

Department of Public Health Bureau of Substance Abuse Services

Competitive Opportunity for the Selection of a Participating Provider in the 2017 State Targeted Response to the Opioid Crisis Grants

Notice of Intent # W17038 Opioid Overdose Prevention Training Vendor

GENERAL DESCRIPTION: The Massachusetts Department of Public Health (DPH), Bureau of Substance Abuse Services (BSAS) is applying for The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT) and Center for Substance Abuse Prevention (CSAP) fiscal year (FY) [2017 State Targeted Response to the Opioid Crisis Grants \(Short Title: Opioid STR\), FOA TI-17-014](#). The program aims to address the opioid crisis by increasing access to treatment, reducing unmet treatment need, and reducing opioid overdose related deaths through the provision of prevention, treatment and recovery activities for opioid use disorder (OUD) (including prescription opioids as well as illicit drugs such as heroin). BSAS will be applying for this 2 year grant for \$11.7M per year.

A portion of the funds will be dedicated to increasing the training opportunities offered for a range of primarily health and human services providers focused on opioid overdose prevention, recognition and response including naloxone administration. Therefore, BSAS seeks a training and capacity building vendor to partner on the grant who can provide the following scope of services in the Commonwealth with a planned start date of July 1, 2017, pending grant award.

The goal of the training vendor will be to prepare and equip programs that serve people who use opioids to ensure that their clients are prepared for opioid safety and opioid overdose emergency response and that their staff is prepared for on-site overdose emergency response. The training vendor will provide technical assistance and support around accessing naloxone from the pharmacy. Direct naloxone distribution will not be a service element of this training grant. The training vendor will promote access to naloxone from the pharmacy.

Proposed Scope of Services:

(a) Needs Assessment of training needs within health and human services secretariat agencies and sub-contractors. Needs assessment is conducted through on-line survey(s) and key informant interviews. The needs assessment will identify existing training resources within service sectors that could be trained to incorporate opioid overdose prevention, recognition and response into their work.

(a) In-person staff trainings on opioid overdose prevention and response, targeting direct service providers such as community mental health services providers, homeless shelters, and community health centers. Prioritization will be based on contact with high-risk individuals.

The curriculum will be revised annually in collaboration with BSAS. The training vendor will ensure that the content of the training materials includes that latest information and data available from DPH.

(c) Implementation of a train-the-trainer model to develop training capacity within the targeted service sectors. Identified trainers within service sectors will be trained to provide training for their own agencies and organizations. Training materials and messages will be tailored to the

needs of particular service sectors. By the end of the two-year project, a cohort of trainers will be able to continue the work after grant funding is complete.

(d) Develop online and print products, including an online self-paced module(s) on opioid overdose prevention, recognition and response including naloxone. The module(s) will target the needs of particular service sectors.

(e) Create a webpage that will house all training materials and products.

(f) Market training and products through multiple channels to ensure uptake.

(g) In partnership with the selected Prevention Evaluator and BSAS, measure training outcomes by evaluating all in-person and online training events to ensure overall quality and achievement of learning objectives. There will be a pre/post-test for each training event and the online module, and a satisfaction survey following each training. The training vendor will create a monthly report that includes the number of people trained in-person and online, pre/post training results, summary satisfaction results, web and email utilization data, updates on the train-the-trainer process and other product updates.

The selected Training Vendor will assist with the writing and budgeting of the associated components of the Opioid-STR grant application between 1/25/17 and 2/15/17. The application is due to SAMHSA on February 17, 2017.

Budget

The anticipated budget for Training and Capacity Building in the Opioid STR grant will be approximately \$300,000 per year for two years. The exact budget will be finalized in the grant writing and budgeting period between 1/25/17 and 2/15/17 in partnership with the selected vendor.

Qualified Vendors

Qualified vendors for the SAMHSA Opioid-STR grant Opioid Overdose Prevention Training Capacity are organizations that:

- Have experience with in-person and web-based training and capacity building for Massachusetts Health and Human Services Providers
- Have skilled trainers on staff who have experience with and knowledge of substance use disorders, opioid use, opioid overdose, opioid overdose prevention and response, and harm reduction strategies.

If you are interested in being selected as the participating vendor to deliver **Opioid Overdose Prevention Training** please reply by completing the attached application.

If you have questions related to this grant application e-mail

Sarah.Ruiz@state.ma.us **SUBJ: OPIOID-STR Grant Training Vendor Question**

INSTRUCTIONS FOR SUBMISSION OF RESPONSES:

The attached application must be:

- No more than four (4) pages
- Signed and dated by the agency person designated to sign agreements/contracts.

Deadline for Submission: Received no later than January 25, 2017 at 4:00 PM to:

Sarah.Ruiz@state.ma.us **SUBJ: OPIOID-STR Grant Training Vendor Application**

Department of Public Health Bureau of Substance Abuse Services

Competitive Opportunity for the Selection of a Participating Vendor in the 2017 State Targeted Response to the Opioid Crisis Grants

Notice of Intent # W17039 Access to Recovery

GENERAL DESCRIPTION: The Massachusetts Department of Public Health (DPH), Bureau of Substance Abuse Services (BSAS) is applying for The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT) and Center for Substance Abuse Prevention (CSAP) fiscal year (FY) [2017 State Targeted Response to the Opioid Crisis Grants \(Short Title: Opioid STR\), FOA TI-17-014](#). The program aims to address the opioid crisis by increasing access to treatment, reducing unmet treatment need, and reducing opioid overdose related deaths through the provision of prevention, treatment and recovery activities for opioid use disorder (OUD) (including prescription opioids as well as illicit drugs such as heroin). The BSAS will be applying for this 2 year grant for \$11.7M per year.

Specifically BSAS seeks to fund the Access To Recovery (ATR) model, which is an electronic voucher program designed to provide client choice among substance use treatment and recovery support service providers, expand access to a comprehensive array of treatment and recovery support options (including faith-based programs), and increase substance use treatment capacity. A major goal of ATR is to ensure that clients have a genuine, free, and independent choice among a network of eligible providers. The ATR vendor is expected to develop provider networks that offer an array of clinical treatment and recovery support services that can be expected to result in cost-effective, successful outcomes for the largest number of people. The approximate cost for this service is \$5,000,000 annually for 2 years to manage the ATR VMS services, collect data and report on outcomes, recruit, train, and pay vendors for authorized services. Approximately 75% of the dollars are expected to be spent on vouchers. Services may be provided in 4 communities, including the Boston and Springfield areas.

Voucher Management: The chosen vendor must be able to not only provide the ATR voucher system but manage the platform that the voucher management system resides on, including ability to manage the CONTINUUM and TRIAGE tool that may be used for client assessments. Management of the platform for the CONTINUUM and TRIAGE would include training new providers, assigning roles to new providers, and troubleshooting problems associated with the VMS platform. The approximate amount for this service is an additional \$500,000 annually for 2 years and the chosen vendor is able to subcontract if the vendor does not possess the expertise to deliver this service.

The selected vendor must be willing to participate in the grant writing process for the application to the SAMHSA STR, which includes attending meetings, participation in grant development model and other activities related to submission.

The vendor must meet the following requirements:

- Has experience working with MA substance use and community agencies providing voucher management

- Has experience operating an electronic voucher management system and training substance use and community agencies in use of VMS (voucher management system)
- Has experience hosting the CONTINUUM Assessment and TRIAGE tools on a VMS
- Has experience providing care coordination, developing recovery plans, and doing data collection and reporting
- Can demonstrate ability to be operational within 3 months of award

The Bureau will select **one** agency if awarded to partner with to deliver Access to Recovery.

If you are interested in being selected as the participating vendor to deliver **ACCESS TO RECOVERY (ATR)**, please reply by completing the attached application.

If you have questions related to this grant application e-mail

Amy.Sorensen-Alawad@state.ma.us **SUBJ: OPIOID-STR Grant ATR Question**

INSTRUCTIONS FOR SUBMISSION OF RESPONSES:

The attached application must be:

- No more than five (5) pages
- Signed and dated by the agency person designated to sign agreements/contracts.

Deadline for Submission: Received no later than January 25, 2017 at 4:00 PM to:

Kevin.P.Stanton@state.ma.us **SUBJ: OPIOID-STR Grant ATR Application**

Department of Public Health Bureau of Substance Abuse Services

Competitive Opportunity for the Selection of a Participating Provider in the 2017 State Targeted Response to the Opioid Crisis Grants

Notice of Intent # W17041 Day Treatment Pilot for Pregnant, Post-Partum and Parenting Women

GENERAL DESCRIPTION: The Massachusetts Department of Public Health (DPH), Bureau of Substance Abuse Services (BSAS) is applying for The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT) and Center for Substance Abuse Prevention (CSAP) fiscal year (FY) [2017 State Targeted Response to the Opioid Crisis Grants \(Short Title: Opioid STR\), FOA TI-17-014](#). The program aims to address the opioid crisis by increasing access to treatment, reducing unmet treatment need, and reducing opioid overdose related deaths through the provision of prevention, treatment and recovery activities for opioid use disorder (OUD) (including prescription opioids as well as illicit drugs such as heroin). The BSAS will be applying for this 2 year grant for \$11.7M per year.

In response to the Massachusetts opioid overdose epidemic and the high-profile concerns regarding infants born exposed to substances, BSAS seeks to fund a pilot Day Treatment Program for pregnant and postpartum women. Options for pregnant and postpartum women to receive treatment and support, specific to their pregnancy and postpartum period, are limited. Research has shown repeatedly that pregnancy presents a window of opportunity for women using alcohol and other drugs, and that when mothers can sustain their recovery and have their babies with them, it benefits families. Pregnant women and those with young babies have a variety of treatment and intensive outreach needs in early recovery. This population is at high risk for relapse, overdose, and child abuse and neglect; is likely to have histories of trauma and/or domestic violence; and when on Medication Assisted Treatment, may be at risk for using other drugs and alcohol. Infants are at risk of being born substance exposed and of suffering Neonatal Abstinence Syndrome (NAS). Substance Exposed Newborns (SEN) are also at high risk of being on the Fetal Alcohol Disorders Spectrum. Babies born with NAS or who are SENs may be difficult to care for and hard to soothe, challenging the mothers' caregiving abilities. A Day Treatment Program for pregnant and parenting women would provide not only comprehensive substance use disorder treatment, but perinatal risk reduction.

The Day Treatment Program vendor for pregnant and postpartum women is expected to develop a pilot program that offers a model that provides the following:

- Day treatment services to pregnant and parenting women that focuses on their continued recovery from SUD and parenting of their affected children
- Engagement of women who are in MAT treatment, other recovery services, or not currently receiving treatment, but need structured, gender and family specific treatment to help them incorporate the principles of Child/Parent Psychotherapy (CCP) in both their recovery and parenting process

- Assist with the anticipation of the coming child and/or assist after delivery to stabilize both parent(s) and child(ren) in parenting best practices for SENs
- Individual and group psychoeducation and substance use disorder counseling
- Trauma groups, nutritional counseling, parenting groups and children's services, including linkages to EI and CBHI as needed
- Linkages of women to prenatal care, pediatric care for child(ren) and to child care resources
- Partnership with medical services that provide prenatal and postpartum services for women with SUDs and their infants/children
- Coaching around SEN and NAS infant care and children's behaviors
- Transportation
- Billing for treatment services paid through third-party
- Home visiting, as needed, for transitional services to next level of care and/or to assist in successful day treatment program

The approximate cost for this pilot is \$550,000 annually for 2 years to create the pilot, collect data and report on outcomes.

The selected vendor must be willing to participate in the grant writing process for application to the SAMHSA STR, which includes attending meetings, participation in grant development model and other activities related to submission.

The vendor must meet the following requirements:

- Has an outpatient SUD treatment license
- Has experience providing family centered SUD treatment, Child/Parent Psychotherapy principles, and supervised recovery coaching provided by mothers with lived experience
- Has experience working with MA substance use and community agencies
- Has experience with community-based medication-assisted treatment (MAT) providers
- Has experience working with pregnant and postpartum women
- Has experience providing care coordination, developing treatment and recovery plans, and doing data collection and reporting
- Can demonstrate ability to be operational within 3 months of award

The Bureau will select **one** vendor if awarded. The selected vendor is expected to work with Access to Recovery, another component of this federal grant application, to provide recovery support services in the community.

If you are interested in being selected as the participating vendor to deliver **Day Treatment Pilot Program for Pregnant and Postpartum Women**, please reply by completing the attached application.

If you have questions related to this grant application e-mail

Amy.Sorensen-Alawad@state.ma.us **SUBJ: OPIOID-STR Grant QUESTION Day Treatment Pilot**

INSTRUCTIONS FOR SUBMISSION OF RESPONSES:

The attached application must be:

- No more than five (5) pages
- Signed and dated by the agency person designated to sign agreements/contracts.

Deadline for Submission: Received no later than January 25, 2017 at 4:00 PM to:

Kevin.P.Stanton@state.ma.us **SUBJ: OPIOID-STR Grant Day Treatment Pilot**

Department of Public Health Bureau of Substance Abuse Services

Notification of Selection of a Participating Partner in the 2017 State Targeted Response to the Opioid Crisis Grants

Notice of Intent#W17042 MISSION MODEL Oversight

GENERAL DESCRIPTION: The Massachusetts Department of Public Health (DPH), Bureau of Substance Abuse Services (BSAS) is applying for The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT) and Center for Substance Abuse Prevention (CSAP) fiscal year (FY) [2017 State Targeted Response to the Opioid Crisis Grants \(Short Title: Opioid STR\), FOA TI-17-014](#). The program aims to address the opioid crisis by increasing access to treatment, reducing unmet treatment need, and reducing opioid overdose related deaths through the provision of prevention, treatment and recovery activities for opioid use disorder (OUD) (including prescription opioids as well as illicit drugs such as heroin). The BSAS will be applying for this 2 year grant for \$11.7M per year.

In response to the opioid overdose epidemic and the high risk of opioid overdose for individuals re-entering the community from a correctional facility, including a civil commitment at a correctional facility, BSAS intends to fund case management services for those individuals with an Opioid Use Disorder (OUD) transitioning from corrections to the community, including providing an evidenced based assessment for Level of Care placement before discharge from facility. **Specifically, as one of the chosen models, BSAS is funding a partner to oversee the implementation of an evidence based model, the Maintaining Independence and Sobriety through Systems Integration, Outreach, and Networking (MISSION) for those individuals who will be re-entering the community from a corrections facility.**

University of Massachusetts Medical School (UMMS) is the developer of the MISSION model and has provided clinical training and implementation of the MISSION model on other DPH/BSAS grants. UMMS is qualified to partner with MDPH on this grant because they are nationally known for their work in co-occurring disorders, mental illness, behavioral therapy development, and psychiatric interventions.

MISSION wrap-around services are delivered by case manager/peer support specialist teams who follow a structured psychoeducational curriculum when working with their clients and also offer assertive outreach and linkage to community based providers. Outcome data suggest that MISSION has been highly effective in meeting patients' needs (Smelson et al, 2005; 2006, 2012, 2013). The award of approximately \$200,000 annually for 2 years is to fund the developer of the model for training, assisting the implementation of model, and fidelity adherence of model with selected vendor providing the service during the grant period.

The purpose of this notice is to publicize the MDPH/BSAS' intent to submit a federal grant application naming UMMS as a partner. Send any questions or comments on this notice to:

Kevin.P.Stanton@state.ma.us **SUBJ: OPIOID-STR Mission Model Oversight** by January 25, 2017, at 4 PM.