Pilot Project Request for Proposal (RFP)

Background.

In 2023, there were 4,452 unintentional drug overdose deaths. While there was a 9% decrease in the number of deaths from 2023 to 2022, unintentional drug overdoses still remain a priority to address in Ohio. In 2023, illicit fentanyl continued to be the driving force behind Ohio overdose deaths, contributing to 78% of unintentional drug overdoses. To prevent further morbidity and mortality related to substance use disorders, a multi-factored approach is required. The purpose of this funding is to expand and saturate initiatives and activities that support and sustain overdose prevention efforts across the state of Ohio.

The Ohio Overdose Prevention Network (OPN) action group of the Ohio Injury Prevention Partnership (OIPP) announces the availability of funding for up to five (5) innovative Pilot Projects. These projects will span 13 months, beginning in August 2025, and each will be awarded **$10,000 - $25,000** based on the strength of the application.

The Ohio OPN will select recipients based on the merits of their completed proposals and the potential impact of their projects, with priority given to OIPP members.

Scope of Work.

I. Funded proposals will:
    a. Focus on policy, systems and/or environmental change.
    b. Identify local data indicating the need for an intervention.
    c. Propose appropriate intervention(s) that align with best practices and/or provide sufficient support for an innovative intervention.
    d. Increase collaboration among a broad range of community members and institutions.
    e. Align with Ohio OPN mission and vision for Ohio.
    f. Include an evaluation component and sustainability considerations.

II. **Priority will be given to proposals that:**
    a. **Plan to address and educate the general public around overdose prevention strategies and initiatives.**
        i. Examples may include but are not limited to:
            1. Saturation and expansion of overdose prevention and harm reduction educational campaigns in areas identified as a need.
            2. Improving general knowledge of current state policies and legislation.
    b. **Plan to expand harm reduction services to high-risk populations and/or in innovative settings.**
        i. Examples may include but are not limited to:
            1. Increasing the naloxone distribution supplies and/or harm reduction supplies i.e. fentanyl test strips) in areas identified as a need and sustainability strategies.
            2. Staffing and/or contracts for harm reduction service provision within an existing, person-to-person syringe service program (SSP).
    c. **Plan to deploy and expand evidence-based overdose prevention initiatives and strategies at the intersection of public health and public safety.**
        i. Examples may include but are not limited to:
            1. Improving data sharing and use between public health and public safety officials.
            2. Create interprofessional teams (law enforcement, public health, social worker, etc.) to complete targeted street outreach based on overdose hot spots.
            3. Expansion of Quick Response team (QRT) services to community's wo may not have access to resources.
    d. **Plan to expand health navigators' services.**
        i. A health navigator is an individual familiar with the local public health landscape and who work directly with individuals with OUD and/or StUD to ensure they have the tools to address barriers to seeking care and who support people accessing treatment and their retention (and reengagement if

necessary) in substance use disorder (SUD) treatment and care, as well as support access to other services, such as harm reduction and social supports[1].

  ii. Examples may include but are not limited to:
   1. Agencies and/or organizations who already have a health navigator hired may expand services to adopt trauma-informed practices into navigators' workflows to demonstrate an increase in service encounters.
   2. Agencies and/or organizations who already have a hired health navigator may expand and saturate access to wrap around services for individuals who are ready to engage in care and/or treatment. Examples of care and/or treatment may include referrals to housing assistance, treatment facilities, etc.

 e. **Plan to increase evidence-based overdose prevention initiatives within the healthcare system.**
   i. Examples may include but are not limited to:
    1. Expansion of strategies as it relates to increasing access to Medications for Opioid Use Disorder (MOUD) / Medication-Assisted Treatment (MAT).
    2. Improving access to wrap around services for individuals who are ready to engage in care and/or treatment. Examples of care and/or treatment may include referrals to a Primary Care Physician, post-partum services, behavioral health services, etc.

Please note: Applicants are not limited to applying on behalf of a project outlined in the scope of work above and may propose a project in their application. The proposed project should clearly demonstrate the alignment with the Ohio OPN strategic plan as well follow the allowable and unallowable cost list.

Funded Project Requirements.

2025-2026 Pilot Project recipients must:

1. **Program Reports.** Funded projects must submit a monthly program report to the Ohio OPN Coordinator, as required by the Pilot Project requirements by the following dates. Program report will be made available upon award.

Period	Report Due Date
August 1 - 31, 2025	September 5, 2025
September 1 - 30, 2025	October 5, 2025
October 1 - 31, 2025	November 5, 2025
November 1 - 30, 2025	December 5, 2025
December 1 - 31, 2025	January 5, 2026
January 1 - 31, 2026	February 5, 2026
February 1 - 28, 2026	March 5, 2026
March 1 - 31, 2026	April 5, 2026
April 1 - 30, 2026	May 5, 2026
May 1 - 31 2026	June 5, 2026
June 1 – 30, 2026	July 5, 2026
July 1 – 31, 2026	August 5, 2026
August 1 – 31, 2026	September 5, 2026

2. **Invoices and Financial Expense Updates.** Funded projects must submit a quarterly invoice as well as update of expenses to the Ohio OPN Coordinator, as required by the Pilot Project requirements by the following dates.

Payment Amount	Period	Report Due Date
25% of total awarded grant funds	August 1 – November 30, 2025	December 5, 2025
25% of total awarded grant funds	December 1, 2025 – February 28, 2026	March 5, 2026
25% of total awarded grant funds	March 1 – May 31, 2026	June 5, 2026
25% of total awarded grant funds	June 1 – August 31, 2026	October 5, 2026

3. **Attendance and Presentation.** Funded projects must attend Ohio OPN meetings and provide a brief summary of progress and findings. In addition, funded projects will be required to provide a formal presentation of their Pilot Project findings at an Ohio OPN Quarterly meeting identified by the Ohio OPN Coordinator.

4. **General Unallowable Costs.** Funded projects must not use their funding within the unallowable list provided below.
    a. To advance political or religious points of view or for fund raising or lobbying.
    b. To disseminate factually incorrect or deceitful information.
    c. Consulting fees for salaried program personnel to perform activities related to grant objectives.
    d. Bad debts of any kind.
    e. Contributions to a contingency fund.
    f. Entertainment.
    g. Fines and penalties.
    h. Interest or other financial payments (including but not limited to bank fees).
    i. Contributions made by program personnel.
    j. Costs to rent equipment or space owned by the funded agency.
    k. The purchase or improvement of land; the purchase, construction, or permanent improvement of any building (unless allowable by the grant).
    l. Satisfying any requirement for the expenditure of non-federal funds as a condition for the receipt of federal funds.
    m. Training longer than one week in duration, unless otherwise approved.
    n. Contracts for compensation with advisory board members.
    o. Grant-related equipment costs greater than $1,000, unless justified in the budget narrative and approved by ODH.
    p. Payments to any person for influencing or attempting to influence.
    q. Office Furniture (including but not limited to desks, chairs, file cabinets) unless otherwise stated.

5. **Intervention-Specific Unallowable Costs.** Additional unallowable costs based on CDC OD2A guidelines are outlined below.
    a. **Public Safety Partnerships / Interventions.**
        1. Public safety activities that do not include overlap/collaboration with public health partners and objectives.
        2. Purchase of handheld drug testing machines such as TruNarc, Fourier-transform infrared (FTIR)machines, or HPMS machines for the purposes of reducing possible law enforcement exposure to fentanyl.
    b. **Harm Reduction.**
        1. Purchase of naloxone.
        2. Establishing new SSPs.
        3. Infrastructure costs for SSPs that are not associated with the co-location of treatment (e.g., rent, utilities, etc.).
        4. Drug disposal, including the implementation or expansion of drug disposal programs, including drug take-back programs, drug drop boxes, and drug disposal bags.

5. Provision of equipment solely intended for illegal drug use such as cookers/spoons, syringes, and pipes.
6. Procurement of other equipment solely intended for preparing drugs for illegal drug injection.
7. Safe injection sites (controlled environments that facilitate safer use of illicit drugs by providing medical staff, clean facilities, and education.) Developing educational outreach and guidance or materials about supervised/safe injection sites.
8. Purchase of syringes, including pharmacy voucher programs and safe syringe disposal programs.

c. **Community-Based Linkage to Care.**
1. Housing assistance.
2. Food assistance.
3. HIV/HCV and other STD/STI testing.
4. Funding or subsidizing costs associated with programs other than those specifically targeting overdose prevention.
5. Safer sex kits (condoms and lubricant).
6. Childcare and childcare-related purchases (e.g., pack-n-play).
7. Furniture or equipment (purchase or leasing vehicles may be allowable expenses for linkage to care activities).
8. Prevention of adverse childhood experiences (ACEs) as a standalone activity.

To Apply.

An interest call will be held Monday, May 12th from 11a.m. – 12 p.m. This call will provide potential applicants with the opportunity to ask questions and clarify requirements of Ohio OPN Pilot Project funding and/or scope of work. Please see the meeting invite below to attend.

>   **Microsoft Teams** Need help?
>
>   **Join the meeting now**
>
>   Meeting ID: 256 950 768 454 1
>
>   Passcode: Mf3hR2h3
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>   _____
>
>   **Dial in by phone**
>
>   +1 614-721-2972,,569726870# United States, Columbus
>
>   Find a local number
>
>   Phone conference ID: 569 726 870#

Eligible applicants include but are not limited to local units of government (e.g. city and county health departments), hospitals, school districts, first responder agencies, and other nonprofit organizations. Grants will not be awarded to individuals. If previously funded, past performance will be part of the review and selection process.

To request a Pilot Project Application, please email Emily.Ganz@odh.ohio.gov for the necessary documents.

Subrecipients of the **Ohio Department of Health's Drug Overdose Prevention Regional Prevention and Linkages to Care Collaborative (RL) grant programs are not eligible** to apply for this funding opportunity. Please note this also includes partners who receive funding from an RL subrecipient.

Please submit the completed Pilot Project Application to Emily.Ganz@odh.ohio.gov no later than **Friday, May 30, 2025 by 5:00p.m. EST**.

Funding decisions will be announced by **Monday, June 16, 2025** the latest. Pilot projects will be funded from **August 1, 2025 to August 31, 2026.**

Proposals must be typewritten, include all required sections and follow RFP guidelines found on **page 8**.

Application Instructions and Requirements.

To complete the competitive application for Ohio OPN Pilot Projects, complete each of the required application components listed below. Attachments should be named as indicated below.

Please Note: Proposed strategies should not be duplicative of activities already funded through the Ohio Department of Health, Violence and Injury Prevention Section. If similar activities or activities within the same category are proposed, the applicant should differentiate between current work and fully explain how the proposed strategies will be additive and not duplicative.

The following components are required:
A. **Program Narrative**: 5-page limit – named "OPN Pilot Projects-Agency Name-Program Narrative". An outline for the Program Narrative is included below:
   a. Executive Summary.
      i. Identifies lead agency/organization, key personnel, and describes of program.
      ii. Describes the public health problem(s) (problem/need) that the program will address through the proposed project.
      iii. Identifies the burden of health disparities faced by the area and how the proposed project will address them through the scope of work.
      iv. Identifies the priority population for the proposed project.
      v. Identifies services currently offered by agency and/or organization.
      vi. Identifies existing resources, partnerships, barriers, and facilitators that may impact the project.

   b. Description of Applicant / Eligibility / Personnel.
      i. Describes the agency/organization's eligibility to apply; summarizes structure as it relates to the program and, as the lead agency/organization, how the project will be managed.
      ii. Description of agency/organization experience with Violence and Injury Prevention and/or Drug Overdose Prevention.
      iii. Description of existing work including current Violence and Injury Prevention and/or drug overdose prevention services offered.
      iv. Description of additional Drug Overdose Prevention and/or Violence and Injury Prevention funding sources as well as scope of work to ensure efforts will not be duplicative.
      v. Identify all employees working directly on program activities and initiatives as well as qualifications and training as it relates to Drug Overdose Prevention and/or Violence and Injury Prevention.

    c. <u>Methodology.</u>
- i. Description of local health status concern(s) that will be addressed by the project utilizing state and local data sources.
- ii. Provides a thorough explanation as to why the specific project was selected.
- iii. Provides a thorough explanation of how the specific project will address the local health status concern(s).
- iv. How agency/organization will engage priority populations to inform programmatic development.
- v. Provides a thorough explanation of each goal and how it will be intended to achieve.
- vi. Explanation of how the goals relate to the overall importance of the program.
- vii. Explanation of how activities will address identified health inequities.
- viii. Identifies and describes evaluation measures that will be used to determine the overall success of the program.
- ix. Identifies and describes how the identified resources, partnerships, barriers, and facilitators may impact the project.
  1. If utilizing a partnership, roles of the partnership agency and/or organization must be explained.

B. **Workplan**: no page limit – named "OPN Pilot Projects_Agency Name_Workplan_2025".

C. **Itemized Budget**: no page limit – named "Agency Name_Itemized Budget_2025". Applicants must included an itemized budget that is a detailed plan that identifies specific expenses within a category with their corresponding costs. The required Itemized Budget should follow the template provided. However, for the purposes of the application, please summarize how the requested funds will be allocated within the project including the following:
- i. Salary for personnel to implement identified strategies along with the names of staff, if known.
- ii. Implementation funds and known objectives will be directed to.
- iii. Key implementation partners with proposed compensation and contracts to be initiated.
- iv. Prior to completion of the budget section, please review pages 5-6 of the solicitation for unallowable costs.

D. **Letters of Support.** no page limit – named "Agency Name_LOS_2026". Letters of support are not required but encouraged to be included to strengthen an application.