

PE 62 OVERDOSE PREVENTION

The complex and changing nature of the opioid overdose epidemic highlights the need for an interdisciplinary, comprehensive and cohesive public health approach. Local communities play an important role in preventing opioid and other drug overdoses and related harms. Grant funds should leverage existing resources and build capacity and infrastructure. LPHAs should use data to inform and implement strategies to prevent opioid and other illicit drug overdose and substance misuse.

This funding opportunity is designed to serve LPHA jurisdictions or regions with a high burden of opioid overdose deaths and hospitalizations. Funds allocated to LPHAs are to complement other opioid initiatives and leverage funding throughout the jurisdiction to reduce overdose deaths and hospitalizations.

PE REQUIREMENTS

1. Collaborate with multi-disciplinary stakeholders to develop/expand, plan and implement **overdose emergency response protocols**, incorporating naloxone availability and dissemination in the COVID-19 recovery environment.
2. Collaborate with **other overdose prevention related projects** within the LPHA jurisdiction or region that address community challenges related to drug overdose deaths by establishing linkages to care, supporting providers and health systems, partnering with public safety and first responders, or empowering individuals to make safer choices.

FUNDING

- Not all LPHAs or regions will be funded due to funding limitations.
- LPHAs may apply as an individual LPHA or as a regional collaborative with two or more LPHAs.
- Total funding available for all awards: \$1,000,000 per year.
- The number of LPHAs or regions funded will depend on the total amount of approved budgets from applicants. Given the limited available funding, applicants are encouraged to submit reasonable budgets that recognize the need for overdose prevention work throughout the state. Funding will not be competitive. Funding decisions will be based on burden from highest to lowest using composite score of:
 - Overdose deaths for all drugs (rate)
 - Overdose hospitalizations for all drugs (rate)
 - Risky opioid prescribing (over 90 MED per fill)
 - High Intensity Drug Tracking Areas (HIDTA Counties)

BURDEN Regions or Individual Counties, 02/24/2020		
Highest	Medium	Lowest
1. Lane	8. Lake, Klamath	15. Malheur, Harney, Grant
2. Jackson	9. Clackamas	16. Umatilla, Union, Morrow
3. Douglas, Coos	10. Lincoln, Benton, Linn	17. Washington
4. Clatsop, Tillamook, Columbia	11. Yamhill, Marion, Polk	18. Hood River
5. Multnomah	12. Crook, Deschutes, Jefferson	19. Wallowa
6. Josephine	13. Baker	20. Wheeler
7. Curry	14. Gilliam, Sherman, Wasco	

REPORTING

OHA will provide reporting templates and technical assistance to meet reporting requirements. Reporting requirements include:

- Quarterly online reports on grant activities (template to be provided by OHA).
- Training or educational session reports, including number and discipline of participants.
- Quarterly Revenue/Expenditure reports as required by the Public Health Intergovernmental Agreement

APPLICATION PROCESS:

- Cover sheet Overdose Prevention 2020-2021 defining region (if applicable), and LPHA contacts
- Program plans to address objectives and activities for year one, October 1, 2020 – August 30, 2021.
- Budget template for year one, October 1, 2020 – August 30, 2021.
- Once program plans and budgets are submitted, the program and the LPHA or the regional fiscal agent will work together to reach agreement on approved work plan and budget.

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Contact:

Mary Borges

Mary.l.borges@dhsosha.state.or.us