

SOUTHERN PLAINS TRIBAL HEALTH BOARD (SPTHB)

OKLAHOMA AREA TRIBAL EPIDEMIOLOGY CENTER

(OKTEC)

Center for State, Tribal, Local, and Territorial Support

(CSTLTS)

National Center for Injury Prevention and Control

(NCIPC)

Opioid Overdose Prevention in Tribal Communities Supplement

SUB-AWARD PROGRAM

Request for Applications (RFA) No.: CSTLTS-OPIOID-2018-19

Key Dates:

RFP Open Date	December 17, 2018
RFP Close Date	January 25, 2018
Notification of Award	February 8, 2019
Period of Performance	February 8, 2019 – August 31, 2019

Contact:

Amber Martinez, SPTHB CSTLTS Opioid Program Coordinator
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EXECUTIVE SUMMARY

The Southern Plains Tribal Health Board (SPTHB), Oklahoma Area Tribal Epidemiology Center (OKTEC) has received an opioid overdose prevention grant known as the Opioid Overdose Prevention in Tribal Communities Supplement and is accepting proposals for Opioid Overdose Sub-Award prevention programs for federally recognized tribes and non-profit tribal organizations located within Oklahoma.

The purpose of the Sub-Award program is to provide funding to tribes and non-profit tribal organizations for efforts related to opioid overdose prevention. These include, improving opioid-related health data, improving health systems response to the opioid crisis, implementing evidence-based strategies, and increasing partnerships for public health impact in Native communities.

The Opioid Overdose Sub-Award prevention program will also bring opioid overdose prevention training and education to Tribal organizations, schools, communities, parents and caretakers, prescribers, and their patients.

The SPTHB-OKTEC will provide funding through a competitive process to federally recognized tribes and non-profit tribal organizations, contingent on funding availability, with a maximum amount per award of \$60,000 per year renewable for up to three (3) years. The first year will focus on strategic planning. Each tribe or non-profit tribal organization is limited to one (1) award per funding year. Funding for the Opioid Overdose Sub-Award prevention program is through the National Center for Injury Prevention and Control (NCIPC), Division of Unintentional Injury Prevention's Opioid Overdose Prevention in Tribal Communities Supplement, which is available through the Tribal Public Health Capacity Building and Quality Improvement Umbrella Cooperative Agreement funded by the Center for Disease Control and Prevention.

Opioid Overdose Sub-Award prevention program funding is intended to address the critical need for public health prevention and intervention against the opioid crisis by directly funding federally recognized tribes and non-profit tribal organizations. Selected sub-awardees will participate in the strategic planning process, will work with partners to implement safer prescribing practices and will help to facilitate the use of peer recovery support specialists in their community. They will also work with partners to improve the quality of current sources of opioid overdose data, such as the prescription monitoring program and ensuring that tribes and tribal health organizations receive culturally appropriate training on the use of fatal opioid overdose prevention strategies.

Awardees will receive a maximum of \$60,000 through a cost reimbursement, deliverables-based contract, whose terms will be negotiated between SPTHB-OKTEC and the sub- awardee.

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1. FUNDING OPPORTUNITY DESCRIPTION

A. Purpose

The opioid overdose epidemic is affecting every part of the United States, with Tribal communities being hit the hardest. Deaths from prescription opioids and illicit opioids for American Indians and Alaska Natives (AI/AN) are higher than the national rate. In the state of Oklahoma, the age-adjusted rate for opioid overdose death among AI/AN is 23.8 compared to 21.2 for their white counterparts. In addition to this overdose death data, there were 749 Native Americans who were hospitalized for opioid related causes. The purpose of this funding opportunity is to address the critical need for public health prevention and intervention in Indian Country. The Opioid Overdose Sub-Award prevention program will work with partners to strategically address this crisis through implementation of effective public health strategies.

The sub-award program aims to improve opioid-related health data, improve health systems response to the opioid crisis, implement evidence-based strategies, and increase partnerships for public health impact in Native communities.

B. Roles

Role of the OKTEC: The current SPTHB-OKTEC CSTLTS Opioid program staff including the Program Coordinator, Epidemiologist, Public Health Specialists, Program Evaluator, and subject matter expert, will serve as active partners in the implementation of the sub-awardees projects to provide guidance and technical assistance and help sub-awardees achieve program objectives and project outcomes. The SPTHB- OKTEC's roles and responsibilities include: Monitoring and reviewing progress of projects; monitoring development and collection of process and outcome data from sub-awardees; ensuring compliance with data/performance measurement requirements; ensuring the projects collaboration with key partners and stakeholders; providing guidance in defining new strategic directions; providing support services for training, evaluation, and data collection; arrangement of meetings designed to support key sub-awardee activities; and review of key documents central to the project's success, including review and approval of plans, budgets, and other deliverables.

Role of the sub-awardees: Sub-awardees are expected to participate and collaborate fully with SPTHB-OKTEC staff in the conduct and evaluation of this cooperative agreement. Sub-awardees responsibilities include: compliance with all aspects of the terms and conditions of the sub-award agreement; collaboration with SPTHB-OKTEC staff in assessment, capacity building, strategic planning and implementation of strategic plan activities; ongoing monitoring, quality improvement, and evaluation tasks; documentation of all system-wide changes stemming from this sub-award program; and responding to requests for all appropriate program-related data.

C. Expectations

The following are expectations of selected Sub-Awardees. These expectations must be included or considered when writing the application narrative and work plan.

Strategic Areas: Each application narrative and work plan must include one or more of the following strategic areas:

- Tribal Public Health Systems Infrastructure – activities to improve tribal public health operational capacity, such as policies and plans, administration and management, and quality improvement.
- Tribal Public Health Workforce – Activities to improve tribal public health leadership and workforce competencies, recruitment, and retention.
- Tribal Data and Information Systems – Activities to increase the use of data and information systems.
- Tribal Public Health Programs and Services – activities to strengthen the ability to meet public health needs in a comprehensive manner.
- Tribal Public Health Resources and Communication – activities to improve provision of public health resources that are readily available and accessible throughout Indian Country.
- Tribal Public Health Partnerships – activities to improve development and maintenance of multi-sector, results driven partnerships at various levels.

Each application narrative and work plan must include at least 3-4 of the following outcomes:

- Provide culturally-appropriate training and technical assistance on the coordination of care and linking people to treatment services.
- Increased activities that strengthen the ability to meet public health needs in a comprehensive manner.
- Increase capacity and coordination of multi-sector partners to generate collective public health impact within tribal healthcare system (i.e. increase tribal healthcare systems capacity and utilization of CDC safer opioid prescription practices).
- Improved health systems infrastructure and capacity to implement safer prescribing practices.
- Increase and improve public health resources readily available in Indian country
- Improve collection, maintenance, analysis, reporting and dissemination of tribal public health data
- Increase the use of data to inform evidence-based and/or community-informed and culturally-appropriate prevention strategies and programmatic decision-making.

Each application narrative and work plan must include all of the following activities and objectives:

- Participation in creating an actionable strategic plan to address the opioid crisis with measurable objectives.
- Facilitate the use of peer recovery support specialist (PRSS) within Tribal communities. These will be both PRSS certified and will be trained in cultural awareness.
- Work with partners to implement CDC safer opioid prescription practices.
- Work with tribal health professionals and other clinical staff working in tribal communities on improving infrastructure and capacity to implement safer prescribing practices.

- Develop and/or provide culturally-appropriate public health resources and communication tools such as PSA videos, education materials, and various trainings in opioid overdose prevention.
- Work with partners to improve the quality of current sources of opioid overdose data, such as the prescription monitoring program.
- Work with partners and key data stakeholders to improve data sharing and collaboration.
- Work with partners to provide culturally-appropriate opioid overdose related trainings to program staff and community members.

2. ELIGIBILITY

Eligible tribal applicants are limited to the 39 federally recognized tribes residing within Oklahoma. Non-profit tribal-serving organizations residing within Oklahoma are also eligible. SPTHB-OKTEC will review qualifications of not for profit tribal entities to determine eligibility.

NCIPC Division of Unintentional Injury Prevention requires that Opioid Overdose Prevention in Tribal Communities grantees address strategic planning in the first year. In addition, it is recommended that applicants have experience with prescription opioid overdose or opioid overdose public health programs and experience implementing effective public health action through a multi-agency approach. Finally, this sub-award opportunity will only be open to tribes and non-profit tribal organizations located within Oklahoma.

The SPTHB-OKTEC CSTLTS program staff will require attendance to some trainings, conferences, and meetings to be determined during strategic planning.

The page limit for the SPTHB-OKTEC CSTLTS Opioid Sub-Award narrative application is ten (10) pages, excluding cover page, budget, work plan, appendices, and letters of support. (Section IV) The total application should not exceed twenty (20) pages.

3. SUB-AWARD AMOUNTS

Maximum awards for the SPTHB-OKTEC CSTLTS Opioid Sub-Award program are limited to \$60,000. Each tribe and non-profit tribal organization is limited to one (1) award per year.

Funding is competitive and shall be awarded to tribes and non-profit tribal organizations for efforts that address parameters in the preceding sections. Sub-awards will be prioritized through a set of scoring criteria listed in Section IV.

4. APPLICATION SUBMISSION AND TIMELINE

RFP Open Date	December 17, 2018
RFP Close Date	January 25, 2018
Notification of Award	February 8, 2019
Period of Performance	February 8, 2019 – August 31, 2019

A. Application Guidelines and Funding Criteria

Applications will be reviewed by a steering committee. Each application will receive a point score from 0 to 80 points.

- Program Overview (10pts)
- Statement of Need (10pts)
- Proposed population coverage and diversity (10pts)
- Formulate goals, objectives, activities planned to meet outlined expectations (10pts)
- Comprehensive approach (10pts)
- Budget (10pts)
- Evaluation plan (10pts)
- Sustainability (10pts)

Note: The steering committee may recommend full or partial funding of any project. Not all submitted applications will be funded.

B. Application Guidelines

An electronic version (PDF, Word doc) of the proposal, organized as shown below, must be received by the SPTHB-OKTEC by 5:00 p.m. CST on the stated deadline. Applicants not meeting these requirements or not meeting formatting may be considered unresponsive and eliminated from scoring. The application should be submitted, as follow:

- 1) Font: Times New Roman; black font; size 12, single spaced
- 2) Margins: one inch margins (top, bottom, left, and right) for all pages,
- 3) Cover letter (to include tribal organization name, date, contact info. Does not count toward the ten-page limit, template attached),
- 4) Project narrative (not to exceed ten pages) to include:
 - Overview and scope of project/program
 - Statement of need
 - Reaching target population
 - Include working with target population, families, and communities
 - Proposed goals, objectives, activities to meeting outlined expectations
 - Include participation of community members, families, tribal leaders, and spiritual advisors in planning, capacity building, and implementation
 - Evaluation plan
 - Project personnel
 - Any additional components you see as important
- 5) Budget (does not count toward the ten-page limit, template attached)
- 6) Work plan (does not count toward the ten-page limit, template attached)
- 7) References (does not count toward the ten-page limit),

- 8) Appendices (does not count toward the ten-page limit)
- 9) Letters of support/commitment are encouraged and do not count toward the ten-page limit.

Submit electronic application to:

Amber Martinez, Program Coordinator: amartinez@spthb.org

5. FUNDING RESTRICTIONS

CDC grant funds must be used for purposes supported by the program and may **not be used** to:

- Opioid Financial Management Requirements and Exceptions - Recipients are required to coordinate activities funded under this guidance with all other CDC-funded and federally funded opioid prevention activities to ensure alignment and reduce duplication. Specifically, recipients are encouraged to coordinate plans as applicable with the single state agencies for substance use disorder services in their jurisdictions.
- Direct Assistance (DA) - Direct assistance is not available through this cooperative agreement. Overlap in projects, budget items, or commitment of effort: • Funds cannot be used for items covered by other federal sources. • Funds cannot be used to match funding on other federal awards. Provide services to incarcerated populations (defined as those persons in jail, prison, detention facilities, or in custody where they are not free to move about in the community).
- Unallowable Costs:
 - Research
 - Purchase of naloxone
 - Purchase of syringes
 - Drug disposal programs (drop-boxes, bags or other devices, and/or take-back events) are not permissible under this funding opportunity
 - Clinical care (except as allowed by law)
 - Publicity and propaganda (lobbying)
 - Funds cannot be used for the preparation, distribution, or use of any material (publicity/propaganda) or to pay the salary or expenses of grants, contract recipients, or agents that aim to support or defeat the enactment of legislation, regulation, administrative action, or executive order proposed or pending before a legislative body, beyond normal, recognized executive relationships. See Section VI. Revised Work Plan and Budget Narrative Submission for more information.
- See [http:// www.cdc.gov /grants /additional requirements /index.htm l#ar12](http://www.cdc.gov/grants/additional_requirements/index.html#ar12) for detailed guidance on this prohibition and [http://www.cdc.gov/ grants /documents/Anti- Lobbying _Restrictions_ for _CDC_ Grantees July _2012.pdf](http://www.cdc.gov/grants/documents/Anti-Lobbying_Restrictions_for_CDC_Grantees_July_2012.pdf)

6. COVER LETTER

Southern Plains Tribal Health
Board Tribal Epidemiology Center
CSTLTS Sub-Award Application

1. Sub-recipient Name (must match registered name in DUNS):
2. Sub-recipient DUNS number:
3. Name of Contact and title:
4. Contact address:
5. Telephone number:
6. Fax number:
7. E-mail:
8. Federal Tax Identification Number (FEIN):
9. Signature of person authorized to sign on behalf of organization:

Print name: _____

Title: _____

Date: _____

7. BUDGET INSTRUCTIONS

Each applicant must submit a budget for no more \$60,000. Drug disposal programs such as drop-boxes, bags or other devices, and/or take-back events are not permissible with this funding opportunity. Purchasing naloxone/Narcan is not permissible with this funding opportunity. Funds from this cooperative agreement can be used to connect care but cannot provide the care itself. Funds may coincide with the purpose, intent, and expectations outlined in this RFP. In order to avoid duplication of Indian Health Service funds, health system interventions in this cooperative agreement are intended for tribally-run clinics.

8. BUDGET TEMPLATE

Budget Line Items	Description Detail	Amount
Personnel/Salary	Must include 1 Peer Recovery Support Specialist (PRSS). If PRSS is not intended to be staff member, PRSS must be listed as a contractual cost.	
Fringe Benefits		
Travel to the SPTHB-OKTEC Public Health Conference	Must include: 2019 Tribal Public Health Conference.	\$500 (example amount)
Travel	Any other in state/out of state travel to be entered here.	
Training		
Supplies		
Contractual		
Indirect Cost		
Other		
Total Project Cost		\$

9. WORK PLAN TEMPLATE

Strategic Planning in the first year is a requirement for this funding opportunity and therefore was filled out for applicants using this work plan template. Please refer to the Expectations section of this document when filling out this template.

<u>Strategic Area:</u> Tribal Public Health Partnerships				
<u>Period Performance Outcome:</u> A strategic plan is in place that has identified need and established multi-sector partnerships to address capacity building and quality improvement			<u>Outcome Measure:</u> Number of organizations that identify community needs and assets and address public health needs through collaborative strategic processes.	
<u>Strategies and Activities</u>	<u>Process Measures</u>	<u>Outputs</u>	<u>Responsible Position</u>	<u>Completion Date</u>
1. Creating an actionable strategic plan to address the opioid crisis with measurable objectives.	Number of organizations involved in strategic planning. Number of tribal partners involved in strategic planning.	Have created an actionable strategic plan to address the opioid overdose epidemic with measurable objectives.		
1a. Identify and reach out to partners, stakeholders, and collaborative agencies to ensure an inclusive and comprehensive plan.		Obtain buy-in and MOUs with key partners		
1b. Conduct a needs assessment with partners and communities to identify areas of need and currently available resources.		Develop measures to evaluate program achievements		
<u>Strategic Area:</u>				
<u>Period Performance Outcome:</u>			<u>Outcome Measure:</u>	
<u>Strategies and Activities</u>	<u>Process Measure</u>	<u>Outputs</u>	<u>Responsible Position</u>	<u>Completion Date</u>
<u>Strategic Area:</u>				

<u>Period Performance Outcome:</u>			<u>Outcome Measure:</u>	
<u>Strategies and Activities</u>	<u>Process Measure</u>	<u>Outputs</u>	<u>Responsible Position</u>	<u>Completion Date</u>
<u>Strategic Area:</u>				
<u>Period Performance Outcome:</u>			<u>Outcome Measure:</u>	
<u>Strategies and Activities</u>	<u>Process Measure</u>	<u>Output</u>	<u>Responsible Position</u>	<u>Completion Date</u>
<u>Strategic Area:</u>				
<u>Period Performance Outcome:</u>			<u>Outcome Measure:</u>	
<u>Strategies and Activities</u>	<u>Process Measure</u>	<u>Output</u>	<u>Responsible Position</u>	<u>Completion Date</u>