



VIRGINIA OPIOID ABATEMENT AUTHORITY RECOMMENDATIONS FOR AWARDS TO STATE AGENCIES FOR 2024-2025

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Standard Conditions for all Projects

1. The terms and conditions outlined in the request for proposals are incorporated and included as standard conditions for all projects.
2. Each recipient agency must adhere to existing practices, policies, directives, and applicable laws when establishing new positions. For example, only the General Assembly can authorize an increase in an executive agency's maximum employment level (MEL).
3. Pursuant to Item 489.40, paragraph F., Chapter 2, 2024 Special Session I, Acts of Assembly, each recipient agency must ensure their respective OAA-funded effort does not create any ongoing obligations for the Commonwealth.
4. OAA awarded funds shall not be used for or connected to any legislative advocacy efforts throughout the Commonwealth.
5. OAA awards include funding for one Performance Period (October 1, 2024, to September 30, 2025).
6. For any awards that include carry-forward from the 2023-2024 performance period, awarded agencies will need to complete and submit a carry-forward reporting workbook to info@voaa.us by close of business on October 15, 2024. This workbook will report the final carryforward amount from the 2023-2024 performance period. OAA will send the workbook to impacted agencies.
 - a. The OAA will determine if the final amount requires an amendment be considered by the Grants Committee and will advise any agencies impacted.
7. For new awarded agencies, the formal execution of a memorandum of understanding (MOU) between OAA and the recipient agency will form the basis of the award. For agencies with existing OAA awards approved for a second year, the appendices will be modified to reflect the terms approved by the Grants Committee. Existing agencies with awarded a new project will have an additional appendix added reflective of that project.
 - a. Upon completion of the MOU and/or appendices and OAA's receipt of required payment coding information, the OAA will work with its fiscal agent (DBHDS) to transfer approved appropriation and funding as soon as practicably possible on or after October 1, 2024; however, the OAA reserves the right to withhold funding if MOU conditions have not been met.
8. Unless otherwise noted in the award notification, new recipients may request up to four, one-year renewals of project funding and current recipients can request up to three, one-year renewals of project funding. The OAA reserves the right to require any recipient to submit a new full proposal in lieu of a renewal request.
9. Each recipient agency is responsible for planning alternative future year funding sources and for developing plans to either sustain the project(s) should OAA funds no longer be available, or to conclude the project(s).
10. Each project proposal submitted to the OAA was required to include performance measures. If a proposal was revised during the review process to include scope changes and different funding recommendations, than the original request, then the performance measures need to be updated to reflect the approved scope and/or budget. In these cases, the recipient will work with OAA to revise or update the performance measures that will be used.
11. Recipients agree to submit for review any public-facing materials including online materials, videos, printed materials, advertisements, etc., to the OAA prior to finalizing/releasing those materials. OAA may require its name, logo, and certain wording be included in these materials, indicating the project received OAA funding.



Department of Behavioral Health & Developmental Services (DBHDS)

Carry-forward = \$11,133

Renewal = \$117,165 / New Award = \$385,000

There are four projects recommended for funding to DBHDS.

1. This Virginia Department of Behavioral Health and Developmental Services’ **“Substance Use Data Analyst”** project is recommended for a **renewal of \$117,165** for Year 2 to support the continuation of a substance use data analyst to collect and aggregate agency-wide data related to substance use efforts by DBHDS (related to initiatives identified in the “Right Help, Right Now” Plan) and the various community service boards and behavioral health authorities across Virginia.

DBHDS is also recommended for a PP2023-2024 **carry-forward of \$11,133** to support this project in Year 2 in addition to the recommended amount of funding listed.

2. This DBHDS **“Judicial Substance Use Training Program”** is recommended for **an extension of the PP2023-2024** period of performance to September 30, 2025. No additional funding is recommended.

DBHDS will work in coordination with the Training Committee of the Office of the Executive Secretary of the Supreme Court to develop a training curriculum and plan to offer training to judges, Commonwealth’s Attorneys, defense attorneys, magistrates, probation officers and other professionals in the court system on substance use disorders, treatment, and recovery services. The training will focus on the role the judiciary plays in supporting individuals with substance use disorders (SUDs) who are involved in the justice system through recovery, increased awareness of basic signs and symptoms of those who might be experiencing substance use problems, providing information regarding how to respond in various situations, and appropriate referral resources.

3. This DBHDS **“Recovery High School”** project is recommended for an **extension of the PP2023-2024 period** of performance to September 30, 2025, with no additional funding, to ensure the funds awarded by the OAA are used to support the new FY2025-26 General Assembly budget requirement for the expansion of recovery high schools in Loudoun and Virginia Beach.

4. This DBHDS **“Virginia Recovery Corps”** project is recommended for **new funding of \$385,000** to enable continuing collaboration with VIDC and the Virginia Recovery Corps (an AmeriCorps program), to identify, train, and provide stipend employment for the lived/living experiences workforce. Recovery Corps develops qualified, Certified Peer Recovery Specialists that are integrated into and add to a full continuum of addiction recovery services. OAA funding will enable Virginia Recovery Corps to access and draw down nearly \$2 million in Federal matching funds that will be used to support 70 Peer Navigator positions.

One project requested by DBHDS was not recommended for funding. The request was for \$1,534,100 to launch an adult psychiatric access line (APAL) in cooperation with the Virginia Medical Society. The APAL program would assist physicians and other prescribers by providing an online “hub” offering expert assistance in developing care plans, including medications, for patients with complex behavioral and mental illnesses including opioid use disorder. The project is not recommended for funding due to financial constraints and sustainability.

Department of Corrections (DOC)

Carry-forward = \$293,236 / Renewal = \$276,770

The Virginia Department of Corrections’ **“Medication Assisted Treatment (MAT) Social Workers”** project is recommended for a **renewal of \$276,770** to continue the six (6) MAT social workers (located at six DOC specialized SUD program sites) that assist with substance use disorder (SUD) treatment, specifically Opioid Use Disorder (OUD), through cognitive-behavioral programming, case management, and discharge planning for individuals prescribed MOUDs. The addition of licensed clinical social workers to these program sites will increase the therapeutic component of the programs and contribute to improved patient outcomes, improved success in re-entry to the community, decreased overdoses, and reduced rates of recidivism.

DOC is also recommended for a PP2023-2024 **carry-forward of \$293,236** to support this program in PP2024-2025.



Department of Education (DOE)

Renewal = \$520,250

The Virginia Department of Education’s “**Opioid Abatement Project**” is recommended for a **renewal of \$520,250** for Year 2 funding to continue this statewide, cross-sector effort to address opioid misuse by educating students, parents, school employees, and student-athletes about the dangers of drug use and how to prevent opioid misuse and addiction. DOE will use these funds to continue to support the Opioid Abatement Education Ambassador Program and expand the student-centered social media campaign.

DOE agrees to continue to participate in OAA-led coordination meetings with other organizations that offer prevention education programs to youth. DOE also agrees to provide the OAA with the exact amount of any PP2023-2024 carry-forward through OAA reporting requirements. Any resulting amendment requests for remaining PP2023-2024 funds will need to consist of one-time costs that do not create an obligation for additional funding for subsequent funding requests.

Department of Emergency Management (VDEM)

There were two projects requested by the Virginia Department of Emergency Management (VDEM) that were not recommended for funding.

VDEM requested \$15,395 in funding to supply naloxone to VDEM facilities and vehicles and \$363,200 for replacement of fentanyl emergency response equipment used by state hazmat officers. Staff did not recommend funding these requests because they are required internal expenses for the agency’s normal course of business.

Department of Health (VDH)

Carry-Forward = \$898,334 / Renewal = \$879,784 / New Award= \$214,092

There are five projects recommended for funding to the VDH.

1. This Virginia Department of Health’s “**Naloxone Distribution Program**” is recommended for a **renewal of \$473,137** to support the expansion and continuation of the state’s distribution system for intranasal naloxone and harm reduction test strips. VDH will increase the number of partners receiving Naloxone statewide and strengthen relationships with existing partners. As part of this effort, VDH will onboard contractors and/or grant-limited staff to expand the number of high-impact organizations eligible to receive free or reduced cost naloxone. Distribution strategies will be based on nationally accepted best practices and fully compliant with FDA and VDH regulations.
2. The VDH “**Comprehensive Harm Reduction**” project is recommended for a **renewal of \$277,944** to expand the number of Comprehensive Harm Reduction (CHR) sites and to establish new CHR sites to provide overdose prevention services. This VDH effort also includes outreach to traditionally disadvantaged communities, linkage to medical, mental health, and substance use disorder treatment, support for people in recovery, and efforts to prevent communicable diseases associated with injection drug use. All harm reduction efforts will be in full compliance with FDA guidelines, state law, and VDH regulations.

VDH is also recommended for a PP2023-2024 **carry-forward of \$722,056** to support this project in PP2024-2025.

3. The VDH “**Substance Use Disorder Coordinators**” project is recommended for a **renewal of \$128,703** to continue to support three (3) SUD coordinator positions at the Richmond and Henrico Health District, the Hampton and Peninsula Health District, and the Portsmouth Health District. In these districts, the SUD coordinators champion district-wide efforts in collaboration with local governments to maximize the reach and effectiveness of the agency’s various substance use disorder abatement efforts (prevention, education, treatment, and recovery).

VDH is also recommended for a PP2023-2024 **carry-forward of \$176,278** to support this project in PP2024-2025.

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VDH continued →

- 4. The VDH “**Overdose Prevention Strategist – West Piedmont Health District**” project is recommended for **new funding of \$83,685** to fund an Overdose Prevention Strategist position for the West Piedmont Health District (WPHD) to facilitate the development of population-based overdose prevention efforts through navigation, resource mapping, and the development of referral platforms. The Overdose Prevention Strategist position will increase awareness among community members regarding the risk of Fentanyl and counterfeit drugs, as well as provide training and facilitate the provision of Naloxone. VDH’s efforts for this project, in collaboration with the WPHD, aim to reduce opioid overdose fatalities by improving access to care and resources, and increasing the consistency of education across the WPHD community. Additionally, this project seeks to establish and increase prevention and harm reduction initiatives in each organization’s locality and establish/strengthen channels of communication between partner organizations with this position providing representation on various local, regional, and state opioid/substance use coalitions.

VDH agrees that requested funding must be used to support a non-classified position (i.e., contractor). Additionally, VDH agrees this effort will be funded outside of the cost sharing budget of the health district and its localities.

- 5. The VDH “**Coordinating Local and Regional Overdose Review Teams**” pilot project is recommended for **new funding of \$130,407** to support the establishment of a standardized approach for local and regional overdose review teams to more effectively collect and analyze data to inform evidence-based interventions and policy decisions aimed at curbing overdose fatalities and improving community health outcomes.

VDH agrees that funding requested for the 1.0 FTE Overdose Review Team Coordinator must be used to support a non-classified position (i.e., contractor). Additionally, VDH agrees the requested funding for the 0.1 FTE for the Director of the Division of Death Prevention cannot supplant any existing budgeted funds for this position.

The OAA will require VDH to complete a written report regarding the outcomes and findings after the first year of this pilot study, as a condition for renewing this project for a second year.

One project requested by VDH was not recommended for funding. The agency proposed \$1,084,541 for a one-year pilot project focusing on subwatershed monitoring for fentanyl and norfentanyl at four selected sites. The project was not recommended due to financial constraints and because the FY2025-26 state budget appropriated funding to VDH for a similar effort.

Department of Health Professions (DHP)

Renewal = \$361,219

The Department of Health Professions’ “**Integration of Prescription Monitoring Program (PMP) into Clinical Workflows**” project is recommended for a **renewal of \$361,219** to continue connecting the prescription monitoring program to prescribers’ electronic health records and pharmacists’ pharmacy dispensing systems.

This effort has been very successful in promoting the appropriate use of controlled substances and in recent years, DHP has received federal funding to support this initiative. However, the Federal funding of \$830,180 has been reduced to \$468,961, resulting in a gap of \$361,219 to maintain this functionality.

Department of Medical Assistance Services (DMAS)

Carry-Forward= \$150,000

The multi-year, multi-step Department of Medical Assistance Services “**Discharge Bridge Program**” is recommended for a PP2023-2024 **carry-forward of \$150,000** for Year 2. These funds were not expended during the initial year due to vendor delays. During its first year, the project pursued the development of an opioid use disorder (OUD) training and technical assistance program to assist hospitals with launching bridge programs for patients with opioid use disorders. This emergency department bridge clinic model is designed to address a significant gap in the continuum of care for individuals who present to emergency departments with overdose emergencies.

DMAS continued on next page →



DMAS Continued →

For people with substance use disorders (SUD), the emergency department can likely be one of few linkages to the healthcare system to help address their needs. Emergency department bridge clinic programs consider the emergency department visit associated with an overdose emergency to be a critical intervention point to offer support, services, education, care coordination (often integrating peer support specialists) and significant follow up to link people struggling with SUD with treatment outside of the emergency department.

Carry-forward for this effort in Year 2 will be used to support statewide opioid use disorder training and technical assistance by providing global training to hospitals on stigma reduction and the importance of the development of a bridge discharge program. The Discharge Bridge component of this project has been placed on hold until PP2025-2026.

Department of Social Services (DSS)

Renewal = \$411,000 / New Award = \$291,247

There are two projects recommended for funding to the VDSS.

1. This Virginia Department of Social Services’ **“Kinship Navigator (KinNav) Expansion”** project is recommended for **renewal of \$411,000** to expand kinship navigator programs in coordination with local governments and community partners. Parental substance is often one of the reasons for removing children from their home; in many cases extended family members (kin) or friends (fictive kin) assume guardianship of these children. Kinship navigators provide support to kin or fictive who are acting as guardians or care providers for these children. This project provides funding to Virginia DSS to fund competitive proposals submitted by local DSS offices to expand existing kinship navigator programs. This program has been amended to use screening for substance use issues to more accurately direct resources provided by this award to support families. DSS will also increase these services in PP2024-2025 due to a significant need for KinNav services in partner jurisdictions. Local governments, which operate the local DSS, can also use their direct opioid settlement and/or OAA grant funds for these purposes.
2. This Virginia Department of Social Services’ **“211 Opioid Reduction Registry (ORR)”** project is recommended for **new funding of \$291,247** to support the ORR integration into the operations of 211 Virginia, Virginia’s premier and statewide information and referral service. As part of this effort, DSS will partner with many local organizations dedicated to combating substance use – particularly opioid misuse. This project will include the addition of substance use services to the myriad services and resources offered to Virginians through the 211 Contact Center (24/7 call service). Under this project, DSS will ensure the expansion of the 211 Virginia Resource Database and the creation of a text platform for individuals dealing with substance use disorder, as well as the inclusion of new and expanded substance use disorder services that will be more readily available statewide with the goal of substantially increasing access to life-changing substance use services to save and improve lives, one call at a time, across the Commonwealth. VDSS has already entered into a contract with DBHDS to cooperate and coordinate access to the 211 Virginia Resource Directory by the 988 Suicide and Crisis Lifeline, using an application programming interface established in partnership with the United Way Worldwide 211 National Data Platform.

Office of the Attorney General (OAG)

Renewal = \$675,000

The Office of Attorney General’s **“Fentanyl and Opioid Prevention and Awareness Advertising Campaign”** is recommended for a renewal of **\$675,000** for Year 2 to expand the OAG’s mass media campaign to educate Virginians regarding the dangers of opioids, with a focus on fentanyl built upon the “One Pill Can Kill” and the “Get Smart About Drugs” campaigns from the U.S. Drug Enforcement Administration (DEA). The OAG will expand its billboard advertisements, as well as expand and standardized the measurement objectives of radio, television, digital and social media impressions. This project is also recommended for an amendment to include the “Coaches versus Overdoses” campaign to provide coaches, parents, and students innovative risk mitigation and harm reduction tools to address the opioid and overdose crisis.

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OAG Continued →

The OAG will continue existing partnerships with the VDH, the Secretary of Public Safety and Homeland Security, the Virginia Foundation for Healthy Youth (VFHY), and the First Lady’s Office to plan events, perform outreach, and determine messaging delivery based on overdose rates, crimes, and need. The recommended funds will be used for Fentanyl Awareness TV and Radio PSAs/Billboards, digital placements, and additional media placements. The OAG will provide matching funds (approximately \$400,000) to supplement this program’s efforts.

The Office of the Attorney General (OAG) will participate in OAA-led coordination meetings with other OAA-funded organizations that offer media campaigns and prevention/education programs directed toward youth.

Office of the Executive Secretary of the Supreme Court of Virginia (OES)

**Carry-Forward = \$387,000
Renewal = \$113,000**

This Office of the Executive Secretary of the Supreme Court of Virginia’s “**Statewide Universal Drug Testing for Specialty Dockets**” project is recommended for a **renewal of \$113,000** to promote a statewide best practices standard for drug testing within all the alternative dockets. OES will use these funds to promote awareness regarding the developed standard to all localities that provide financial support to alternative dockets and continue a grant program to offer financial assistance to localities to help pay for specialty dockets drug testing that meets the OES standard.

OES is also recommended for a PP2023-2024 **carry-forward of \$387,000** to PP2024-2025 to support this program.

OES agrees to convert this project into a three-year pilot program and follow an established reporting requirement as specified by the OAA. Additionally, OES agrees to participate in OAA-led quarterly update meetings.

Radford University

Carry-Forward= \$90,908 / Renewal = \$210,698

Radford University’s “**Healing, Outreach, Prevention, and Empowerment (HOPE)**” project is recommended for a **renewal of \$210,698** to continue expanding the existing Radford Collegiate Recovery Program with enhanced outreach and awareness, overdose prevention, healthcare screening and connections, implementing a “warm hand-off” process, and support for the new living-learning facility. This program is designed to reduce overdoses for the campus community through expanded training and introduction of new harm reduction strategies. The program will also support individuals who are in recovery through the establishment of a four-bedroom suite of university-owned apartments (located off the main campus). Additionally, Radford University will enhance outreach, screening, and healthcare referrals to include external emergency healthcare organizations to ensure a continuum of services for members of the campus community who are “at risk,” in active addiction, or in recovery. Radford University will also work with the New River Valley Recovery Ecosystem program that is funded through OAA’s cooperative partnership grant led by Montgomery County.

Radford is also recommended for a PP2023-2024 **carry-forward of \$90,908** to PP2024-2025 to support this program with additional one-time scholarships for students in recovery

Radford University will ensure the unfilled position is filled by a predetermined time before an additional renewal for this project will be granted.

University of Virginia (UVA)

Renewal = \$269,489 / New Award = \$215,075

There are two projects recommended for UVA.

1. This University of Virginia’s “**Street Medicine Access Reduction and Treatment (SMART) Clinic**” (a “street medicine” clinic connected to the multi-resource day shelter known as “The Haven”) is recommended for a **renewal of \$269,489**. This clinic is an office based opioid treatment (OBOT) program to engage individuals with opioid use disorder. The program provides access to long-acting injectable medication for people with opioid use disorder, expands the existing helpline, and deploys harm reduction supplies via a vending machine (in compliance with FDA and VDH guidelines).

UVA continued on next page →



UVA Continued

Year 2 of the program will include the expansion of comprehensive harm reduction services and the addition of a patient navigator or peer support specialist to provide additional hands-on support and individualized focus to support recovery.

UVA agrees to present harm reduction efforts to the OAA prior to their implementation. Additionally, UVA agrees all revenue generated from treatment provided through this clinic will be used to supplement the operating expenses of this project and any remaining OAA funds will be carried forward to offset future OAA funding/renewal requests.

2. This University of Virginia’s “**Community Outreach and Support for Management of SUD (COSMOS)**” pilot project is recommended for **new funding of \$215,075** to include the integration of a digital contingency management platform (developed by DynamiCare Health) to address opioid use disorder and co-occurring stimulant use disorder within the Charlottesville community. This pilot project has been recommended for funding to enroll participants, as identified by the contingency management coordinator, into the program using UVA’s OBAT clinic as a secondary recruitment site. Enrolled participants will receive consistent treatment through push notifications, motivational reminders, and incentives offered via the DynamiCare mobile app, as well as participate in scheduled telehealth sessions and agree to timely substance testing to achieve a significant reduction in opioid and stimulant use. UVA has designed this program to systematically evaluate the effectiveness of digital contingency management intervention in reducing opioid and substance use, as well as improving participant recovery outcomes. Following UVA’s program evaluation, the university will collaborate with DMAS and other stakeholders across the commonwealth to consider the inclusion of contingency management in Medicaid coverage., as well as publish the program’s findings to be shared with policymakers, healthcare providers, and other stakeholders.

UVA agrees to provide OAA a detailed progress report as a part of any future renewal requests for this project. Additionally, UVA agrees any revenue generated from the project will be used to supplement this program’s operating expenses and any remaining OAA funds could be carried forward to offset future renewal requests. UVA also agrees this is a pilot program scheduled to run for two years and will provide OAA with any required approvals and/or releases from the proper oversight boards before program implementation.

Virginia Commonwealth University (VCU)

Carry-Forward= \$198,878

Renewal = \$282,221 / New Award = \$741,793

There are five projects recommended for VCU.

1. Virginia Commonwealth University’s “**Virginia Opioid Toolkit for Cities and Localities**” project is recommended for a **renewal of \$207,820** to support the continuation of the VCU Wright Center for Clinical and Translational Research for the expansion of a technical resource “toolkit” for Virginia’s cities and counties. Developed by VCU researchers with support from the Virginia Society of Addiction Medicine (VASAM), this online toolkit will provide examples of opioid abatement best practices and evidence-based programs and efforts that cities and counties can implement using opioid settlement funds. VCU will also offer technical assistance including strategic planning, program implementation, and evaluation services for cities and counties on a fee basis. Publishing of information will occur on a quarterly basis.

VCU is also recommended for a PP2023-2024 **carry-forward of \$28,279** to support this project in PP2024-2025.

2. Virginia Commonwealth University’s “**Massey Cancer Center at VCU Health**” project is recommended for a **renewal of \$74,401** to support the continuation of the VCU Massey Cancer Center to research and develop protocols for pain management in palliative care settings due to an increasing problem of patients surviving cancer but with opioid dependence. The OAA may use a 3rd party expert to review and assess the effectiveness of the clinical program.

VCU is also recommended for a PP2023-2024 **carry-forward of \$170,599** to support this project in PP2024-2025.

VCU continued on next page →



VCU Continued →

3. Virginia Commonwealth University's "**Virginia Naloxone Project**" is recommended for **new funding of \$575,088**. This is a new, multi-phased effort to decrease overdose deaths, reduce stigma in healthcare settings, and propagate the dispensing of Naloxone to at-risk emergency department patients across the Commonwealth. The project will initiate at least twenty emergency department based take-home Naloxone programs for at-risk patients, as well as improve connections to addiction treatment services and the develop data collection and continuous quality improvement program structure. VCU will work collaboratively with the Virginia Tech Carilion School of Medicine and The Naloxone Project (a national, nonprofit organization) for this project to leverage experiences and partnerships of both systems to scale this program across the Commonwealth.

VCU agrees to participate in OAA-led coordination meetings with other organizations that conduct similar efforts to achieve maximum efficiencies in achieving shared outcome goals.

4. Virginia Commonwealth University's "**Fast Track to Certified Substance Abuse Counselor (CSAC) Program**" is recommended for **new funding of \$84,373** to develop and expand existing VCU coursework and clinical internships for Bachelor level (BSW) and Master level (MSW) social work students to provide credit towards the Virginia Certified Substance Abuse Counselor (CSAC) certification. This program is designed to fast track students to ensure their workforce readiness through training and preparation of social work students with expertise in substance use disorders (SUDs), fentanyl and synthetic opioid trends, and recovery. Students in this program will also increase their practical experience with individuals and families that are impacted by SUDs, as more social work students will be placed in clinical settings statewide with a focus on addressing the opioid epidemic and matriculating more students to apply for CSAC credentials. VCU will also develop a program track for peer recovery specialists as a component of this project.

VCU agrees to participate in OAA-led coordination meetings with other postsecondary educational institutions with similar programs to achieve maximum efficiencies in achieving shared outcome goals.

5. Virginia Commonwealth University's "**RAMS in Recovery Scholars**" program is recommended for **new funding of \$83,322** to support the expansion of VCU's Recovery Scholars Program (RSP) for ten colleges and universities across Virginia. These funds will support expanded access and capacity for the existing RSP program by increasing the number of scholarships offered to students and expanding the program's staff. The program is based on a best-practice model from Texas Tech University that pairs scholarship funds with supportive programming for students in recovery. The existing program is designed to support 60 students across Virginia – however, with the addition of these OAA recommended funds, the program will be able to grow and support approximately 110 students each semester by the spring semester of 2025. Specific individuals recruited for this program include students pursuing their Certification for Substance Abuse Counseling (CSAC) at community colleges and professional Certified Peer Recovery Specialists in the workforce who are seeking to further their careers.

VCU plans to expand endowment funds to permanently funds the program after OAA-funding is no longer available.

One project requested by VCU was not recommended for funding. VCU requested \$299,085 for a trauma-informed prevention program for youth in the Richmond area. The project was not recommended for funding due to funding constraints, sustainability, and impact.



Virginia Cooperative Extension Service (Virginia Tech)

Renewal = \$725,008

The Virginia Cooperative Extension's "**Opioid Abatement Authority**" project is recommended for a **renewal of \$725,008** to continue offering training for teachers to implement the evidence-based Botvin Life Skills program, Mental Health First Aid (youth or adult), and Adverse Childhood Experiences (ACEs) training in schools, as well as VCE's continued partnership in regional substance use education and prevention coalitions. In PP2024-2025, this project will be expanded to include urban localities with regional project coordinators active in 27 coalitions across Virginia (expansion to include Roanoke City and Petersburg City). Major project activities will include supporting local coalitions that focus on substance misuse and addiction, disseminating evidence-based programs for prevention of substance use disorder and support of individuals in recovery from substance use disorder and their families, and facilitating and coordinating connection to Virginia Cooperative Extension and Virginia Tech resources and expertise as appropriate.

VCE agrees to continue to participate in OAA-led coordination meetings with other organizations that offer prevention education programs to youth. VCE also agrees to provide the OAA with the exact amount of PP2023-2024 carry-forward through OAA reporting requirements. Any resulting amendment requests for remaining PP2023-2024 funds will need to consist of one-time costs that do not create an obligation for additional funding for subsequent funding requests.

Virginia Foundation for Health Youth (VFHY)

One-Time, New Award = \$1,515,000

There are two projects recommended for VFHY through OAA's discretionary grants budget.

1. Virginia Foundation for Healthy Youth's "Prevention and Education Campaign on Fentanyl and Overdose for Youth and Young Adults Phase Two" project (also referred to as "Deadly Dose"), is recommended for **one-time new funding of \$1,400,000 from OAA's unrestricted/discretionary funds**. This project is a prevention and education campaign for youth and young adults to modify youth knowledge, attitudes, and beliefs about opioids as they relate to prevention efforts. This campaign seeks to alter risk perception of using prescription and illicit opioids through website and resource development and message packing. Recommended funding for Phase 2 of this project will support the formal evaluation of initial measurements for the youth/young adult campaign, two message packages, and funding for a campaign specialist.

VFHY agrees to continue to participate in OAA-led coordination meetings with other organizations that offer prevention education programs to youth.

VFHY agrees that any future OAA funding requests will consist of a new project and will be submitted through the OAA's RFP process for state agencies.

2. Virginia Foundation for Healthy Youth's "**Expanding Access to the Dangers of Fentanyl Module**" project is recommended for **one-time new funding of \$115,000 from OAA's unrestricted/discretionary funds**. This program will provide free, evidence-based prevention curricula in high-risk public-school systems. VFHY will track the utilization of the "Dangers of Fentanyl" module, translate the module materials into Spanish, and update the contents of the module during PP2024-2025. The original module materials were developed and launched in February 2024 on the VFHY and the "It Only Takes One VA" websites. However, this OAA funding request is to support the revision of the existing module for use in middle schools and provide training to teachers for curricula use.



Virginia Indigent Defense Commission (VIDC)

Carry-Forward= \$33,194 / Renewal = \$374,546

The Virginia Indigent Defense Commission’s “**Re-Entry and Recovery Specialist**” pilot project is recommended for a **renewal of \$374,546** to continue the collaboration between the VIDC and Virginia Recovery Corps (an AmeriCorps program) to embed peer navigators within public defender offices in localities with the highest overdose death rates combined with the largest public defender caseloads. Currently, the program has Peer navigators working in:

- Chesterfield County
- Pulaski County
- Fredericksburg City
- Richmond City
- Winchester City
- Martinsville City
- Lynchburg City

This recommended renewal also includes the expansion of the project to add eight additional peer navigators for the following localities:

- Roanoke City
- Portsmouth City
- Newport News City
- Suffolk City
- Chesapeake City
- Norfolk City
- Halifax County
- Hampton City

VIDC has also identified three (3) additional localities to serve as alternate offices if there are placement issues with the others identified. As a component of this project, these Recovery Corps members are working toward their peer specialist certification and will navigate justice-involved individuals in resource development and recovery. The program also includes one full-time Re-Entry and Recovery Supervisor at VIDC for program oversight and fifteen Recovery Corps members to work in fifteen public defender offices for Year 2.

VIDC is also recommended for a PP2023-2024 **carry-forward of \$33,194** to support this project in PP2024-2025.

VIDC agrees to extend the pilot project through PP2024-2025 which extends the deadline for the pilot project report from VIDC and Recovery Corp measuring the results of both years of this pilot program. The report will also address options for long term strategies, including plans to achieve more sustainable funding when OAA support is no longer available, and a budget model that separates Recovery Corp's overhead to recruit and manage the program from those costs it incurs when members are actively working in this program. Any future renewal request for this project from VIDC must also include this budget model. Also, VIDC agrees to provide reasonable assistance if requested, to other agencies in Virginia (especially those without a public defender’s office), seeking information about this project.

Virginia State University (VSU)

New Award = \$500,975

There are three projects recommended for funding to VSU collectively known as the “At the H.E.L.M. (Healthful Engagement, Leveraging, and Mobilization): Countermeasures for Opioid Use and Abuse” program.

1. The Virginia State University Public Health Institute’s (VSUPHI) “**Healthful Engagement for Support, Treatment, Recovery, and Interventions**” project is recommended for **new funding of \$241,341** to enhance general substance use disorder treatment and recovery service accessibility for adult residents through individual and group support sessions for substance use, and evidence-based and empirically supported therapies for addiction recovery. VSU will also increase awareness about opioids, substance use, and overdose deaths to reduce opioid-related overdoses among residents. This project will also support VSU’s work to provide proactive outreach, screening, and healthcare connections for the VSU campus community through the distribution of naloxone kits, fentanyl test kits, and the provision of education to community members regarding harm prevention efforts.

VSU agrees to work collaboratively with the District 19 Community Services Board (CSB) in all efforts in this project. Additionally, any revenue generated from this project will be used to supplement the operating expenses of this project and any remaining OAA funds could be carried forward to offset future renewal requests to the OAA.

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VSU Continued

2. The Virginia State University Public Health Institute's (VSUPHI) "**Leveraging Workforce Needs**" project is recommended for **new funding of \$90,100** to address workforce needs for abatement efforts. In this project, VSU seeks to educate and prepare certified peer recovery specialists, Virginia certified substance abuse counselors (adult), and Virginia certified drug and alcohol counselors. VSU will also coordinate pipeline opportunities for Virginia State University psychology and social work students, as well as provide training for risk counselors, STI testing, HIV education, and motivational interviewing as a component of this project.

VSU agrees to participate in OAA-led coordination meetings with other postsecondary educational institutions with similar programs to achieve maximum efficiencies in achieving shared outcome goals.

3. The Virginia State University Public Health Institute's (VSUPHI) "**Mobilization of Access for Underserved and Marginalized Communities**" project is recommended for **new funding of \$169,534** to identify and address needs and disparities in access to abatement efforts for people in traditionally disadvantaged communities. As a part of this effort, VSU will identify stigmas of treatment and recovery programs, increase engagements in treatment and recovery programs by 30%, evaluate evidence-based programs for comparative analysis to VSU's community, and determine cultural and environmental norms, beliefs, values, and associated misinformation and misperceptions concerning opioids.

VSU agrees that the analysis and solutions developed from this project will be made publicly available. VSU will also work to assist any organization throughout the Commonwealth that is looking to implement any program modifications identified as a result of this project.