




ORIENTATION MEETING TRIBAL OPIOID RESPONSE (TOR) SUB-AWARDS

BY: CHARLENE POOLA, PHD, LCSW

KEVIN ENGLISH, DRPH

DEVONA BRADFORD, PROGRAM COORDINATOR

February 22, 2023

- 
- Overview of TOR
 - Purpose of TOR
 - Sub-awardees who were funded
 - Scope of Work
 - AASTEC's role
 - Invoice/Progress Report Guidelines
 - Progress Report Template
 - Questions and Answers

OVERVIEW OF THE GRANT

- Project funded by SAMHSA for a 2-year period and will be administered by AAIHB/Albuquerque Area Southwest Tribal Epidemiology Center.
- Up to 4 subawards. MOAs were disseminated.
 - Need signed MOAs by March 3, 2022
- Maximum initial award per tribe cannot exceed \$125,000 per year over 2-year period.
- Start Date: 9/30/22 to 9/29/24 (contingent upon continued funding from SAMHSA).

OVERVIEW OF THE GRANT (CONT'D)

- Assist in addressing overdose crisis in tribal communities by increasing access to treatment for opioid use disorders (OUD).
- Support continuum of prevention, harm reduction, treatment, and recovery support services for OUD, stimulant misuse, and co-occurring substance use disorders.
- Facilitate collaborations with tribal, state, and health providers, urban Indian organizations, law enforcement, and other first responders that respects tribal sovereignty.

OVERVIEW OF THE GRANT (CONT'D)

- Applicants expected to use trauma informed practices.
- The grant supports the use of the cultural wisdom declaration: elevate the importance of tribal identities, culture, spiritual beliefs, and practices for improving well-being.
- Applicants must use recovery oriented and equity-based practices to improve behavioral health care.
- Must use evidence-based practices, evidence informed, and/or culturally based promising practices.

PURPOSE OF THE GRANT

- To support the continuum of prevention, recovery, and harm reduction services for OUDs and co-occurring substance use disorders among youth and adults in four tribal communities.
- TOR will focus on prevention, recovery, and harm reduction activities among AI/AN youth and adults to engage tribes, create awareness of OUD and prevention pathways, increase access to harm reduction practices, and enhance recovery support for affected individuals and families that are currently experiencing behavioral health disparities.
- Project is needed to dismantle persistent barriers/disparities and fill the existing void in services by creating linkages education and awareness of the opioid crisis in Indian country to ensure AIs have access to culturally competent services that honor tribal sovereignty.

SUB-AWARDEES

- **Four AAIHB Consortium of Tribes:**
- Jicarilla Apache, Mescalero Apache, Ramah Navajo, and To'Hajiilee Navajo,

SCOPE OF WORK

Enhance recovery support to clients and their families to initiate, stabilize, and maintain LT recovery.

- Hire a peer support worker to provide family support and recovery support services to at least 25 tribal members per year, including helping clients with advocacy, life skills, socialization, referrals to behavioral health, medical services, housing, employment, goal setting, and to enhance resiliency
- Provide education to increase awareness and education about opioid use disorders (OUD) and other substance abuse issues at the schools, health fairs, and other community events

Strengthen opioid prevention and education awareness and services in AI communities.

- Review and disseminate culturally centered strategic messaging products developed by AASTEC, focused on raising awareness of the consequences of opioid and stimulant misuse and harm reduction/prevention opportunities
- Participate in project trainings (i.e., peer recovery specialist certification training, Mental Health First Aid, Question Persuade Refer, Trauma-Informed Care, Adverse Childhood Experiences, Project Venture, and/or Social Determinants of Health) hosted by AASTEC
- Implement at least one Project Venture course with youth by the end of the 2-year project.

SCOPE OF WORK

- **Develop and sustain culturally centered harm/reduction and prevention services within AI communities.**
 - Purchase and disseminate naloxone and fentanyl strips. Organize trainings for community members and tribal departments on the appropriate use of naloxone and fentanyl strips
 - Review opioid use disorder harm reduction policies and practices in the community and expand opportunities to increase harm reduction practices (e.g., needle exchange, fentanyl strips, naloxone, good Samaritan laws, etc.)

SCOPE OF WORK

Other project activities:

- Participate in evaluation activities that include collecting GPRA data, outcomes, and other project measures at the individual/client and community levels required by SAMHSA.
- Participate in monthly meetings facilitated by AAIHB/AASTEC regarding project progress.
- Submit quarterly progress reports and quarterly invoices (December 30, March 30, June 30, and September 30) that detail project costs.
- Submit annual progress report within thirty (30) days of the completion of the program year on or before December 30.
- Share de-identified evaluation data/information with AAIHB/AASTEC and the program funding source (SAMHSA).
- Share successful strategies and lessons learned with other Tribes, Bands, Pueblos, and Nations in the I.H.S. Albuquerque Area and nationwide.
- Complete project activities and spending for project by September 29, 2024.
- Maintain a financial management system and financial records and administer funds received pursuant to this MOA in accordance with all applicable federal and state requirements, including the Uniform Guidance, 45 C.F.R. Part 75.
- Comply with the restrictions on lobbying set forth in 45 C.F.R. Part 93.

AASTEC'S ROLE

- Provide technical assistance, expertise, and support.
- Assist with development of communication products.
- Host MHFA and Project Venture train the trainer sessions.
- Facilitate trainings.
- Oversight of the sub-awards (grants management and reporting to funder)
- Naloxone/fentanyl procurement and distribution

PROGRESS REPORT GUIDELINES

Quarterly Reports and Invoices are due **15 days** after each quarter ends.

Quarterly Reports are for activities that occur during each quarter, as follows:

Quarter 1: September 30, 2022 – December 30, 2022	Due: January 15, 2023
Quarter 2: January 1, 2023 – March 30, 2023	Due: April 15, 2023
Quarter 3: April 1, 2023 – June 30, 2023	Due: July 15, 2023
Quarter 4: July 1, 2023 – September 30, 2023	Due: October 15, 2023
Quarter 1: October 1, 2023 – December 30, 2023	Due: January 15, 2024
Quarter 2: December 31, 2023 – March 30, 2024	Due: April 15, 2024
Quarter 3: April 1, 2024 – June 30, 2024	Due: July 15, 2024
Final Report: September 30, 2022 – September 29, 2024	Due: November 15, 2024

Jessica Deloya, Accounting Technician: (505) 217-2800, ext. 116; jdeloya@aaihb.org

FUNDING RESTRICTIONS

- Mobile phones or devices cannot be purchased with TOR funds for clients.
- Grant recipients **can** purchase subscription plans that offer free devices with their service. The use of mobile services should be encouraged to enable access to treatment, recovery, and other related services.
- Clients **cannot** accrue additional charges with TOR funds for mobile applications and other mobile content that is not related to their treatment and recovery services.

PROGRESS REPORT TEMPLATE – YEAR I

- Hire a Peer Support Worker (PSW).
- Peer Support Worker attends OPRE trainings to obtain certification..
- Co-create and provide feedback to AASTEC team on culturally centered communication products on the impact of opioid misuse and harm reduction/prevention strategies to enhance education and awareness.
- Train community providers and members on the recognition of opioid overdose and the appropriate use of reversal medication naloxone.
- Disseminate and demonstrate how to appropriately use naloxone kits with your community providers and members.
- Attend MHFA train the trainer in Albuquerque.
- Attend QPR, Trauma Informed care, ACE, and SDOH trainings hosted by AASTEC.
- Participate in trainings, webinars, and quarterly follow up meetings with AASTEC team.

QUESTIONS AND ANSWERS

