interventions while receiving technical assistance from the Project ECHO team and ISDH.
  - Spoke teams submit progress reports on a quarterly basis:
    - February-April progress report is due May 30
    - May-July progress report is due Aug. 30
    - August-October progress report is due Nov. 30
- **November 2020 and beyond**
  - **Final** wrap-up progress report documenting activities over the whole year is due Dec. 30
  - Submit success story to ISDH by Dec. 30 (template will be provided)
  - Organizations who are awarded and meet all grant deliverables will be eligible to apply for continued funding after the end of this grant period.

Respondent Participation Guidelines:

- If the awardee's point of contact changes anytime during the grant program, the awardee must notify the ISDH within five business days after the change and provide the contact information for the new contact.

- Failure to comply with all terms of this grant by an awardee will halt all award funding. Failure to comply includes:
    - Not submitting required reports.
    - Misappropriation of funding (i.e. using awarded funding for activities not proposed in initial grant application).
    - Failure to comply with any other criteria set out in in this grant opportunity announcement or otherwise reasonable and considered relevant.

Awardee Selection:

1) Following the application deadline, each proposal will be examined to determine compliance with the format and information requirements specified in this grant opportunity announcement. Incomplete proposals or those exceeding the word limit or violating the requirements stated below will not be considered.
2) Proposals will be evaluated on the basis of the criteria outlined and the best overall compatibility with the intent of this grant opportunity announcement. Additional evaluative weight will be assigned based on:

- Need(s) of respondent's project proposal.
- Quality of the proposed narrative response and budget template.
- Proposed coordination with local partners and key stakeholders.
- Burden of opioid epidemic (opioid prescribing, naloxone distribution, ED visits, mortality data, etc.).
- Any other criteria set out in in this grant opportunity announcement or otherwise reasonable and considered relevant.

Scoring Criteria	**% of Score**
Organizational Information • Provides all requested organizational information including point of contact.	10%
Narrative • Provides thorough explanation of past experience in implementing community projects, prevention programming, and community health improvement initiatives. • Addresses how this grant funding would fill gaps in current community response efforts. • Selects prevention activities and includes a realistic timeline for implementation. • Provides detailed explanation of which local partners the applicant is working with/or intends to work with for project completion. • Explains potential barriers to success and ways to overcome said barriers. • Provides thorough description of who would be working on project and/or how county intends to complete project.	40%

• Adequately answers all other application questions.	
Organizational Capacity • Provides details on past management of grant funding. • Provides past history of using data sources. • Provides explanation of personnel involved in grant implementation.	20%
Budget Template & Budget Narrative • Applicant completed budget template and thoroughly explained intent with requested funds. • Lists requested funding amount and provides narrative justification.	20%
Submission • Applicant uses the RedCap online form to submit application. • Applicant stays within the appropriate word limit. • Applicant submits the application by the deadline as set forth by this Request for Proposal.	10%

Appendix A: Comprehensive list of allowable activities with attached dollar amounts.

The list below details possible prevention activities that applicants can implement. In addition to these options, applicants can propose innovative activities of their own. ISDH has the right to review all proposed activities, including innovative activities, and to approve or deny them. For such projects, applicants should provide justification of the merits of the project and include an associated cost. Applicants are allowed to hire staff to aid in the implementation of grant activities.

Core Allowable Activities	**Maximum funding allowed**
Strategy 1: Primary Prevention of Opioid Misuse and Opioid Use Disorder	$25,000
Training program for medical, dental, and nursing students.	
Implementation of Screening, Brief Intervention, Referral to Treatment (SBIRT) trainings.	
Implementation of the CDC Rx Awareness campaign or other substance use prevention and awareness campaign.	
Implementation of any Substance Abuse and Mental Health Services Administration (SAMHSA) evidence-based substance abuse prevention program.	
Single-day events, including health fairs, community sports events, community rallies, etc.	
Strategy 2: Linkage to Care for Recovery Services and Evidence-Based Treatment for Opioid Use Disorder	$25,000
Targeted outreach of treatment and recovery support services (quick response teams, mobile response teams, etc.).	

Placement of peer recovery specialists in targeted locations (EDs, fire stations, police stations, syringe and non-syringe harm reduction programs etc.)	
Expansion and utilization of transportation services to substance abuse treatment.	
Faith-based recovery efforts.	
Partnership with correctional facilities to create linkage-to-care for recently released persons with substance use disorder.	
Strategy 3: Harm Reduction and Anti-Stigma Promotion	$25,000
Overdose education and naloxone distribution in partnership with a LHD or first responder agency.	
Education and promotion of the Indiana Good Samaritan Law.	
NaloxBox installation in partnership with LHD or first responder agency.	
Single-day events including health fairs, community sports event, community rallies, etc.	
Partnership with correctional facilities to implement harm reduction initiatives.	
Partnership and outreach with local syringe or non-syringe harm reduction programs.	
Strategy 4: Additional Activities	
Partner with a local coroner to provide the ISDH monthly data on suspected drug overdose decedents.*	$10,000
Implementation of an Overdose Fatality Review Team in your county.	$25,000
Implementation of an Overdose Response Project in partnership with hospital or LHD.	$25,000
Implementation of post-overdose protocol in partnership with a hospital.	$75,000

*Applicants interested in implementing this activity should reach out to the points of contact listed in this RFP for additional information.

Activities not authorized to be covered by this funding opportunity.

Program funds cannot be used for purchasing naloxone, implementing or expanding drug "take-back" programs or other drug disposal programs (e.g. drop boxes or disposal bags), purchasing fentanyl test strips, directly funding or expanding direct provision of substance abuse treatment programs, including medication assisted treatment, food (unless being offered during a training, exercise, or other half-day meeting), human research, or purchasing equipment without prior approval from the ISDH. Other inquiries should be sent to the points of contact listed in this RFP.

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