

CDPH Naloxone Grant Program Application

Response ID:37 Data

1. Naloxone Distribution Projects

California Department of Public Health
Safe and Active Communities Branch
Naloxone Grant Program

**REQUEST FOR APPLICATIONS (RFA #16-10967):
Naloxone Distribution Projects**

Application

Please complete and submit this application for the Naloxone Grant Program as soon as possible, but no later than May 1, 2017 in order to initiate the development of a grant agreement with CDPH.

Please send questions by April 17, 2017 to ngp@cdph.ca.gov.

Please provide the following information:

1. Local Health Department

San Francisco Department of Public Health

2. Health Officer Information

Name : Tomas Aragon

Phone Number : 415-554-2741

E-mail Address : tomas.aragon@sfdph.org

3. Name of Grantee (Legal Business Name)

San Francisco Department of Public Health

4. Principal Investigator (PI) Information

Name : Tracey Packer

Address 1 : 25 Van Ness, Suite 500

City, Zip : San Francisco 94102

Phone : 415-437-6223

FAX : 415-431-7154

E-mail : tracey.packer@sfdph.org

New Analysis Question

5. Person to Direct Inquiries to:

Name : Katie Burk

Address 1 : 25 Van Ness, Suite 500

City, Zip : San Francisco

Phone : 415-437-6212

FAX : 415-431-7154

E-mail : katie.burk@sfdph.org

6. Person Authorized to Sign the Final Grant Agreement on Behalf of Your Agency

Name : Tomas Aragon

Title : Health Officer

7. Your Organization's DEA Number

FC1091925

8. Address associated with your DEA Number (This address will be used for shipment of naloxone product.)

Address 1 : 25 Van Ness

Address 2 : Suite 500

City, Zip : San Francisco

2. Naloxone Distribution Projects

Please refer to the Naloxone Grant Program Local Health Department Allocation Chart included as Attachment A in the Naloxone Grant Program Request for Applications (RFA) to determine the amount of grant product and funding being offered to your organization.

The allocation available for administrative costs, if accepted, may be used to cover costs of conducting outreach and assessment of local entities, receipt and distribution of naloxone products, reporting, or other activities related to the grant implementation. However, LHDs may elect to opt out of receiving the administrative allocation and instead apply that dollar amount to the purchase of additional naloxone product.

9. Funding amount you are requesting for the purchase of naloxone product (Narcan nasal spray)

\$102,480.00

10. Funding amount you are requesting for administrative costs

0

11. How would you like to have your allocation of naloxone product delivered to you (at no cost)?

In two shipments; receiving half in a second shipment in June, 2018

12. Understanding that you may need to conduct further outreach to identify those local entities that are ready and qualified to distribute/administer naloxone, who do you see as potential recipients *at this time*?

Substance use Disorder Treatment Services

***In your distribution plan, due to CDPH/SACB 60 days after the grant agreement is executed, you will list the names and types of local entities you select to receive the naloxone product.**

3. Naloxone Distribution Projects

Syringe exchange/harm reduction programs that have established naloxone distribution systems in place (as defined in the RFA) are a priority for the distribution of naloxone due to the high risk population that accesses these services.

13. Do you have a syringe exchange/harm reduction program in your jurisdiction?

YES

14. If YES, do you anticipate any challenges in working with the syringe exchange/harm reduction program in the distribution of naloxone?

NO

If YES, please describe:

15. At this time, do you anticipate any challenges to implementing any of the activities required by the grant?

No

If YES, please describe:

4. Naloxone Distribution Projects

By submitting this application, your organization is agreeing to:

1. Conduct outreach to identify local entities within their health jurisdiction that already have a naloxone distribution system in place and have the capacity to efficiently and effectively provide naloxone and

training to first responders (as described in section C, number 2 in this RFA).* Local entities may include harm reduction/syringe exchange programs, substance use disorder treatment providers, homeless programs, jails, emergency services providers, law enforcement, and others.

*If a LHD identifies the need to establish a new naloxone distribution system(s) in their jurisdiction, the LHD must ensure that any new naloxone distribution system meets the definition provided in section C, number 3 in this RFA prior to distributing naloxone.

2. Select local entities to receive naloxone based on the level of risk of overdose among the population(s) they serve and need for naloxone (Narcan) product.

Priority consideration is to be given to harm reduction/syringe exchange programs, if present within the health jurisdiction. (A list of California harm reduction/syringe exchange programs that currently have a naloxone distribution system in place is included as Attachment B).

3. Submit a naloxone distribution plan to CDPH/SACB for approval by June 16, 2017, or within 60 days of receiving CDPH final approval of the grant agreement. The plan will be submitted on-line and must include the names of selected local entities, the type(s) of services they provide, a description of the target population(s) they serve, and the number of naloxone product they will receive. CDPH will provide a standardized distribution plan template.

4. Begin distributing naloxone product to selected local entities by July 16, 2017, or within 90 days of receiving CDPH final approval of the grant agreement. All naloxone must be distributed to selected local entities by September 30, 2018.

5. Document and submit a final report to CDPH/SACB by April 1, 2019, on the distribution of naloxone for accountability and evaluation purposes.

6. Enter into a Standard Grant Agreement with CDPH. Attachment C includes a grant agreement template, Budget Detail and Payment Provisions, Standard Grant Conditions, and Additional Provisions.

Thank you!

Please hit the SUBMIT button.

5. Thank You!

Please submit any questions to ngp@cdph.ca.gov.

Confirmation Email

Apr 20, 2017 18:40:18 Success: Email Sent to: NGP@cdph.ca.gov

Confirmation Email

Apr 20, 2017 18:40:18 Success: Email Sent to: katie.burk@sfdph.org