



GREAT LAKES INTER-TRIBAL EPIDEMIOLOGY CENTER

A program of Great Lakes Inter-Tribal Council, Inc.

Request for Proposal Announcement: Strengthening Public Health Systems and
Services in Indian Country Overdose Prevention Program (ODP) Supplemental
Funding

Application Due Date: 3/11/2024

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Section 1. Overview Information

Key Dates:

RFP Open Date: February 9, 2024
RFP Close Date: March 11, 2024
Project Name: Overdose Prevention Program (ODP)
Year 1 Period of Performance: March 22, 2024 – August 30, 2024
Project Period of Performance: August 31, 2023 – August 30, 2025
Year 1 Award Amount: Up to \$50,000
Number of awards: 11

Applications must be successfully submitted to Dr. Christina Denslinger (cdenslinger@glitc.org) by 4:30 pm Central Daylight Time on the deadline date. Applications will be reviewed, and award notices will be issued within two weeks of the application submission deadline.

Technical Assistance:

An informational webinar will be held on Thursday, February 22, 2024, at 10 AM CT/11 AM ET; webinar information is listed below.

Thursday, February 22, 2024, at 10 AM CT/11 AM ET

Topic: Overdose Prevention Program Grant Application Informational Call
Time: Feb 22, 2024 10:00 AM Central Time (US and Canada)

Join Zoom Meeting

<https://us02web.zoom.us/j/82998805262?pwd=Wk42ZC9OK1NqZV15TVRVeVB0UVJsQT09>

Meeting ID: 829 9880 5262

Passcode: 165024

Dial by your location

- +1 646 558 8656 US (New York)
- +1 646 931 3860 US
- +1 312 626 6799 US (Chicago)

Find your local number: <https://us02web.zoom.us/j/kc93N6O1aU>

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Contact Information:

Christina Denslinger, PhD
Program Director, Overdose Prevention Program (Strengthening Public Health)
Great Lakes Inter-Tribal Council, Inc.
Phone: 715-588-1067
Email: cdenslinger@glitc.org

Section 2. Full Text

I. Background and Purpose

In 2023, the Great Lakes Inter-Tribal Epidemiology Center (GLITEC) was awarded the Strengthening Public Health Systems and Services from the Centers for Disease Control and Prevention (CDC). The long-term goal of the Strengthening Public Health Systems and Services in Indian Country is to strengthen public health capacity and infrastructure within Tribes and urban Indian communities in the Indian Health Service (IHS) designated Bemidji Area (which includes Michigan, Minnesota, Wisconsin, and Chicago).

To support public health capacity and infrastructure, GLITEC was also awarded supplemental funding for Overdose Prevention. The purpose of this supplement funding is to strengthen Tribal and urban Indian communities' overdose prevention efforts through Tribal overdose surveillance and expanding access to culturally appropriate programs addressing health disparities and social determinants of health.

GLITEC invites Tribes and urban Indian programs in the Bemidji Area to submit applications for a competitive Overdose Prevention Program (ODP) grant. Each Tribe or organization is limited to submitting one application for the opportunity to receive ODP funding. The grant program under ODP is intended to provide multi-year funding to Tribes and urban Indian programs for a project that aims to address substance use and overdose prevention. The project will need to incorporate 1) a work plan between the applicant (Tribe/urban Indian program) and GLITEC and 2) the completion of at least two of the five project strategy components (listed below).

Grant activities must align with at least two of the five program strategy components and their activities to be eligible for the awarded funding. Strategy components and examples of potential activities are listed below.

Strategy Component 1: Community-Based Cultural Interventions to Address Protective and Risk Factors

Activities may include:

- Programs to promote healing from historical and intergenerational trauma.
- Activities to promote community and family connectedness.
- Improving indigenous social determinants of health to mitigate risk factors for overdose.
- Programs to promote positive childhood experiences (PCEs) within families and/or communities for primary prevention of overdose (e.g., offer PCEs education, skill building,

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and support to new parents during home visits or with parents of children at Head Start events, etc.).

- Programs to promote and enhance protective factors to prevent overdose (cultural and traditional practices, etc.)
- Programs to promote substance use prevention locally among people at high risk for overdose (youth, veterans, etc.). For example, developing or promoting youth Advisory Boards (YAB) or Community Advisory Boards (CAB) that engage community members affected by substance use disorder.

Strategy Component 2: Improve Overdose Data and Surveillance

Activities may include:

- Activities designed to build/or strengthen the capacity to collect and analyze local overdose data to identify emerging trends and potential overdose hotspots.
- Build capacity and infrastructure to develop local overdose surveillance systems using available data sources (law enforcement, local hospital/clinic, EMS, etc.).
- Establish data use agreements with outside agencies (state and local health departments, law enforcement, EMS, etc.).
- Develop products to highlight and distribute overdose data to your community (data briefs, data reports, presentations, data dashboards, etc.).

Strategy Component 3: Health Systems Interventions

Activities may include:

- Implementation and evaluation of the CDC Clinical Practice Guideline for Prescribing Opioids for Pain – United States, 2022.
- Building and implementing health system-wide clinical capacity to screen, diagnose, and support (or connect to) trauma-informed longitudinal care for opioid and stimulant use disorder and support recovery.
- Link people in need, like youth or veterans, with care and harm reduction resources. This includes peer navigators, certified peer recovery specialists, and community health workers who encourage evidence-based treatment and accessibility for persons who use drugs.
- Educating patients and community members on the use of naloxone.
- Enhancing linkages to care for those with substance use disorder (SUD) to ensure that vulnerable patients are receiving naloxone, referred to medical assisted treatment (MAT), provided “warm hand-offs to community-based recovery organizations, and are linked to community health workers/patient navigators/case managers at this critical time of care.

Strategy Component 4: Public Safety Partnerships and Interventions

Activities may include:

- Linkages to care and/or harm reduction, such as pre-arrest or pre-trial diversion, which use interactions with law enforcement as an opportunity to refer individuals with substance use disorder to treatment.
- Promote and improve data sharing between public safety and public health partners.
- Implementing systems that utilize arrest and/or seizure data to identify the possibility of a spike in overdose and to inform response and communication protocols, excluding the linkage of specific overdose cases across data sets.

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- Implementing promising practices that have demonstrated some impact on overdose and associated risk factors and may include diversion and deflection programs, post-overdose outreach programs, and linkage to care and support services.

Strategy Component 5: Other Innovative Community-Based Strategies

Activities may include:

- Harm reduction strategies (excluding the purchase of naloxone and syringes)
- Improving access to and delivery of harm reduction services to reduce overdose. For example, providing fentanyl test strips, providing information and education about the local drug supply and safer drug use, and providing informational resources on syringe exchange programs, and naloxone distribution sites.
- Creating and disseminating education and communication materials to increase awareness of and access to harm reduction resources such as syringe service programs (SSPs), combat stigma, and change social norms around harm reduction.
- Initiating, expanding, and supporting programs and outreach by community health workers/navigators (e.g., people with lived experience, case managers) to promote access to harm reduction services (such as SSPs) and to link people to care from harm reduction services, as appropriate.
- Programs to reintegrate community members returning from substance use disorder treatment programs.
- Using community health workers/navigators to link people to care and other services and implementing monitoring programs following discharge from acute care to prevent treatment interruption.
- Supporting retention in care by creating peer support groups with an emphasis on peers with lived experiences.
- Supporting linkage to ancillary services such as job skills training, training/employment, cultural community centers, and transportation through partnerships or direct staffing support.
- Other relevant strategies to prevent overdose not listed elsewhere.

Grantees are encouraged to select projects that adapt and implement Tribal best practices and culturally informed interventions for substance use and overdose prevention and recovery with consideration for emergent circumstances influencing substance use behaviors.

II. Funds Available and Anticipated Number of Awards

GLITEC anticipates funding for up to eleven Tribes and urban Indian programs in the Bemidji Area. Selected Tribes and/or organizations will be awarded up to \$50,000 per award for the first year. Each tribe or organization is limited to one ODP award.

Ceiling of Individual Award Range: \$50,000

Anticipated Award Date: March 22, 2024

Year 1 Budget Period Length: March 22, 2023 – August 30, 2024

Project Period of Performance Length: August 31, 2023 – August 30, 2025

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III. Submission Requirements

Electronic copies are the preferred submission method and should be emailed before 4:30 pm (CDT) on March 11, 2024, to Dr. Christina Denslinger (cdenslinger@glitc.org). Submissions will be acknowledged with an email confirmation.

IV. Eligible Applicants

The following recipients may apply:

1. Federally recognized Native American Tribes located in Michigan, Minnesota, or Wisconsin.
2. Urban Indian program receiving Indian Health Service funding under Title V of the Indian Health Care Improvement Act, PL 94-437 Located in Chicago, Illinois, Detroit, Michigan, Milwaukee, Wisconsin, or Minneapolis, Minnesota.

V. Funding Requirements

Funds may be used for project-related costs, including:

- Staff expenses, such as salaries and benefits
- Clerical staff for time directly related to support of the project
- Project support costs (supplies, telephone, space costs, copying and printing, consultant and contractual services, IDC, programming, etc.)
- Travel
- Linkage to care (e.g., costs related to transporting individuals from an ED or other location to a program as part of a “warm handoff,” peer recovery coaches/peer navigators, and case management systems)

Funds may not be used for:

- Entertainment
- Lobbying
- Debt reduction
- Illegal activity or activity contrary to the Centers for Disease Control and Prevention (CDC) grant

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Below are some common examples of allowable and unallowable cost categories.

Cost Category	Examples	Notes and Restrictions
Capital Expenditures	<ul style="list-style-type: none"> • Vehicles • Buildings • Land 	Unallowable
Consultant and Contractual Services		Allowable provided the following information is included: <ul style="list-style-type: none"> • Name of consultant. • If applicable, provide the organizational affiliation. • Nature or consultant services to be rendered and specific outcomes. • Relevance of service to the project • Expected rate of compensation. • Method of accountability.
Direct Clinical Services	<ul style="list-style-type: none"> • Naloxone/Narcan • Rx Medications • Medication-Assisted Treatment • Rehabilitation/Detox Services 	Unallowable
Drug Disposal Programming	<ul style="list-style-type: none"> • Drug disposal bags • Lockboxes • Drug take-back events • Syringe exchange/purchasing 	Unallowable
Entertainment	<ul style="list-style-type: none"> • Includes social, amusement, and diversion activities • Tickets to shows, sporting events, etc. • Costs associated with entertainment (e.g., meals, lodging, rentals, transportation) 	Unallowable
Equipment	<ul style="list-style-type: none"> • Any single item over \$5,000 	Needs prior approval and must align with grant objectives.
Food		The use of grant funds to purchase meals for activities such as meetings is not allowable. However, meals can be purchased, with approval, in accordance with a training that fulfills grant objectives.

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Incentives/gifts	<ul style="list-style-type: none"> • Gas card • Food voucher • Gift Card • Cultural gifts (E.g. moccasins, baskets, beadwork) 	<ul style="list-style-type: none"> • Amount per incentive/gift recommended not to exceed \$30-\$35. • GLITEC advises that gift cards prohibit the purchase of alcohol, tobacco, or firearms. • Cannot be used to pay for medical treatment.
Indirect Cost (IDC)		Allowable, provided that a current IDC agreement is submitted.
Staff Expenses	<ul style="list-style-type: none"> • Salary • Benefits • Fringe 	Allowable
Supplies	<ul style="list-style-type: none"> • General office supplies • Stationary • Computers 	Allowable, provided that the supply purchased is necessary to carryout sub-award activities.
Training	<ul style="list-style-type: none"> • Staff trainings • Community-based trainings 	Allowable, provided that the training is related to sub-grant activities.
Travel	<ul style="list-style-type: none"> • Transportation • Lodging • Per Diem 	Allowable, provided that the employees are traveling on official business.

Applicant activities should support the original intent of the RFP. Please see Appendix D for an example budget template.

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VI. Proposal Guidelines

Instructions for what to include in each section are provided below. The review criteria are included to clarify the review process.

- Use a 12-point type font
- Number the pages

Each proposal must contain the following components:

- 1. Cover Sheet (Appendix A)**
- 2. Table of Contents**
- 3. Application Form (Appendix B)**
 - i. Complete all sections.
 - ii. The proposed project should be focused on overdose prevention related to opioids and other substance use and include at least one data measure.
 - iii. Describe any experience implementing substance use and overdose prevention programming, including with data or surveillance.
 - iv. Describe your capacity to implement substance use and overdose prevention activities, including project management, staffing, or other available resources.
 - v. State the need for and the purpose of the project clearly.
 - vi. Describe your proposed project, including how it will meet identified needs, the selected strategy components, and measurable goals and objectives.
- 4. Workplan (Appendix C)**
 - i. Applicants should use the workplan template to document their detailed work plan for Year 1 of the ODP project award.
 - ii. The applicant's work plan should include work in at least two strategy component areas. The template is pre-populated with the five strategy components.
 - iii. All activities must be related to substance use, overdose prevention, and/or recovery,
- 5. Budget (Appendix D)**
 - i. Provide a budget covering the performance period of the proposed project in the table format, accompanied by a simple budget narrative/justification that clearly indicates how the funds will be spent.
 - ii. A sample budget template is included in the RFP (Appendix D). However, applicants may use their own budget format.
 - iii. Budget definitions and descriptions (for the narrative) are included in the Appendices.

Please contact Dr. Christina Denslinger cdenslinger@glitc.org or Mr. Jacob Riemer jriemer@glitc.org for electronic copies of these forms.

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VII. Review Process and Scoring Guidelines

The evaluation (review) criteria are included below to clarify the review process. Each application will be scored and ranked individually by the application review committee using the evaluation criteria below. Any proposal which does not comply with the proposal guidelines will not be reviewed.

SCORING GUIDELINES	POINTS
Completed cover page with contact information	5
Clear description of experience implementing substance use and overdose prevention programming.	10
Clear description of capacity to implement substance use and overdose prevention activities.	5
Clear, identified need for project	5
Project Description, Purpose, and Goals (25 points)	
Clear, detailed description of proposed two-year project	10
At least two strategy components identified	5
Specific, measurable, and attainable goals and objectives identified	5
Description of how the proposed project meets identified needs	5
First Year Workplan and Evaluation (30 points)	
Objectives are measurable and attainable	5
Activities are clear, attainable, and a good fit to accomplish goals and objectives	15
Outcomes are realistic and attainable	5
Performance measure/data source(s) for short-term outcomes clear and reasonable	5
Budget (20 Points)	
<i>Expenditures must:</i>	
Be reasonable and clearly related to the project's goal(s) and activities	5
Provide budget justification which further describes the project activities	5
Proposed expenditures are reasonable and sufficient to support the project activities	10

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VII. Award Administration

- i. Notification of the awards will be sent out via email and letter by March 22, 2024. If revisions are needed, the GLITEC program staff will contact successful applicants with revisions to work plans and budgets soon after award letters are sent. At that point, tribes and urban Indian programs will enter into a contract with GLITC for their proposed budget and work plan.
- ii. GLITEC Program staff will be available for all technical assistance needs relating to the project for each tribe or urban Indian program.
- iii. Once the contract with GLITC is signed, successful applicants will participate in project and fiscal monitoring activities as defined and delineated in the contract terms and conditions. Additionally, an agreement outlining the responsibilities and accountabilities of each partner will be included in the contract.

IX Appendices

Appendix A. Cover Page completely filled out.

Appendix B. Application form all sections must be completed.

Appendix C. Workplan template includes the following:

- **Strategy Component:** Specify work in at least two strategy component areas. The template is pre-populated with the strategy components.
- **Goals and Objectives:** Specify the project goal/objective for each strategy component. These should match or align closely with the goals and objectives proposed in the application form.
- **Long-Term Outcomes:** Please list what the outcomes you expect to see at the end of end of two-year period as a result of your project.
 - *Examples:* Reduction in fatal (or non-fatal) overdoses, improved capacity to develop public health programs and services to address overdose, improved capacity to implement public health programs and services to address overdose, improved capacity to evaluate public health programs and services to address overdose, etc.
- **Activities:** Please list key activities that you will do to address overdose prevention.
 - *Examples:* Programs or events promoting community and family connectedness, supporting retention in care, improving data collection and surveillance systems, enhancing linkage to care/harm reduction, etc.
- **Short-Term Outcomes:** Please list the outcomes you expect to see at the end of the first project year as a result of your activities.

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- *Examples:* Increase in knowledge, skills, or beliefs, increase in people receiving linkage to care, increase in the proportion of partners engaged in data sharing, etc.
- **Lead Person(s), Supporting Parties:** Include the names of lead personnel at your organization in charge of activities, as well as any key contributing outside partners and contractors.
- **Timeframe:** Include the approximate period in which the activity will take place.
 - *Example:* September 1 – November 1, 2024

Appendix D. Budget includes the following:

Personnel & Fringe Benefits

For each requested position, provide the following information: name of staff member occupying the position, annual or hourly salary, percentage of time or hours budgeted for this program, and total salary requested. Also, provide a justification and describe the scope of responsibility for each position, relating it to the accomplishment of program objectives. Indicate the fringe rate applicable to each position.

Example:

Jodi Staff Person (1,000 hours @ \$25 per hour = \$25,000) will provide leadership and overall direction for the proposed project. She will supervise Samuel Staff person, ensure the deliverables are met, and verify contract adherence. Ms. Staff Person's fringe benefit rate is 25% per the organization's policy.

Samuel Staff Person (300 hours @ \$18 per hour = \$5,400) will provide day-to-day management and coordination of the project. This includes coordinating the production of education and outreach materials, writing newsletter and newspaper articles, producing the materials, submitting reports, managing funds, planning and implementing dissemination of the project and materials countywide, and planning for sustainability. Mr. Staff Person's fringe benefit rate is 25% per the organization's policy.

Consultants/Contracts

This category is appropriate when hiring an individual to give professional advice or services (e.g., training, expert consultant, etc.) for a fee but not as an employee of the Tribal Clinic. Please provide the following information for consultants:

- A. Name of consultant: identify the name of the consultant and describe his or her qualifications. Or provide a scope of work for contractual services, which includes the qualifications required to receive the award.
- B. If applicable, provide the consultant's organizational affiliation.
- C. Nature of consultant services to be rendered and describe in outcome terms, including the specific tasks to be completed and specific deliverables.
- D. Relevance of service to the project: describe how the consultant services relate to the accomplishment of specific program objectives.
- E. Expected rate of compensation: specify the rate of compensation for the consultant

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(e.g., rate per hour, rate per day). Include a budget showing other costs such as travel, per diem, and supplies.

- F. Method of accountability: describe how the progress and performance of the consultant will be monitored.

Supplies

Individually list each item requested. Show the unit cost of each item, the number needed, and the total amount. Provide justification for each item and relate it to specific program objectives.

Travel

Dollars requested in the travel category should be for **staff members' travel only**.

Example:

The Project Coordinator will make an estimated 10 trips to local sites to engage community partners @ an average of 20 miles @ \$0.625 per mile = \$125.

Other

This category contains items not included in the previous budget categories. Individually list **each** item requested and provide appropriate justification related to the program objectives.

IDC

If requesting IDC, attach a copy of your community's current IDC agreement to this proposal.

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APPENDIX A – Cover Page

Organization Information

Organization Name:	
Signature Authority:	
Mailing Address:	
City/State/Zip:	

Primary Staff Contact Information

Name	
Phone	
Email	

Secondary Staff Contact Information

Name	
Phone	
Email	

Accountant Contact Information

Name	
Phone	
Email	

Amount requested:	
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APPENDIX B – Application Form

Name of Proposed Project	
Type of Applicant	<input type="checkbox"/> Federally recognized Native American Tribe located in Michigan, Minnesota, or Wisconsin. <input type="checkbox"/> Urban Indian program receiving Indian Health Service funding under Title V of the Indian Health Care Improvement Act, PL 94-437, located in Chicago, Illinois; Detroit, Michigan; Milwaukee, Wisconsin; or Minneapolis, Minnesota.
Brief Description of population served by the applicant	
Anticipated number of individuals who will be served	

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Please briefly describe your organization's experience implementing substance use and overdose prevention programming. Please include any past, current, or pending activities, including data and surveillance. (500 words or less)

Please describe your capacity to implement substance use and overdose prevention activities, including project management, staffing, or other available resources. (300 words or less)

Please describe the need for funds to support efforts around overdose prevention. (300 words or less)

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**Please describe your proposed project. Please include how the project will meet your identified needs, the selected component strategies, measurable goals and objectives.
(750 words or less)**

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APPENDIX C

ODP Work Plan Template Year 1 Project Period: 8/31/2023 – 8/30/2024

Instructions:

- Applicants should use this template to document their detailed work plan for Year 1.
- The applicant's work plan should include work in at least two strategy component areas. The template is pre-populated with the strategy components.
- All activities must be related to substance use, overdose prevention, and/or recovery.

For each strategy listed on the template, complete the following information:

- **GOALS/OBJECTIVES:** Specify the project goal/objective for each strategy you choose. These goals and objectives should align with the goals and objectives proposed within the application form.
- **LONG-TERM OUTCOMES:** Please list what outcomes you expect to see at the end of the two-year period as a result of your project.
 - **Examples:** Reduction in fatal (or non-fatal) overdoses, improved capacity to develop public health programs and services to address overdose, improved capacity to implement public health programs and services to address overdose, improved capacity to evaluate public health programs and services to address overdose, etc.

ACTIVITIES: Please list key activities that you will do to address substance use and overdose prevention, including related health disparities and social determinants of health.

- **Examples:** Programs or events promoting community and family connectedness, supporting retention in care, improving data collection and surveillance systems, enhancing linkage to care/harm reduction, etc.
- **SHORT TERM OUTCOMES:** Please list the outcomes you expect to see at the end of the first project year as a result of your activities.
 - **Examples:** Increase in knowledge, skills, or beliefs; increase in people receiving linkage to care; increase in the proportion of partners engaged in data sharing, etc.

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- **PERFORMANCE MEASURE:** Please list how you will measure the short-term outcomes for each activity.
 - **Examples:** Percentage of people who can recognize and reverse an overdose; percentage of people who received linkage to care services; percentage of partners entered into data sharing agreements
- **LEAD PERSON, SUPPORTING PARTIES:** Include the names of lead personnel at your organization in charge of activities, as well as any key contributing outside partners and contractors.
- **TIMEFRAME:** Include the approximate period of time in which the activity will take place.
 - **Example:** September 1 – November 1, 2024

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STRATEGY COMPONENT 1	<u>Community-Based Cultural Interventions to Address Protective and Risk Factors</u>			
GOAL(S)/ OBJECTIVE(S)				
LONG-TERM OUTCOMES (two- year period of performance)				
Activities	Short-term outcomes	Performance Measure	Lead Person, Supporting Parties (List one or more)	Timeframe

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STRATEGY COMPONENT 2	<u>Improve Overdose Data and Surveillance</u>			
GOAL(S)/ OBJECTIVE(S)				
LONG-TERM OUTCOMES (two- year period of performance)				
Activities	Short-term outcomes	Performance Measure	Lead Person, Supporting Parties (List one or more)	Timeframe

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STRATEGY COMPONENT 3	<u>Health Systems Interventions</u>			
GOAL(S)/ OBJECTIVE(S)				
LONG-TERM OUTCOMES (two-year period of performance)				
Activities	Short-term outcomes	Performance Measure	Lead Person, Supporting Parties (List one or more)	Timeframe

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STRATEGY COMPONENT 4	<u>Public Safety Partnerships and Interventions</u>			
GOAL(S)/ OBJECTIVE(S)				
LONG-TERM OUTCOMES (two- year period of performance)				
Activities	Short-term outcomes	Performance Measure	Lead Person, Supporting Parties (List one or more)	Timeframe

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STRATEGY COMPONENT 5	<u>Other Innovative Community-Based Strategies</u>			
GOAL(S)/ OBJECTIVE(S)				
LONG-TERM OUTCOMES (two- year period of performance)				
Activities	Short-term outcomes	Performance Measure	Lead Person, Supporting Parties (List one or more)	Timeframe

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APPENDIX D – Budget Template

Tribal Community: _____

Project Name: _____

Project Period: _____

Budget Line Items	Description Detail	Amount
Personnel/Salary		
Fringe Benefits		
Travel		
Supplies		
Contractual		
Other		
IDC		
Total Project Cost:		\$