



Ohio Opiate Response Continuum Grant for Behavioral Health Equity and Racial Disparity Plan - Solicitation for Technical Assistance and Plan Development

MH-FY21-CPC-SOR-BHER-020

Mike DeWine, Governor
Lori Criss, Director

Background

The Ohio State Opioid Response (SOR) Project continues to focus on building a community system of care (prevention, early intervention, treatment and recovery supports) that emphasizes service integration between physical health care, emergency health care, behavioral health care, criminal justice, and child welfare through the expansion of 1) secondary prevention efforts by providing targeted awareness messaging regarding treatment including access to all forms of Medication Assisted Treatment (MAT); 2) access to all forms of MAT and a clinical workforce with the expertise to provide all forms of MAT and psychosocial treatment for communities of focus; and, 3) use of certified peer recovery supporters, access to recovery housing that accepts individuals participating in all forms of MAT, in particular recovery housing for families, and development of employment and vocational opportunities for individuals within the communities of focus who are in recovery from opioid use disorder. In achieving these aims, programs and services will build upon the work already established by Ohio's 21st Century CURES State Targeted Response initiative as well as social determinants of health. In addition to receiving the SOR grant, Ohio received a Supplemental Grant which, through the support and encouragement of Governor DeWine, has been used to increase support to organizations and communities supporting African American, Hispanic/Latino, and other minority communities with a primary or secondary diagnosis of Opioid Use Disorder (OUD) or history of opiate related overdose.

Behavioral Health Equity is the right to access quality behavioral health care for all populations regardless of the individual's race, ethnicity, gender, socioeconomic status, sexual orientation, or geographical location. This includes access to prevention, treatment, and recovery services for mental and substance use disorders. The Office of Behavioral Health Equity stresses four key strategies for increasing equity; data, communication, policy, and quality service and workforce development.

The Substance Abuse and Mental Health Services Administration (SAMHSA) identified four aspects of recovery that are vital for all individuals seeking or sustaining their individual path for recovery: health, home, purpose, and community. While these aspects of recovery are critical for every individual, our implicit biases and structural components of racism interfere with equitable policy, program development, clinical assessment, decision-making, and provider-client relationships across all populations.

Through the identification of the skills, competencies and barriers impacting these aspects of recovery for different populations, providers can address access and availability of culturally and linguistically competent evidence-based MAT. This may be promoted by engaging the community partners and key stakeholders who are necessary to support the work to achieve an integrated continuum of treatment and recovery support services that are provided in a culturally competent manner that will work to improve health outcomes of members of the African American, Hispanic/Latino American, and other minority communities.

Scope of Work

OhioMHAS is seeking a national expert to engage OhioMHAS leadership and stakeholders in a process to better understand the complex social conditions and the systemic problem of racism and bias that implicitly impact policies and practices and results in inequities in access to behavioral health care, quality of behavioral health care, treatment and recovery support of opioid use disorders, and ultimately health outcomes for minority communities. To address racism and bias, OhioMHAS will use a multi-phased approach. The goal of Phase One, a solicitation for technical assistance (TA) and plan development, is to help OhioMHAS leadership and stakeholders better understand how to identify complex social conditions and the systemic problems of racism and bias, and to form recommendations for improvements in the behavioral health service delivery system to address inequities that result from these conditions and problems. The respondent is to describe in their proposal their competency and experience relevant to the issues, the processes they will employ to identify the complex social conditions and the systemic problem of racism and bias, engage leadership and stakeholders to inform the development of a plan of action for OhioMHAS and stakeholders, and the development of a plan that defines the opportunities for improvement and a framework to reduce racism and bias.

Health Equity and Racial Disparity relating to MAT - Technical Assistance

The SOR Project has made available up to \$150,000 to an organization(s) to provide Technical Assistance in addressing Health Equity and Racial Disparity relating to MAT. Services under this solicitation and plan development are to be provided from September 1 - September 28, 2020.

Expected deliverables under this solicitation include:

- a. Increase the equity literacy skills of staff, leadership, and stakeholders utilizing the Harvard Implicit Association Tests, Project Implicit materials, or similarly approved tools and approaches. During the grant period the awardee will develop a comprehensive plan to increase the equity literacy skills of staff and stakeholders. The plan is the primary deliverable.
- b. Equip OhioMHAS staff, leadership and stakeholders with the tools to hold listening sessions to better understand client outcomes and staff experiences that may result in trauma from interpersonal, systemic and structural racism and bias in OhioMHAS hospitals, the agency, provider agencies, and within communities. The respondent must identify and incorporate in their proposal the tools, materials and approaches to address systemic and structural racism and bias that they will employ during the grant period. The respondent will provide in their proposal an outline of activities that will inform the development of the plan and implement the activities to inform the plan by September 28, 2020.
- c. Assess the levels of inequity within OhioMHAS' policies, programs, practices and operational areas in order to identify opportunities for change.

- d. Identify the skills, competencies, barriers and solutions to improve access and availability of culturally and linguistically competent evidence-based MAT, and other evidence-based treatment and recovery supports for OUD minority populations.
- e. Identify the community partners and key stakeholders necessary to support the work and incorporate into the plan recommendations to achieve a continuum of treatment and recovery support services that are provided in a culturally competent manner to improve health outcomes of members of the African American, Hispanic/Latino American, and other minority communities.

Eligible Applicants

Eligible Applicants include non-profits with demonstrated experience in racial and health equity organizational and community development. Eligible Applicants must have a 501(c)(3) exemption determination letter from the Internal Revenue Service.

Funding Restrictions can be found in Appendix A and Appendix B of this document.

DATA COLLECTION AND REPORTING

OhioMHAS will collect information and data from AWARDEE. This information and data are outlined in the Reporting Requirements, which will be distributed with the Notice of Award (NOA). Reporting requirements, such as expenditure reports and quarterly program summary reports, will be reviewed by OhioMHAS staff. Failure to comply with reporting requirements shall result in action by OhioMHAS.

Performance Assessment

The AWARDEE must participate in performance reviews with OhioMHAS staff through phone, videotelephony, or in-person meetings to review program performance, reporting, data collection and training.

Information on social determinants of Health can be found here:

<https://www.youtube.com/watch?v=qykD-2AXKIU>

<https://www.calendow.org/news/tces-tony-itons-tedx-talk-changing-odds-health/>

https://www.youtube.com/watch?v=Qn_vvQ6HPhE

http://kirwaninstitute.osu.edu/docs/SocialDeterminantsofHealth_May-29-12.pdf

<https://www.youtube.com/watch?v=to7Yrl50iHI>

APPLICATION GUIDELINES

Application page limit is 8, single-spaced pages in 12-point Times New Roman font. This page limit does NOT include the budget narrative or budget expenditure form. Applications must include the following:

A. Application Packet

1. Face sheet containing the name of the organization, mailing address, contact information, and confirmation of 501(c)(3) non-profit status.
2. Abstract - Summary of how the applicant will complete the Scope of Work and Deliverables of this RFA (1,000 words or less).
3. Applicant eligibility description – Provide specific details about how the respondent meets the eligible applicant requirements including; 501(c)(3) status, demonstrated expertise and experience with assessing, training, and implementing similar activities focusing on racial and health equity.
4. Project description – Provide specific details and action steps the respondent proposes to take to inform the development of a plan to increase the access and availability of culturally appropriate and competent evidence-based MAT, along with strategies to improve access to full continuum of treatment and recovery support services provided in a culturally competent manner to members of the African American, Hispanic/Latino American, and other minority communities. The details and action steps of the proposal should support increasing the equity literacy skills of staff, leadership, and stakeholders utilizing the Harvard Implicit Association Tests, Project Implicit materials, or similarly approved tools and approaches. During the grant period the awardee will implement the action steps that will inform the development a comprehensive plan to increase the equity literacy skills of staff and stakeholders. The plan is the primary deliverable and will be submitted to OhioMHAS at the end of the grant period.

To develop the plan, the respondent must propose and implement activities during the grant period that will help equip OhioMHAS staff, leadership and stakeholders with the tools to hold listening sessions to better understand client outcomes and staff experiences that may result in trauma from interpersonal, systemic and structural racism and bias in OhioMHAS hospitals, the agency, provider agencies, and within communities. The respondent must identify and incorporate in their proposal the tools, materials and approaches they will employ during the grant period to identify and address systemic and structural racism and bias. The respondent will provide in their proposal an outline of activities that will inform the development of the plan, which is due to OhioMHAS at the conclusion of the grant.

At a minimum, the plan development process must include and be informed by assessing the levels of inequity within OhioMHAS' policies, programs, practices and operational areas in order to identify opportunities for change. The plan development process, which includes the activities implemented during the grant period, must identify the skills, competencies, barriers and solutions to improve access and availability of culturally and linguistically competent evidence-based MAT, and other evidence-based treatment and recovery supports for OUD minority populations. The plan development process must also identify the community partners and key stakeholders necessary to support the work and incorporate into the plan recommendations to achieve a continuum of treatment and recovery support services that are provided in a culturally competent manner to improve health outcomes of members of the African American, Hispanic/Latino American, and other minority communities.

5. Budget Narrative - Applications must include a budget and budget narrative that identifies all costs to complete the project, as well as how OhioMHAS funds, and other resources will be used. The narrative must include costs at the sub awardee level for all proposed partner organizations including personnel, fringe, travel (including mileage) and supplies (number of items and costs per item). Please review the funding restrictions prior to creating a budget.

B. RFA Questions and Updates

1. The RFA, accompanying documents and all questions and answers will be posted on the OhioMHAS website at: <https://mha.ohio.gov/Schools-and-Communities/Funding-Opportunities>

2. All questions must be submitted electronically no later than **by 5:30PM EDT September 2, 2020** to OhioMHAS at: SORTreatment@mha.ohio.gov. An information webinar series will be scheduled and announced at <https://mha.ohio.gov/Schools-and-Communities/Funding-Opportunities>

3. No questions will be answered after the deadline. You may **NOT** contact any OhioMHAS staff member directly with questions regarding this RFA. Contacting staff directly with questions could result in disqualification of an application.

4. Responses to all questions (FAQ) will be posted to the OhioMHAS website at <https://mha.ohio.gov/Schools-and-Communities/Funding-Opportunities> and will be updated frequently.

C. Application Submission

1. All applications must be submitted electronically to: SORTreatment@mha.ohio.gov by Monday **September 6, 2020 at 5:30PM EDT**. No faxed, mailed or hand carried applications will be accepted.

D. Award

1. Awards are expected to be announced by **September 9, 2020**
2. Grant awards will not exceed \$150,000.

Review Criterion	Possible Points	Rated Points	Total Points
1. Application contains appropriate face sheet	/5	/5	
2. Abstract of project	/10	/10	
3. Application provides specific details about how the respondent meets the eligible applicant requirements including; 501(c)(3) status, demonstrated expertise and experience with assessing, training, and implementing similar activities focusing on racial and health equity.	/15	/15	
4. How well the submitted activities and action steps support the following project deliverables:			

<p>a. The respondent describes the action steps they propose to take to inform the development of a plan to increase the access and availability of culturally appropriate and competent evidence-based MAT, along with strategies to improve access to full continuum of treatment and recovery support services provided in a culturally competent manner to members of the African American, Hispanic/Latino American, and other minority communities.</p> <p>b. The respondent describes the details and action steps that should support increasing the equity literacy skills of staff, leadership, and stakeholders utilizing the Harvard Implicit Association Tests, Project Implicit materials, or similarly approved tools and approaches.</p> <p>c. The respondent describes how they will implement the action steps that will inform the development a comprehensive plan to increase the equity literacy skills of staff and stakeholders.</p> <p>d. The respondent identifies the activities they will execute during the grant period that will help equip OhioMHAS staff, leadership and stakeholders with the tools to hold listening sessions to better understand client outcomes and staff experiences that may result in trauma from interpersonal, systemic and structural racism and bias in OhioMHAS hospitals, the agency, provider agencies, and within communities.</p> <p>e. The respondent identifies and has incorporated in their proposal the tools, materials and approaches they will employ during the grant period to identify and address systemic and structural racism and bias.</p> <p>f. The respondent provides in their proposal an outline of activities that will inform the development of the plan, which is due to OhioMHAS at the conclusion of the grant.</p> <p>g. The respondent describes how the plan development process will assess the levels of inequity within OhioMHAS' policies, programs, practices and operational areas in order to identify opportunities for change.</p> <p>h. The respondent describes the plan development process, which includes the activities implemented during the grant period, and it identifies the skills, competencies, barriers and</p>		
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<p>solutions to improve access and availability of culturally and linguistically competent evidence-based MAT, and other evidence-based treatment and recovery supports for OUD minority populations.</p> <p>i. The plan development process includes identifying the community partners and key stakeholders necessary to support the work and incorporate into the plan recommendations.</p>	/70	/70	
<p>5. Proposed budget includes cost-effective approaches for accomplishing specified project and falls within guidelines of allowable expenses.</p>	/15	/15	
<p>Total</p>	/115		115

Conditions of Award

- Awardee will work with OhioMHAS and other stakeholders on all aspects of the State Opiate Response project throughout the duration of this project.
- Awardee will attend required training, technical assistance and/or meetings per SAMHSA and/or OhioMHAS request, including monthly status meetings with the project director.
- OhioMHAS will collect information and data from awardee. Awardee will provide required information and data electronically, through online reporting systems. All information and data will be reviewed by project staff. Failure to comply with reporting requirements shall result in action by OhioMHAS, which may include withholding of funds.
- The Department reserves the right to make no award, make an award for a lesser amount, make an alternative award for the specified project or make an award for a shorter duration. The Department reserves the right to ask clarifying questions, issue conditional awards, and negotiate a best and final application with one or more applicants(s). The Department reserves the right to waive errors and omissions that do not materially affect the application. Errors and omissions may result in lower evaluation scores or rejection of the application.
- Awardee will be solely responsible for reporting, withholding, and paying all employment/vocational related taxes, payments, and withholdings for his/her self and any personnel, including but not limited to: Federal, State, and local income taxes, social security, unemployment/vocational or disability deductions, withholdings, and payments.
- Awardee must execute OhioMHAS Agreement and Assurances upon notice of award. (For reference, a copy of the Agreement and Assurances can be found in the Funding Opportunity).

Deadline for submission of all applications is by 5:30PM EDT, September 6, 2020 to:

SORTreatment@mha.ohio.gov

Appendix A

SOR Funding Restrictions

- 1) Funds may not be used to support programs that do not demonstrate evidence of increasing the number of persons receiving FDA approved medications for the treatment of opioid use disorder, reducing unmet treatment need, and reducing opioid overdose related deaths through the provision of prevention, treatment and recovery activities for opioid use disorder.
- 2) SOR funds shall be used to fund services and practices that have a demonstrated evidence-base, and that are appropriate for African American, Hispanic/Latino American, and other minority communities.
- 3) SOR funds shall not be used for services that can be supported through other accessible sources of funding such as other federal discretionary and formula grant funds, e.g. HHS (CDC, CMS, HRSA, and SAMHSA), DOJ (OJP/BJA) and non-federal funds, 3rd party insurance, and sliding scale self-pay among others.
- 4) SOR funds for treatment and recovery support services shall only be used to provide services to individuals with a diagnosis of an opioid use disorder or to individuals with a demonstrated history of opioid overdose problems.
- 5) Grantees are expected to report data as required in the RFA and to fully participate in any SAMHSA-sponsored evaluation of this program. All required data must be reported to the appropriate system within specified timelines. The submission of these data in the form required is a requirement of funding.
- 6) Medication Assisted Treatment (MAT) using one of the FDA-approved medications for the maintenance treatment of opioid use disorder (methadone, buprenorphine products including sublingual tablets/film, buccal film, and extended release, long-acting injectable buprenorphine formulations and injectable naltrexone) is a required activity of all treatment programs.
- 7) Medical withdrawal (detoxification) is not the standard of care for OUD, is associated with a very high relapse rate, and significantly increases an individual's risk for opioid overdose and death if opioid use is resumed. Therefore, medical withdrawal (detoxification) when done in isolation is not an evidence-based practice for OUD. If medical withdrawal (detoxification) is performed, it must be accompanied by injectable extended-release naltrexone to protect such individuals from opioid overdose in relapse and improve treatment outcomes.

- 8) Recipients are required to work with the SAMHSA Opioid-STR TA grant awarded to AAAP as the primary means of TA provision. Recipients are expected to report data as required in the Funding Opportunity Announcement (FOA) and to fully participate in the cross-site evaluation of the program.
- 9) Only U.S. Food and Drug Administration (FDA) –approved products can be purchased with Opioid SOR grant funds. No fentanyl test strips, or similar products may be purchased.
- 10) Funds may not be expended through the grant or a subaward by any agency which would deny any eligible client, patient or individual access to their program because of their use of FDA-approved medications for the treatment of substance use disorders (e.g., methadone, buprenorphine product formulations, naltrexone products including extended-release and oral formulations or implantable buprenorphine.) Specifically, patients must be allowed to participate in methadone treatment rendered in accordance with current federal and state methadone dispensing regulations from an Opioid Treatment Program and ordered by a physician who has evaluated the client and determined that methadone is an appropriate medication treatment for the individual’s opioid use disorder. Similarly, medications available by prescription or office-based implantation must be permitted if it is appropriately authorized through prescription by a licensed prescriber or provider. In all cases, MAT must be permitted to be continued for as long as the prescriber or treatment provider determines that the medication is clinically beneficial. Grantees must assure that clients will not be compelled to no longer use MAT as part of the conditions of any programming if stopping is inconsistent with a licensed prescriber’s recommendation or valid prescription.

Appendix B General Funding Restrictions

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

- Please do not request to purchase Naloxone at this time. The Ohio Department of Health received \$4 million in SOR funding to purchase Naloxone. Please work with ODH or your local Project DAWN site.
- Exceed Salary Limitation: The Consolidated Appropriations Act, 2016 (Pub. L. 113-76) signed into law on January 10, 2016, limits the salary amount that may be awarded and charged to SAMHSA grants and cooperative agreements. Award funds may not be used to pay the salary of an individual at a rate in excess of Executive Level II. The Executive Level II salary can be found in SAMHSA’s standard terms and conditions for all awards at <https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions>. This amount reflects an individual’s base salary exclusive of fringe and any income that an individual may be permitted to earn outside of the duties to the applicant organization. This salary limitation also applies to sub awards/subcontracts under a SAMHSA grant or cooperative agreement.
- Pay for any lease beyond the project period.

- Pay for the purchase or construction of any building or structure to house any part of the program.
- Provide residential or outpatient treatment services when the facility has not yet been acquired, sited, approved, and met all requirements for human habitation and services provision. (Expansion or enhancement of existing residential services is permissible.)
- Provide detoxification services unless it is part of the transition to MAT with extended release naltrexone.
- Make direct payments to individuals to enter treatment or continue to participate in prevention, treatment or recovery supports services including the use of other items to serve as payments for participation in programming such as clothing, furnishings, or vehicle repairs.
- Meals and snacks are unallowable.
- Support non-evidence-based treatment approaches.
- Cover unallowable costs associated with the use of federal funds to fund evidence-based practices (EBPs). Other sources of funds may be used for unallowable costs (e.g., meals, sporting events, entertainment) associated with the EBP. Other support is defined as funds or resources, whether federal, non-federal or institutional, in direct support of activities through fellowships, gifts, prizes, or in-kind contributions.
- Pay for travel to a conference, lodging or associated costs (meals, incidentals, etc.) for conference attendance or registration for a conference.
- Pay for costs (including travel) associated with training.
- Pay for equipment (items that exceed \$5,000 in cost) without prior approval.
- All treatment services must be identified by an ASAM level of care classification. Non-clinical support services are allowable if they are associated with services that are identified with an ASAM level of care classification – i.e. transportation, etc.
- Pay for software enhancements.
- Pay for marketing of programs or groups.
- Funding may not be used to support primary prevention activities.
- Funds may not be used for travel expenses of any kind unless travel is to provide direct client services. Travel mileage must be at the Ohio OBM rate.
- Funding may not be used to support housing that is not habitable at the time of the application for funds.

BUDGET NARRATIVE – Template – one for each organization or agency receiving SOR funds

*** Creating additional lines to this budget form is prohibited. Please refer to the Grant Budget Line Item Policies document for assistance when developing your budget. Indirect Cost percentages will not be allowable. These costs must be built in to your standard budget.**

Agency Name:

Program Title:

Program Area:

ANTICIPATED INCOME SOURCES DURING PROGRAM PERIOD:

- A. **OHIOMHAS** – This is the amount awarded under... **\$0**
- B. **Non-OhioMHAS Funds** – This amount represents the funding from **\$0**
- C. **Other Non-OhioMHAS Funds** – This represents funding received from... **\$0**

Total Funding	\$0
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LINE ITEM BUDGET JUSTIFICATION:

A1. Personnel Position	Annual Salary of Effort	Level	OHIOMHAS Funds	Other Funds
	\$0	0 FTE	\$0	\$0
	\$0	0 FTE	\$0	\$0
	\$0	0 FTE	\$0	\$0

	OHIOMHAS Funds	Other Funds	Total
Personnel	\$0	\$0	

A2. Fringe Benefits

	OHIOMHAS Other	
	Funds	Funds
Total Fringe Benefits	\$0	\$0

A3. Consultants - number of hours and hourly rate

	OHIOMHAS Other	
	Funds	Funds
Total Consultants	\$0	\$0

A4. Subscriptions and Publications

	OHIOMHAS Other	
	Funds	Funds
Total Subscriptions and Publications	\$0	\$0

A5. Supplies – number of items and cost per item

	OHIOMHAS Other	
	Funds	Funds
Total Supplies	\$0	\$0

A6. Printing/Copying – number of items and cost per item

	OHIOMHAS Other	
	Funds	Funds
Total Printing/Copying	\$0	\$0

A7. Rent/Lease Expenses – number of units, number of day/months, and cost per day/month

	OHIOMHAS Other	
	Funds	Funds
Total Rent/Lease	\$0	\$0

A8. Phone/Utilities – type of utility, number of days/months, cost per month

	OHIOMHAS	Other
	Funds	Funds
Total Phone/Utilities	\$0	\$0

A9. Maintenance/Repair – identify if an indirect cost rate will be used in this space

	OHIOMHAS	Other
	Funds	Funds
Total Maintenance/Repair	\$0	\$0

A10. Rentals

	OHIOMHAS	Other
	Funds	Funds
Total Rentals	\$0	\$0

A11. Insurance

	OHIOMHAS	Other
	Funds	Funds
Total Insurance	\$0	\$0

A12. Motor Vehicle

	OHIOMHAS	Other
	Funds	Funds
Total Motor Vehicle	\$0	\$0

A13. Travel – for direct services only, number of miles and rate

	OHIOMHAS	Other
	Funds	Funds
Total Travel	\$0	\$0

A14. Food – no food is allowable

	OHIOMHAS	Other
	Funds	Funds
Total Food	\$0	\$0

A15. Conference/Training/Registration – not allowable

	OHIOMHAS	Other
	Funds	Funds
Total Conference/Training/Registration	\$0	\$0

A16. Equipment/Computer – number of items and cost per item

	OHIOMHAS	Other
	Funds	Funds
Total Equipment/Computer	\$0	\$0

A17. Furniture - number of items and cost per item

	OHIOMHAS	Other
	Funds	Funds
Total Furniture	\$0	\$0

	OHIOMHAS	Other
	Funds	Funds
Grand Total	\$0	\$0

***Prior written approval must be obtained from OhioMHAS before incurring costs that exceed a 10% change between Budget Categories or any change to Category IV.**