



# Frequently Asked Questions



## Wisconsin Department of Health Services State Opioid Response (SOR) Prevention Services Grant Federal Fiscal Year 2020 - Coalition Menu Option Application

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**Date:** 08/13/2019

**Purpose:** The purpose of this document is to provide answers to commonly asked questions related to the State Opioid Response (SOR) Coalition Menu Option Application. This document will be updated as additional questions arise. If you have a question that is not answered in this document, please contact Christy Niemuth at [christine.niemuth@wisconsin.gov](mailto:christine.niemuth@wisconsin.gov).

### GENERAL GRANT QUESTIONS

**Question:** If we are unable to get our application in by the September 4, 2019, deadline can we get an extension?

**Answer:** No. Late applications will only be considered if funding is still available. Applications for funding received by September 4, 2019, will be reviewed and approved in their entirety, including requests for additional materials or funding, *prior* to considering any applications that are submitted after the deadline. Late applications will only be considered if funding is still available (which will vary by region), and are not guaranteed.

**Question:** Can one agency serve as the fiscal agent for more than one coalition?

**Answer:** Yes.

**Question:** Why was the naloxone training and coordination strategy that was available through the State Targeted Response (STR) grant removed from the SOR application?

**Answer:** With SOR funding, the Wisconsin Department of Health Services (DHS) will be launching a statewide overdose prevention effort called the Wisconsin Overdose Response Program. The purpose of this program is two-fold: provide local public health departments (PHDs) with access to naloxone; and certify local public health staff as naloxone administration trainers. Through the Narcan<sup>®</sup> Direct portion of this effort, PHDs will be able to apply for a set amount of naloxone annually from DHS, and have it shipped to them directly from the manufacturer as they need it. In addition, DHS will be launching a Naloxone Train-the-Trainer curriculum to educate public health staff on how to train others in the administration of naloxone. It is anticipated that applications to participate in this program will be available in the fall of 2019. If the coalition is interested in this program, they should work with their local PHD to coordinate community naloxone trainings.

**Question:** Our coalition only has the capacity to implement one strategy between now and September 29, 2020. Can we apply for less than \$7,300?

**Answer:** Yes. This funding is intended to expand and enhance community prevention efforts related to opioid abuse statewide. It is also important to be fiscally responsible with the funding. We encourage all coalitions to consider the feasibility of implementing strategies and only apply for what they need.

**Question:** We would like to receive \$2,000 to support our efforts related to the public awareness campaign strategy. Are we limited to only \$500 for this strategy?



**Answer:** No. The unit price for this strategy is \$500. If you know you need \$2,000 to cover printing or other costs, you would request 4 units at \$500 = \$2,000. The same is true for community education events. If your event is going to cost \$1,000, you would request 2 units @ \$500 = \$1,000. By selecting more than one “unit” you are not committing to providing more than one event. If you do plan to hold two events and they each cost \$1,000, then you should request 4 “units.” The description of how the total amount of funding will be used should be included in the work plan for that strategy.

**Question:** My coalition is in a county/tribe that receives Partnerships for Success 15 (PFS15) funding. Is my coalition eligible to apply?

**Answer:** The 14 coalitions who receive direct funding under the PFS 15 grant are NOT eligible to apply for SOR funding. This is because the PFS15 grant already provides funding to these coalitions to implement the strategies allowable under SOR prevention funding. While non-PFS 15 coalitions within a PFS15 county/tribe may apply for SOR funding, these requests will be reviewed in context of other efforts happening in the community. We want to ensure that the funding is used to support enhanced efforts rather than duplicate efforts. Funding requests may be reduced or denied if they are duplicative of other efforts in the community, or if the coalition already receives a significant amount of funding through an agreement with the PFS 15 coalition. The 14 coalitions who are NOT eligible to apply for SOR funding are:

- Chequamegon Coalition on Emerging Drugs (Ashland County)
- Prevention and Response Columbia County (PARCC)
- Safe Communities (Dane County)
- AODA Community Coalition of Douglas County
- Alliance for Substance Abuse Prevention (Eau Claire County)
- AODA & MH Coalition of Florence County
- Community Coalition of Forest County
- Kenosha County Substance Abuse Coalition
- Healthy Youth Coalition of Marinette & Menominee Counties
- Netaenawemakanak Coalition (Menominee Tribe)
- Milwaukee County Substance Abuse Prevention Coalition (MCSAP)
- Northwoods COPE (Oneida County)
- Janesville Mobilizing 4 Change (Rock County)
- Vilas County Youth Coalition Inc.

**Question:** Can we partner with another coalition in order to receive more funding?

**Answer:** We strongly encourage community coalitions to partner with each other in order to make the most impact with this funding. However, no one application can request more than \$7,300. So if two coalitions want to work together to support a community event, they should each apply for a portion of the cost and list each other as partners in the implementation plan. Alternatively, one coalition could apply for funding under the community event strategy and the other coalition could apply for materials under the public awareness strategy, both indicating that they will be partnering with each other in the work plan.

### **STRATEGY SPECIFIC QUESTIONS**

**Question:** My coalition would like to purchase and place a permanent drop box in a pharmacy. Can we do that with the take-back event and medication disposal strategy?



**Answer:** Yes. However, Drug Enforcement Agency (DEA) requirements for drop boxes in pharmacies are different than in law enforcement agencies. Law enforcement CANNOT collect medications from a pharmacy drop box. The pharmacy must have a plan for medication disposal. For a good “how to guide” for placing drop boxes in pharmacies review the Product Stewardship Institute’s Managing a Pharmacy-Based Collection Program available at: <http://www.allwisyouth.org/pfs15-resources/>

**Question:** My coalition only needs 100 deactivation units, but they are only available in quantities of 200. Can we partner with another coalition to split the cost?

**Answer:** Yes, however one coalition will need to be responsible for ordering the units. You cannot request less than a full case of 200 units in the application. Partnering coalitions will need to work out the details about which coalition will order the deactivation units prior to submitting the application. This applies to the lock bag and take-away med return envelope strategies as well. The details about sharing the order between the two coalitions will need to be reflected in the work plan for the strategy so that DHS can follow-up and receive outcome reports from all who participated in the strategy.

**Question:** For the community education event strategy can funding be used to support time to coordinate the event?

**Answer:** Yes. The \$500 is intended to be a reimbursement to coalitions to off-set costs associated with coordinating community education events. Coalitions can use the \$500 reimbursement as needed to meet their needs. Regardless of how the funding is spent, the coalition will need to report follow-up information (how many events were held, how many people attended, etc.) related to the implementation plan by October 15, 2020.

### **OUTCOME REPORTING QUESTIONS**

**Question:** We distributed public awareness materials with other funding (non-SOR) in conjunction with our community events. Should we report this in our outcome report?

**Answer:** No. You should only report strategies you selected in your application and received SOR funding for in your mid-term and final outcome reports.

**Question:** What information will we need to collect and report related to each strategy that we implement?

**Answer:** Every coalition will need to report on outcomes of each strategy selected. Mid-term reporting will be due in mid-April, 2020 and final reporting on strategy implementation for each of the chosen strategies will be due by October 15, 2020. Below are the some of the indicators that will need to be reported by strategy. Additional indicators may be added based on SAMHSA reporting requirements.

Take-Back and Medication Disposal Indicators (as applicable based on efforts identified in strategy implementation work plans):

- Number of take-back events conducted during the reporting period
- Dates and locations of take-back events
- Pounds of medications collected from each take-back event during the grant period
- Number of drop boxes purchased and placed
- Dates and locations of box placement
- Pounds of medication collected from drop boxes (either existing or newly placed) during the grant period
- Successes and barriers to strategy implementation



#### Deactivation Units, Take-Away Med Return Envelopes, Lock Boxes, and Lock Bags

- Number of deactivation units, take-away envelopes, lock boxes, and/or lock bags distributed
- Audiences targeted for distribution (i.e. seniors/elders, veterans, etc.)
- Agencies partners provided boxes, bags, deactivation units for distribution (i.e. senior centers, EMS, etc.)
- Successes and barriers to strategy implementation

#### Community Education Events

- Number of events held
- Dates, locations, and types of events held
- Number of people in attendance at each event
- Event target audience(s) (i.e. seniors/elders, law enforcement, etc.)
- Event topic(s) (i.e. stigma, recovery support, culture is prevention, etc.)
- Successes and barriers to strategy implementation

#### Public Awareness Campaign

- Number and types of print materials printed and distributed
- Target audience(s) for print material distribution
- Type, duration, and estimated reach of purchased media (i.e. billboards, radio, etc.)
- Type, duration, and estimated reach of purchased social media (i.e. Facebook ads, Twitter ads, etc.)
- Successes and barriers to strategy implementation