VIRGINIA OPIOID ABATEMENT AUTHORITY RECOMMENDATIONS FOR STATE AGENCY AWARDS FOR PERIOD OF PERFORMANCE YEAR 2025-2026

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Executive Summary

Agencies from March 17, 2025, through May 27, 2025. The OAA launched its new Web-Based Grants Portal in October 2024. Through this portal OAA, cities, counties, and state agencies manage all activities involving the OAA including applications, proposals, award packages, MOUs, amendments, renewals, annual reports, and more.

During the 2025-2026 proposal cycle, the OAA received 43 proposals, 30 proposing renewal of active projects and 13 proposing the establishment of new projects. The proposals came from 18 different agencies across the areas of Health and Human Resources, Public Safety, Education, Judicial branch, and independent agencies. This included 2 agencies submitting their first proposals for OAA funding.

The subsequent pages of this document provide a list of standard conditions for all OAA state agency awards, summary information of each project's funding request, and OAA staff's related recommendations. Clicking on the link in the "Project Title" column will open the Grant Summary and Recommendations document for that project which contains the additional project and recommendation details.

OAA staff has recommend funding all 30 renewal projects and 8 new projects. The total OAA funds recommended for performance period (PP) 2025-2026 awards is **$14,054,131** with details by application funding source below.

Summary of State Agency Funding Proposals and Staff Recommendations

PP 2024-2025 Carryforward Requested	PP 2025-2026 Requested	PP 2024-2025 Carryforward Recommended	PP 2025-2026 State Agency Recommended	PP 2025-2026 Unrestricted Recommended
$1,774,936	**$15,985,790**	**$1,774,936**	**$9,379,006**	**$4,675,125**

Total PP2025-2026 Recommended Funding:	**$14,054,131**

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 Year (October 1, 2025, to September 30, 2026).
6	For all projects awarded a renewal, the awarded agencies will need to complete and submit a Carryforward True-Up Report by 11:59 pm on October 20, 2025 via the OAA Grants Portal. This report will allow agencies to provide the OAA with the final carryforward amount from the 2024-2025 performance period year and OAA to determine if any adjustment to the 2025-2026 award are necessary.
7	The formal execution of a memorandum of understanding (MOU) between OAA and the recipient agency will form the basis of the award. Upon completion of the MOU, the OAA will work with its fiscal agent and the recipient agency to begin the process to transfer the appropriation and funding as soon as practicably possible on or after October 1, 2025; however, the OAA reserves the right to withhold appropriation and/or funding if any conditions have not been met.
8	Unless otherwise noted in the appendix of the MOU detailing the project awarded, each recipient may request up to four 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 proposal submitted to the OAA was required to include certain performance measures. Many of the proposals that were submitted were revised during the review process, leading ultimately to scope changes and different funding recommendations than what the agency originally requested. Accordingly, in some cases, the performance measures will need to be updated to reflect the final approved scope and budget. In these cases, the OAA will work with the recipient agency 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.
12	The agency acknowledges that it will ensure appropriate staff and/or partners are subscribed and regularly reviewing the contents of OAA's primary form of broad communication for applicants and awardees, the "Virginia Opioid Abatement Authority News Update" newsletter where OAA publishes pertinent information and requirements including dues dates, instructions, guidance, etc. that all applicants and awardees are required to follow.

The below information for each agency represents the proposal and OAA staff recommendations for each project.

Department of Behavioral Health and Developmental Services (DBHDS)							
						PP24-25 Carryforward =	$34,128
Total Recommendation =	**$680,613**	**Total Recommendation Details:**				PP25-26 State =	$646,485
						PP25-26 Unrestricted =	$0

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Recovery High School	2	N/A	N/A	N/A	N/A	N/A	**N/A**

Project Summary: ***This is a no cost amendment to the 2024-2025 period of performance to correctly align this project's scope.*** This project provided funding to DBHDS to work on planning for the next recovery high school location(s) The scope of this project was amended along with the renewal for the 2024-2025 performance period to support a general assembly action that provided funding for two new recovery high schools. It was determined that those new recovery high schools did not need additional planning funds and thus this project's was continued under its original scope after consultation with OAA staff. This s is an administrative adjustment only to properly align the scope of the project. Project work has been completed and this award will end with the current performance period (September 30, 2025).

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Substance Use Data Analyst	3	$34,128	$149,113	$34,128	$114,985	$0	**$149,113**

Project Summary: This Virginia Department of Behavioral Health and Developmental Services project is recommended for a Year 3 **renewal of $114,985** and a recommended **PP 2024-2025 carryforward amount of $34,128** 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.

Evidence-Based Practice: Molecular Psychiatry (2022). *Data Needs and Models for the Opioid Epidemic* -https://doi.org/10.1038/s41380-021-01356-y

Project Specific Contingencies: The agency agrees to reallocate half of the PP 2024-2025 carryforward amount ($17,064) for personnel-related expenses associated with this project.

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Judicial Substance Use Training Program	3	$0	$146,500	$0	$146,500	$0	**$146,500**

Project Summary: This DBHDS project is recommended for a Year 3 **renewal of $146,500** to develop a training 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. This training will be offered by DBHDS, in partnership with Virginia Polytechnic Institute and State University and the Training Committee of the Office of the Executive Secretary of the Supreme Court, to 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.

Evidence-Based Practice: Bahl, N. K. H., Øversveen, E., Brodahl, M., Nafstad, H. E., Blakar, R. M., Ness, O., ... & Tømmervik, K. (2022). *In what ways do emerging adults with substance use problems experience their communities as influencing their personal recovery processes?* Journal of Community Psychology, 50(7), 3070-3100.

Project Specific Contingencies: 1) The agency is required to submit expenditure documentation to the OAA accounting for the use of the initial OAA award amount of $200,000 disbursed for this project during PP 2023–2024.
2) The OAA will release $46,500 of the awarded amount to DBHDS with the release of the remaining awarded funds ($100,000) contingent on DBHDS' completion of OAA-requested items related to the review and revision of the curriculum and training plan that was developed as a result of this project. This project implementation structure may extend the project's timeline into the 2026-2027 performance period, if needed.

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Virginia Recovery Corps	2	$0	$385,000	$0	$385,000	$0	**$385,000**

Project Summary: This DBHDS project is recommended for a Year 2 **renewal of $385,000** to enable continuing collaboration with VIDC and 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. Project will support 65 Peer Navigator positions.

Evidence-Based Practice: Substance Abuse and Mental Health Services Administration (SAMHSA), *Peer Support Services in Crisis Care* (2022).

Project Specific Contingencies: The agency must complete and submit a written agreement between the agency and the subrecipient, Recovery Corps (Ampact-Recovery Corps), detailing budget, scope, performance measures, expectations, etc. before the OAA will transfer awarded funds. This can be in the form of a contract, MOU, or other written agreement.

Virginia Department of Corrections (DOC)

PP24-25 Carryforward = $58,673

Total Recommendation = $1,156,247 | **Total Recommendation Details:** | PP25-26 State = $927,654

PP25-26 Unrestricted = $169,920

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Medication Assisted Treatment Social Workers at MAT Pilot Institutions	3	$58,673	$927,654	$58,673	$927,654	$0	**$986,327**

Project Summary: This Virginia Department of Corrections project is recommended for a Year 3 **renewal of $927,654** with a recommended **PP 2024-2025 carryforward amount of $58,673** to add five (5) MAT social workers (located at DOC specialized SUD program sites) plus allow for the continuation of six (6) existing MAT social workers to 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 programs and contribute to improved patient outcomes, improved success in re-entry to the community, decreased overdoses, and reduced rates of recidivism.

Evidence-Based Practice: Winhusen T, Walley A, Fanucchi LC, Hunt T, Lyons M, Lofwall M, Brown JL, Freeman PR, Nunes E, Beers D, Saitz R, Stambaugh L, Oga EA, Herron N, Baker T, Cook CD, Roberts MF, Alford DP, Starrels JL, Chandler RK. *The Opioid-overdose Reduction Continuum of Care Approach (ORCCA): Evidence-based practices in the HEALing Communities Study* . Drug Alcohol Depend. 2020 Dec 1;217:108325. doi: 10.1016/j.drugalcdep.2020.108325. Epub 2020 Oct 4. PMID: 33091842; PMCID: PMC7533113.

Project Specific Contingencies: N/A

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Reentry Wellness Kit Contents	N/A	N/A	$240,000.00	N/A	$0	$0	**$0**

Project Summary: ***This project is not recommended for funding due to OAA PP 2025-2026 budgetary constraints .*** This VADOC project was proposed to expand the agency's Naloxone Take Home Kit initiative to provide essential overdose response, harm reduction, and health supplies such as Naloxone, medication destruction packs, pregnancy tests, wound care supplies, and linkages to community resources for all individuals who are released from VADOC correctional centers and Community Corrections Alternative Programs (CCAPs). This project would be jointly funded by VADOC and the Virginia Department of Health (VDH).

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Naloxone Distribution for Probationers	1	N/A	$169,920	N/A	$0	$169,920	**$169,920**

Project Summary: This VADOC project is recommended for **new funding of $169,920** to implement a pilot Naloxone dispensing box in six (6) VADOC probation districts (Fredericksburg, Farmville, Portsmouth, Virginia Beach, Abingdon, and Norton) with two dispensing boxes in each region of the department. Each dispensing box will supply 2-dose Naloxone kits and the boxes will be mounted inside of the probation office (based on locations listed).

Evidence-Based Practice: Fischer LS, Asher A, Stein R, Becasen J, Doreson A, Mermin J, Meltzer MI, Edlin BR. *Effectiveness of naloxone distribution in community settings to reduce opioid overdose deaths among people who use drugs: a systematic review and meta-analysis.* BMC Public Health. 2025 Mar 25;25(1):1135. doi: 10.1186/s12889-025-22210-8. PMID: 40133970; PMCID: PMC11934755.

Project Specific Contingencies: N/A

Virginia Department of Education(DOE)

PP24-25 Carryforward = $40,000

Total Recommendation = $1,078,950 | **Total Recommendation Details:** | PP25-26 State = $520,250

PP25-26 Unrestricted = $518,700

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Opioid Abatement Education Plan (OAEP)	3	$40,000	$520,250	$40,000	$520,250	$0	**$560,250**

Project Summary: This Virginia Department of Education project is recommended for Year 3 **renewal funding of $520,250** and **recommended for PP 2024-2025 carryforward of $40,000** 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 develop professional development resources (including online training modules aligned with Health Standards of Learning), expand community engagement, and collaborate with school administrators, officials, and community organizations to build a sustainable infrastructure for opioid prevention in Virginia schools.

Evidence-Based Practice: https://nida.nih.gov/research-topics/prevention#:~:text=Evidence%2Dbased%20prevention%20strategies%20can,of%20developing%20substance%20use%20disorders

Project Specific Contingencies: DOE agrees to continue participating in OAA-led coordination meetings with other OAA-funded organizations that offer media campaigns and prevention/education programs directed toward youth.

Department of Education Continued on Next Page

Department of Education Continued

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Virginia Recovery Schools Technical Assistance and Grant Program	1	N/A	$518,700	N/A	$0	$518,700	**$518,700**

Project Summary: This VDOE project is recommended for **new unrestricted funding of $518,700** to establish the Virginia Recovery Schools Technical Assistance and Grant Program to support the development of existing recovery high schools in providing both academic instruction and therapeutic services to students recovering from substance use disorders. Through this initiative, the project would provide existing recovery schools with technical guidance, professional development, and financial resources (through an RFP grant process) necessary to implement and sustain the recovery schools across the Commonwealth.

Evidence-Based Practice: Substance Abuse and Mental Health Services Administration (SAMHSA) Advisory: Screening and Treatment of Substance Use Disorders Among Adolescents – a summary of key messages and considerations for screening and treating substance use disorders for adolescents based on SAMHSA's treatment improvement protocol for screening and treatment for this population. https://store.samhsa.gov/sites/default/files/pep20-06-04-008.pdf

Project Specific Contingencies: The fiscal agent must complete and submit a written agreement between the Virginia Department of Education and each subrecipient [Association of Recovery schools and TBD vendors/contractors] detailing budget, scope, performance measures, expectations, etc. before the OAA will transfer awarded funds. This can be in the form of a contract, MOU, or other written mechanism.

Virginia Department of Health (VDH)

PP24-25 Carryforward = $623,999

Total Recommendation = $3,282,391

Total Recommendation Details:

PP25-26 State = $1,526,962

PP25-26 Unrestricted = $1,131,430

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Comprehensive Harm Reduction	3	$94,196	$1,030,499	$94,196	$905,804	$0	**$1,000,000**

Project Summary: This Virginia Department of Health project is recommended for Year 3 **renewal funding of $905,804** and recommended for **PP 2024-2025 carryforward of $94,196** to expand the number of Comprehensive Harm Reduction (CHR) sites from 10 to 19 by 2028 to provide overdose prevention services. This 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.

Evidence-Based Practice: https://www.samhsa.gov/sites/default/files/samhsa-strategic-plan.pdf

Project Specific Contingencies: The agency also agrees to provide the OAA with the exact amount of PP 2024-2025 carryforward through OAA reporting requirements. Any resulting amendment requests for remaining PP 2024-2025 carryforward funds will need to consist of one-time costs that do not create an obligation for additional funding for subsequent funding requests.

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Naloxone Distribution Program Infrastructure	3	$328,522	$298,067	$328,522	$298,067	$0	**$626,589**

Project Summary: This VDH project is recommended for Year 3 **renewal funding of $298,067** and recommended for **PP 2024-2025 carryforward of $328,522** to continue supporting the agency's infrastructure to support statewide naloxone and harm reduction test strip distribution, with a focus on expanding access, improving equity, and enhancing data and outreach capabilities.

Evidence-Based Practice: https://www.cdc.gov/overdose-prevention/hcp/toolkits/naloxone.html

Project Specific Contingencies: Agency to provide the OAA with a detailed report regarding the project accomplishments to improve the response of Naloxone distribution.

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Local Opioid Use Disorder Coordinators	3	$59,898	$246,144	$59,898	$246,144	$0	**$306,042**

Project Summary: This VDH project is recommended for Year 3 **renewal funding of $246,144** and recommended for **PP 2024-2025 carryforward of $59,898** to continue support for three OUD coordinator positions at the Richmond-Henrico, Hampton & Peninsula, and Portsmouth Health Districts. In these districts, the OUD 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).

Evidence-Based Practice: https://www.cdc.gov/drugoverdose/pdf/pubs/2018-evidence-based-strategies.pdf

Project Specific Contingencies: N/A

Virginia Department of Health Continued on Next Page

Virginia Department of Health Continued

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Overdose Prevention Strategist - West Piedmont Health District	2	$56,726	$27,142	$56,726	$27,142	$0	**$83,868**

Project Summary: This VDH project is recommended for Year 2 **renewal funding of $27,142** and recommended for **PP 2024-2025 carryforward of $56,726** to continue funding for the 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 this project, in collaboration with the West Piedmont Health District, 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.

Evidence-Based Practice: https://www.cdc.gov/drugoverdose/pdf/pubs/2018-evidence-based-strategies.pdf

Project Specific Contingencies: VDH agrees that this effort will be funded outside of the cost sharing budget of the health district and its localities.

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Naloxone Purchase	3	$0	$1,000,010	$0	$0	$500,000	**$500,000**

Project Summary: This VDH project is recommended for Year 3 **renewal funding of $500,000 (unrestricted support)** for the purchase of intranasal naloxone for distribution by the agency.

Evidence-Based Practice: https://www.cdc.gov/overdose-prevention/hcp/toolkits/naloxone.html

Project Specific Contingencies: The agency must demonstrate the expenditure/encumbrance of all other funds used to purchase naloxone before using OAA funding as last resort.

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Coordinating Local and Regional Overdose Review Teams	2	$84,657	$49,805	$84,657	$49,805	$0	**$134,462**

Project Summary: This VDH project is recommended for Year 2 **renewal funding of $49,805** and recommended for **PP 2024-2025 carryforward of $84,657** to support the continuation of a standardized approach for local and regional overdose review teams to effectively collect and analyze data to inform evidence-based interventions and policy decisions aimed at curbing overdose fatalities and improving community health outcomes.

Evidence-Based Practice: https://store.samhsa.gov/sites/default/files/d7/priv/sma18-4742.pdf

Project Specific Contingencies: N/A

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Harm Reduction for Pregnant Women Pilot Project	1	N/A	$631,430	N/A	$0	$631,430	**$631,430**

Project Summary: This VDH project is recommended for **new funding of $631,430 (unrestricted support)** to target women who are pregnant and currently using drugs, particularly opioids. Women of childbearing age who may or may not be pregnant will be offered services to determine their pregnancy status and need for contraceptives pending a negative pregnancy status. VDH will partner with three comprehensive harm reduction sites (Virginia Harm Reduction Coalition, Strength in Peers, and Minority AIDS Support services to provide services across the northwest, southwest, and eastern regions of the Commonwealth.

Evidence-Based Practice: Data was utilized from the Virginia Department of Health Office of Information Management and Office of the Chief Medical Examiner to indicate from 2019-2023, 11,551 women of childbearing age were treated at a hospital for an overdose. Also, in that same period, 2,887 tested positive for opioid use during the delivery. In 2018, there were 388 hospitalizations for neonatal abstinence syndrome. From 2018-2023, 57 women have died of an overdose while pregnant.

Project Specific Contingencies: The agency must complete and submit a written agreement between the agency and each subrecipient detailing budget, scope, performance measures, expectations, etc. before the OAA will transfer awarded funds. This can be in the form of a contract, MOU, or other written mechanism.

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
State Adaptation of Pregnancy and Substance Use: A Harm Reduction Toolkit	N/A	N/A	$25,000	N/A	$0	$0	**$0**

Project Summary: ***This project is not recommended for funding due to OAA PP 2025-2026 budgetary constraints.*** This VDH new project was proposed for the development of a Virginia version of the Pregnancy and Substance Use Harm Reduction toolkit, in partnership with the Academy of Perinatal Harm Reduction. OAA funding was requested for content development and graphic design services to revise the Academy of Perinatal Harm Reduction's toolkit to include local Virginia resources for healthcare providers, peer recovery specialists, doulas, community health workers, community-based organizations, and pregnant and parenting women with SUD, including their families. The toolkit would contain related to doula care, methadone and buprenorphine resources, naloxone training and distribution, as well as information regarding legal considerations related to Virginia's legal and child welfare policies, Medicaid, SNAP, WIC, suicide prevention hotline, and family planning benefits/services.

Virginia Department of Health Continued on Next Page

Virginia Department of Health Continued

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Expansion of Emergency Discharge Data	N/A	N/A	$250,000	N/A	$0	$0	**$0**

Project Summary: ***This project is not recommended for funding due to OAA PP 2025-2026 budgetary constraints.*** This new project was proposed to update the outpatient Patient Level Dataset (PLD) to include data from emergency departments and all outpatient surgeries/procedures in an effort to improve the understanding of public health conditions, including but not limited to opioid overdose, to support the agency and stakeholders in improving and implementing services that result in better health outcomes for Virginians. VDH is required by the Center for Disease Control (CDC) to capture and report specific data as a federal requirement. However, the current VDH reporting systems do not provide VDH with access to comprehensive and standardized discharge data from patients who are seen in a healthcare outpatient setting, including through hospital emergency departments.

Department of Health Professions (DHP)

PP24-25 Carryforward = $0

Total Recommendation = $361,219 | **Total Recommendation Details:** | PP25-26 State = $361,219

PP25-26 Unrestricted = $0

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Integration of Prescription Monitoring Program (PMP) into Clinical Workflows	3	$0	$361,219	$0	$361,219	$0	**$361,219**

Project Summary: This Virginia Department of Health Professions project is recommended for Year 3 **renewal funding of $361,219** to continue connecting the prescription monitoring program to prescribers' electronic health records and pharmacists' 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.

Evidence-Based Practice: Center for Disease Control, Overdose Prevention. *Prescription Drug Monitoring Programs (PMPs)* https://www.cdc.gov/overdose-prevention/hcp/clinical-guidance/prescription-drug-monitoring-programs.html#:~:text=Key%20points,potentially%20lifesaving%20information%20and%20interventions

Project Specific Contingencies: The agency also agrees to provide the OAA with the exact amount of PP 2024-2025 carryforward through OAA reporting requirements. Any resulting amendment requests for remaining PP 2024-2025 carryforward funds will need to consist of one-time costs that do not create an obligation for additional funding for subsequent funding requests.

Department of Medical Assistance Services (DMAS)

PP24-25 Carryforward = $75,000

Total Recommendation = $1,050,000 | **Total Recommendation Details:** | PP25-26 State = $75,000

PP25-26 Unrestricted = $900,000

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Discharge Bridge Program	3	$75,000	$975,000	$75,000	$75,000	$900,000	**$1,050,000**

Project Summary: This multi-year, multi-step Department of Medical Assistance Services project is recommended for a Year 3 **renewal of $975,000 ($900,000 unrestricted support)** and recommended for **PP 2024-2025 carryforward of $75,000** to assist hospitals and health groups implement Discharge Bridge Expansion (DBE) programs, which will provide hospitals with funding and training resources. DMAS anticipates providing three hospitals with DBE funding to incentivize hospitals and health groups to provide stronger connections to community-based treatment for individuals who have experienced an overdose emergency.

Evidence-Based Practice: https://www.sciencedirect.com/science/article/pii/S0740547221001367

Project Specific Contingencies: 1) This renewal is contingent on Medicaid funding still being available to support the project implementation. **2)** The agency agrees to provide the OAA with information regarding its selected subrecipient awards(s) for the DBE program(s) including subrecipient details, copies of all relevant agreements between DMAS and the subrecipients, and final budgets for each award before the OAA will transfer awarded funds. **3)** The agency will ensure the subrecipient hospitals recognize these are one-time funds per hospital and the agency expects the DBE program to continue after the funding year is complete.

Department of Social Services (DSS)

PP24-25 Carryforward = $0

Total Recommendation = $702,247 | **Total Recommendation Details:** | PP25-26 State = $702,247

PP25-26 Unrestricted = $0

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Expand Kinship Care Navigators	3	$0	$411,000	$0	$411,000	$0	**$411,000**

Project Summary: This DSS project is recommended for a Year 3 **renewal of $411,000** to assist low-income kinship care provides with costs they incur by providing kinship care (i.e., concrete supports) and to obtain a data-tracking system to ensure consistent and accurate reporting. During PP 2024-2025, DSS partnered with a vendor to conduct a comprehensive Community Landscape Assessment to evaluate the readiness, opportunities, and pathways for expanding this Kinship Navigator program across the state while prioritizing localities where there are identified needs, gaps in services, and a willingness to host the program. This assessment has better positioned DSS to maximize federal funding opportunities to support this program in the future.

Evidence-Based Practice: https://acf.gov/opre/resource-library

Project Specific Contingencies: N/A

Department of Social Services Continued on Next Page

Department of Social Services Continued

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
211 Opioid Reduction Registry (ORR)	2	$0	$291,247	$0	$291,247	$0	**$291,247**

Project Summary: This DSS project is recommended for a Year 2 **renewal of $291,247** to support the Opioid Reduction Registry (ORR) continued integration into the operations of 211 Virginia, Virginia's premier and statewide information and referral service. As a part of this effort, DSS will partner with many local organizations dedicated to combating substance use - particularly opioid misuse. This project includes 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 continuation of the 211 Virginia Resource Database and the 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. DSS has an active contract with DBHDS to cooperate and coordinate access to the @11 Virginia Resource Directory by the 988 Suicide and Crisis Lifeline, using an application programming interact established in partnership with the United Way Worldwide 211 National Data Platform.

Evidence-Based Practice: https://www.nimh.nih.gov/research/research-funded-by-nimh/research-initiatives/helping-to-end-addiction-long-termr-initiative-nih-heal-initiativer#:~:text=However%2C%20in%202020%2C%20more%20than,experience%20acute%20or%20chronic%20pain.

Project Specific Contingencies: The agency also agrees to provide the OAA with the exact amount of PP 2024-2025 carryforward through OAA reporting requirements. Any resulting amendment requests for remaining PP 2024-2025 carryforward funds will need to consist of one-time costs that do not create an obligation for additional funding for subsequent funding requests.

George Mason University (GMU)

PP24-25 Carryforward = $0

Total Recommendation = $200,000 | **Total Recommendation Details:** PP25-26 State = $200,000

PP25-26 Unrestricted = $0

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Bridge MOUD Warm Line Pilot Project	1	N/A	$200,000	N/A	$200,000	$0	**$200,000**

Project Summary: This George Mason University pilot project is recommended for **new funding of $200,000** for a Bridge MOUD Warm Line to be developed through regional partnerships and tailored community infrastructure-building. This warm line will serve as a centralized, data-driven initiative to expand access to evidence-based treatment and recovery services for individuals with opioid use disorder. Anchored in Northern Virginia, the Hub will scale Bridge MOUD services through EMS, emergency departments, and criminal justice partners. The initiative will expand partnerships across Northern Virginia and Central Virginia (Richmond, Chesterfield) during Year 1.

Evidence-based Practice: D'Onofrio, G., O'Connor, P. G., Pantalon, M. V., Chawarski, M. C., Busch, S. H., Owens, P. H., Bernstein, S. L., & Fiellin, D. A. (2015). *Emergency department-initiated buprenorphine/naloxone treatment for opioid dependence: a randomized clinical trial.* JAMA, 313(16), 1636–1644. https://doi.org/10.1001/jama.2015.3474.

Project Specific Contingencies: The agency acknowledges that this award is for a 1-year pilot project and the performance of the agency will impact the OAA's decision in renewing and/or potentially increasing funds for future years.

Office of the Attorney General (OAG)

PP24-25 Carryforward = $0

Total Recommendation = $500,000 | **Total Recommendation Details:** PP25-26 State = $500,000

PP25-26 Unrestricted = $0

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Opioid and Fentanyl Prevention Awareness Campaign	3	$0	$500,000	$0	$500,000	$0	**$500,000**

Project Summary: This Office of the Attorney General project is recommended for a Year 3 **renewal of $500,000** to continue 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 "Get Smart About Drugs" campaigns from the U.S. Drug Enforcement Administration (DEA). The OAG will refine its opioid awareness campaign to enhance measurement methods, expand audience reach, and improve overall campaign impact. To ensure alignment across campaign objectives, the OAG will shift from tracking only the number of purchased radio and television advertisements to measuring audience impressions. This adjustment will allow for a more accurate understanding of campaign reach and engagement. Additionally, the OAG is proposing the discontinue of the "Coaches vs. Overdoses" program to redirect those resources towards targeting high school, college, and university audiences. This reallocation is projected to significantly increase campaign reach, allowing prevention and awareness messaging to be delivered to hundreds of thousands of students statewide.

Evidence-Based Practice: Lefebvre RC, Chandler RK, Helme DW, Kerner R, Mann S, Stein MD, Reynolds J, Slater MD, Anakaraonye AR, Beard D, Burrus O, Frkovich J, Hedrick H, Lewis N, Rodgers E. *Health communication campaigns to drive demand for evidence-based practices and reduce stigma in the HEALing communities study* . Drug Alcohol Depend. 2020 Dec 1;217:108338. doi: 10.1016/j.drugalcdep.2020.108338. Epub 2020 Oct 5. PMID: 33152673; PMCID: PMC7534788.

Project Specific Contingencies: N/A

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

PP24-25 Carryforward = $63,091

Total Recommendation = $563,091 | **Total Recommendation Details:** | PP25-26 State = $500,000

PP25-26 Unrestricted = $0

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Statewide Universal Drug Testing Contract	3	$63,091	$980,091	$63,091	$500,000	$0	**$563,091**

Project Summary: This Office of the Executive Secretary of the Supreme Court project is recommended for a Year 3 **renewal of $500,000** and recommended for **PP 2024-2025 carryforward of $63,091** to continue the agency's efforts of promoting a statewide best practices standard for drug testing within all alternative dockets. OES will use these awarded funds to promote awareness regarding the developed standards 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 based on the OES standard.

Evidence-Based Practice: https://www.nadcp.org/standards/adult-drug-court-best-practice-standards/

Project Specific Contingencies: N/A

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
GAIN-SS Assessment Tool Project	N/A	N/A	$20,000	N/A	$0	$0	**$0**

Project Summary: ***This project is not recommended for funding due to OAA PP 2025-2026 budgetary constraints.*** This OES new project was proposed for the implementation of the Global Appraisal of Individual Needs - Short Screener (GAIN-SS) universal assessment tool throughout Virginia specialty dockets to better identify and serve individuals with substance use disorders, particularly opioid use disorder.

Radford University

PP24-25 Carryforward = $109,200

Total Recommendation = $367,408 | **Total Recommendation Details:** | PP25-26 State = $258,208

PP25-26 Unrestricted = $0

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Healing, Outreach, Prevention, and Empowerment (Project HOPE)	3	$109,200	$258,208	$109,200	$258,208	$0	**$367,408**

Project Summary: This Radford University project is recommended for a Year 3 **renewal of $258,208** and recommended for **PP 2024-2025 carryforward of $109,200** to continue expanding the existing Radford Collegiate Recovery Program with enhanced outreach and awareness, overdose prevention, healthcare screening and connections, implementation of a "warm hand-off" process, and support for the 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. 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.

Evidence-Based Practice: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6037516/

Project Specific Contingencies: N/A

University of Mary Washington (UMW)

PP24-25 Carryforward = $0

Total Recommendation = $104,227 | **Total Recommendation Details:** | PP25-26 State = $104,227

PP25-26 Unrestricted = $0

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Supporting Student Well-Being and Recovery at the University of Mary Washington	1	N/A	$104,227	N/A	$104,227	$0	**$104,227**

Project Summary: The University of Mary Washington is recommended for **new funding of $104,227** to support the "Eagles in Recovery" program. The "Eagles in Recovery" collegiate recovery program provides a supportive space for students who identify as being in recovery, are exploring recovery, are affected by the substance use of a family member or close friend, or who wish to learn more about substance use and recovery. The program also welcomes individuals who want to support peers and contribute to a more informed and inclusive campus community. As part of this initiative, the Health and Well-being Student Intern (HWSI) will develop and share health-related messaging using social media and other outreach tools. The intern's focus includes promoting wellness, increasing awareness of on-campus resources, and supporting efforts related to health education, risk reduction, and self-care. Eagles in Recovery contributes to a campus environment that values connection, well-being, and student support.

Evidence-Based Practice: https://www.bu.edu/sph/news/articles/2025/inclusive-peer-support-groups-are-expanding-at-us-colleges-but-stable-funding-is-needed/

Project Specific Contingencies: The fiscal agent must complete and submit a written agreement between the fiscal agent (UMW) and each subrecipient detailing budget, scope, performance measures, expectations, etc. before the OAA will transfer awarded funds. This can be in the form of a contract, MOU, or other written mechanism.

University of Virginia (UVA)

PP24-25 Carryforward = $157,512
PP25-26 State = $269,489
PP25-26 Unrestricted = $215,075

Total Recommendation = $642,076 **Total Recommendation Details:**

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
COSMOS (Community Outreach and Support for Management of SUD)	2	$80,136	$215,075	$80,136	$0	$215,075	**$295,211**

Project Summary: This University of Virginia two-year pilot project is recommended for a Year 2 **renewal of $215,075** and recommended for **PP 2024-2025 carryforward of $80,136** to continue 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 renewal funding to continue enrolling 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.

Evidence-Based Practice: https://jamanetwork.com/journals/jamapsychiatry/fullarticle/2778020#google_vignette

Project Specific Contingencies: 1) The fiscal agent must complete and submit a written agreement between the agency (UVA) and each subrecipient, Dynamic are Health, detailing budget, scope, performance measures, expectations, etc. before the OAA will transfer awarded funds. This can be in the form of a contract, MOU, or other written mechanism. **2)** The agency agrees to provide the OAA with a detailed progress report as a part of any future renewal requests for this project. **3)** 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. **4)** The agency agrees this is a pilot program scheduled to run for two years and will provide the OAA with any required approvals and/or releases from the proper oversight boards before program implementation.

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Street Medicine Access Reduction and Treatment (SMART) Clinic	3	$77,376	$269,489	$77,376	$269,489	$0	**$346,865**

Project Summary: This UVA project is recommended for a Year 3 **renewal of $269,489** and recommended for **PP 2024-2025 carryforward of $77,376** to continue their efforts related to the "street medicine" clinic connected to the multi-resource day shelter known as "The Haven". 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). This program's Year 3 efforts include expansion of comprehensive harm reduction services and additional hands-on support/individualized focus to support recovery.

Evidence-Based Practice: Wagner NM, Kempe A, Barnard JG, Rinehart DJ, Havranek EP, Glasgow RE, et al. *Qualitative exploration of public health vending machines in young adults who misuse opioids: A promising strategy to increase naloxone access in a high risk underserved population.* Drug Alcohol Depend Reports. 2022 Dec;5:100094.

Project Specific Contingencies: 1) The agency agrees to present harm reduction efforts to the OAA prior to their implementation. **2)** The agency also agrees that 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. **3)** The agency agrees to present harm reduction efforts to the OAA prior to their implementation. The further agrees to abide by all state and federal laws including, but not limited to, Virginia Code §§ 18.2-265.1, 32.1-45.4, and 54.1-3466. Further, the fiscal agent and all partner cities and/or counties agree that any Drug Checking Services (DCS) will be performed solely for approved opioid abatement efforts; DCS will not be performed to or for the benefit of drug dealers, drug sellers, or any other third parties seeking such services. Additionally, the fiscal agent agrees it is responsible for ensuring any subrecipients, vendors, and/or other organizations that may be engaged in providing these services follow the above requirements listed. **4)** The agency agrees that 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.

Virginia Commonwealth University (VCU)

PP24-25 Carryforward = $55,224
PP25-26 State = $1,075,106
PP25-26 Unrestricted = $0

Total Recommendation = $1,130,330 **Total Recommendation Details:**

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Virginia Opioid Toolkit	3	$0	$240,045	$0	$240,045	$0	**$240,045**

Project Summary: This Virginia Commonwealth University (VCU) project is recommended for a Year 3 **renewal of $240,045** to support the continuation of the VCU Wright Center for Clinical and Translational Research in its efforts to expand 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 provides 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.

Evidence-Based Practice: Ochalek TA, Cumpston KL, Wills BK, Gal TS, Moeller FG. *Nonfatal Opioid Overdoses at an Urban Emergency Department During the COVID-19 Pandemic.* Jama. Sep 18 2020;PMC7501586 doi:10.1001/jama.2020.17477

Project Specific Contingencies: N/A

Virginia Commonwealth University Continued on Next Page

Virginia Commonwealth University Continued

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Massey Cancer Center at VCU Health	3	$55,224	$139,776	$55,224	$139,776	$0	**$195,000**

Project Summary: This VCU project is recommended for a Year 3 **renewal of $139,776** and recommended for **PP 2024-2025 carryforward of $55,224** 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.

Evidence-Based Practice: Pergolizzi J, Magnusson P, Clu·isto P, LeQuang J, Breve F, Mitchell K, Varrassi G. *Opioid therapy in cancer patients and survivors at risk of addiction, misuse or complex dependency.* Front Pain Res. 2021;2. https://doi.org/10.3389/fpain.2021.691720

Project Specific Contingencies: N/A

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Virginia Naloxone Project	2	$0	$511,661	$0	$511,661	$0	**$511,661**

Project Summary: This VCU project is recommended for Year 2 **renewal funding of $511,661** to continue this 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 agency will continue with the emergency department based take-home Naloxone programs for at-risk patients, as well as continue to improve connections to addiction treatment services and develop data collection and continuous quality improvement program structures. VCU will work collaboratively with the Virginia Tech Carilon 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.

Evidence-Based Practice: https://www.acep.org/patient-care/policy-statements/naloxone-access-and-utilization-for-suspected-opioid-overdoses; Weiner SG, Baker O, Bernson D, Schuur JD. *One-Year Mortality of Patients After Emergency Department Treatment for Nonfatal Opioid Overdose* . Ann Emerg Med. 2020 Jan;75(1):13-17. PMID: 31229387

Project Specific Contingencies: The agency agrees to participate in OAA-led coordination meetings with other organizations that conduct similar efforts to achieve maximum efficiencies in meeting shared outcomes and goals.

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Fast Track to Certified Substance Abuse Counselor (CSAC)	2	$0	$90,296	$0	$90,296	$0	**$90,296**

Project Summary: This VCU project is recommended for Year 2 **renewal funding of $90,296** to address workforce shortages in addiction and mental healthcare by equipping social work students with the skills and certifications needed to combat the opioid epidemic. This fast-track program focuses on preparing BSW and MSW students for CSAC certification through coursework, clinical internships, and peer recovery specialist training, and includes naloxone training and emerging content on fentanyl and synthetic opioids. The university has updated two MSW-level electives and created one BSW course to address the required CSAC topics, as well as implemented a pilot Certified Peer Recovery Specialist course for students with lived/living experience. Identification and prioritization of clinical field placements for students to meet CSAC experiential requirements (screening, administration of SUD assessment instruments, treatment, SUC crisis intervention, etc.) are underway and VCU has developed a student field guide to outline rigorous expectations for direct service hours with clients and to recommend practice activities that satisfy the outlined requirements.

Evidence-Based Practice: Snyder, C. R., Frogner, B.K., & Skillman, S. M. (2018). *Facilitating racial and ethnic diversity in the health workforce.* Journal of Allied Health, 47(1), 58-65.; https://bhw.hrsa.gov/data-research/projecting-health-workforce-supply-demand; https://www.bls.gov/ooh/community-and-social-service/social-workers.htm

Project Specific Contingencies: The agency agrees participate in OAA-led coordination meetings with other postsecondary educational institutions with similar programs to achieve maximum efficiencies in shared outcomes and goals.

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
RAMS in Recovery Scholars	2	$0	$93,328	$0	$93,328	$0	**$93,328**

Project Summary: This VCU project is recommended for Year 2 **renewal funding of $93,328** to support the expansion of VCU's Recovery Scholars Program (RSP), the flagship initiative of Rams in Recovery and Virginia's largest Collegiate Recovery Program (CRP) by providing structured support and scholarships to students statewide each semester. These funds will support expanded access and capacity for the existing RSP program by increasing the number of scholarships offered to students and the expansion of program staff. This program is based on a best-practice model from Texas Tech University that pairs scholarship funds with supportive programming for students in recovery. 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.

Evidence-Based Practice: https://library.samhsa.gov/product/facing-addiction-america-surgeon-generals-report-alcohol-drugs-and-health-full-report/sma16-4991

Project Specific Contingencies: N/A

Virginia Commonwealth University Continued on Next Page

Virginia Commonwealth University Continued

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Innovating Digital Tools to Foster a Culture of Health for Individuals with OUD	N/A	N/A	$197,019	N/A	$0	$0	**$0**

Project Summary: ***This project is not recommended for funding due to OAA PP 2025-2026 budgetary constraints.*** This VCU new project was proposed for the development and implementation of a machine learning-driven social media campaign aimed at reducing opioid use and overdoses, supporting individuals with OUD, and educating the public to reduce stigma and promote recovery. This project would rely on machine learning to analyze surveys and social media content.

Virginia Cooperative Extension Service (Virginia Tech)

PP24-25 Carryforward = $129,360

Total Recommendation = $1,044,001 | **Total Recommendation Details:** | PP25-26 State = $914,641

PP25-26 Unrestricted = $0

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Virginia Cooperative Extension Service	3	$129,360	$788,328	$129,360	$788,328	$0	**$917,688**

Project Summary: This Virginia Polytechnic Institute and State University (Virginia Cooperative Extension) project is recommended for a Year 3 **renewal of $788,328** and recommended **PP 2024-2025 carryforward of $129,360** to continue the agency's work to offer training for teachers to implement the evidence-based Botvin Life Skills program, Mental Health First Aid (youth or adult), and Adverse Childhood Experiences (ACE) training in schools, as well as VCE's continued partnership in regional substance use education and prevention coalitions. This project will also include an expansion to pilot the "Recovery Your Finances" curriculum to provide financial literacy support for individuals in recovery from substance use disorder.

Evidence-Based Practice: https://www.lifeskillstraining.com/fact-sheet/; https://www.mentalhealthfirstaid.org/; https://liftupvirginia.org/events/understanding-aces-ace-interface-presenter-training-2/

Project Specific Contingencies: The agency agrees to continue participating in OAA-led coordination meetings with organizations that offer prevention educational programs targeting youth.

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Virginia Tech Recovery Community: Fostering a Recovery Integrated Campus	1	N/A	$126,313	N/A	$126,313	$0	**$126,313**

Project Summary: This Virginia Tech (VCE) project is recommended for **new funding of $126,313** to reduce barriers for students recovery from addiction by offering targeted, evidence-informed support in a collegiate environment. This project will build a recovery-integrated campus culture by promoting allyship, inclusive policies, and accessible resources available for students in recovery through overdose prevention, housing scholarships, recovery seminar expansion, recovery programming, mobile outreach, and targeted prevention education.

Evidence-Based Practice: SAMHSA - Key Substance Use and Mental Health Indicators in the United States: Results from the 2023 National Survey on Drug Use and Health.

Project Specific Contingencies: The fiscal agent must complete and submit a written agreement between the fiscal agent Virginia Tech and the project partner, Virginia Department of Health, detailing budget, scope, performance measures, expectations, etc. before the OAA will transfer awarded funds. This can be in the form of a contract, MOU, or other written mechanism.

Virginia Foundation for Healthy Youth (VFHY)

PP24-25 Carryforward = $0

Total Recommendation = $1,740,000 | **Total Recommendation Details:** | PP25-26 State = $0

PP25-26 Unrestricted = $1,740,000

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Deadly Dose - Statewide Fentanyl and Overdose Mapping Campaign: Phase 3	1	N/A	$1,600,000	N/A	$0	$1,600,000	**$1,600,000**

Project Summary: This Virginia Foundation for Healthy Youth (VFHY) project is recommended for **one-time unrestricted funding of $1,600,000** to strengthen opioid overdose prevention by raising awareness of illicit opioid risks, enhancing protective skills, and limiting access through the delivery of targeted messaging on accidental fentanyl poisoning to approximately 1 million Virginians ages 13-24 years old each year, including 350,000 high school-aged youth and 650,000 young adults.

Evidence-Informed Practice: This project is evidence-informed as defined in the OAA Glossary of Terms (i.e., has not been evaluated in a rigorous research study but does incorporate the key features found in effective evidence-based interventions).

Project Specific Contingencies: VFHY will continue participating in OAA-led coordination meetings with other OAA-funded organizations that offer media campaigns and prevention/education programs directed toward youth.

Virginia Foundation for Health Youth Continued on Next Page

Virginia Foundation for Health Youth Continued

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Expanding Access to the Dangers of Fentanyl Lesson	1	N/A	$140,000	N/A	$0	$140,000	**$140,000**

Project Summary: This VFHY project is recommended for **one-time unrestricted funding of $140,000** to expand this program's reach to at least 7,000 high-risk students in both middle and high schools by supporting ongoing evaluation and refinement of previously developed modules (free, evidence-informed lessons designed for high-school students that are widely accessible on the VFHY and *It Only Takes Once* websites) based on statewide feedback from implementation sites. These modules were previously developed with input from educators and researchers and include a lesson plan, implementation guide, and pre/post surveys that can be completed in under an hour by any teacher.

Evidence-Based Practice: This project is evidence-informed as defined in the OAA Glossary of Terms (i.e., has not been evaluated in a rigorous research study but does incorporate the key features found in effective evidence-based interventions).

Project Specific Contingencies: N/A

Virginia Indigent Defense Commission (VIDC)

PP24-25 Carryforward = $239,082

Total Recommendation = $505,533 | **Total Recommendation Details:** | PP25-26 State = $266,451

PP25-26 Unrestricted = $0

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Re-Entry and Recovery Specialist Program	3	$239,082	$266,451	$239,082	$266,451	$0	**$505,533**

Project Summary: This Virginia Indigent Defense Commission (VIDC) project is recommended for Year 3 **renewal funding of $266,451** and recommended for **PP 2024-2025 carryforward of $239,082** to expand peer support and client advocacy services across Virginia's Public Defender offices in response to the opioid crisis. During Year 3, Peer Navigators will be placed in 14 designated Public Defender offices through a partnership with Recovery Corps. These offices include: Chesapeake, Chesterfield, Danville, Fredericksburg, Halifax, Hampton, Lynchburg, Martinsville, Newport News, Norfolk, Portsmouth, Pulaski, Suffolk, and Winchester. Bedford and Smithfield are proposed as alternative sites, if placement at any of the listed primary locations is not feasible. Each site will receive a $15,000 fee (paid in two installments) based on continued placement. Additionally, this renewal project has requested the addition of a Client Advocate position (for placement in Richmond) in partnership with Partners for Justice (PFJ), a nonprofit organization that trains non-attorney advocates to assist clients with case management and access to services.

Evidence-Based Practice: N/A

Project Specific Contingencies: The fiscal agent must complete and submit a written agreement between the fiscal agent (VIDC) and each subrecipient, Recovery Corps and Partners for Justice, detailing budget, scope, performance measures, expectations, etc. before the OAA will transfer awarded funds. This can be in the form of a contract, MOU, or other written agreement.

Virginia State University (VSU)

PP24-25 Carryforward = $189,575

Total Recommendation = $661,969 | **Total Recommendation Details:** | PP25-26 State = $472,394

PP25-26 Unrestricted = $0

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Healthful Engagement for Support, Treatment, Recovery, and Interventions	2	$102,144	$255,589	$102,144	$255,589	$0	**$357,733**

Project Summary: This project is recommended for Year 2 **renewal funding of $255,589** and recommended for **PP 2024-2025 carryforward of $102,144** to improve access to substance use disorder treatment and recovery services for adult residents. VSU will offer individual and group support sessions, along with evidence-based and empirically supported therapies for addiction recovery. The project will also focus on increasing awareness of opioids, substance use, and overdose deaths to help reduce opioid-related overdoses. Additionally, it will support VSU's efforts to provide proactive outreach, screening, and healthcare referrals within the campus community, including the distribution of naloxone and fentanyl test kits, and education on harm reduction strategies.

Evidence-Based Practice: https://library.samhsa.gov/product/overdose-prevention-response-toolkit/pep23-03-00-001

Project Specific Contingencies: The fiscal agent must complete and submit a written agreement between the fiscal agent (VSU) and the subrecipient, VDH Crater Health District, detailing budget, scope, performance measures, expectations, etc. before the OAA will transfer awarded funds. This can be in the form of a contract, MOU, or other written agreement.

Virginia State University Continued on Next Page

Virginia State University Continued

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Leveraging Workforce Needs	2	$15,598	$47,271	$15,598	$47,271	$0	**$62,869**

Project Summary: This VSU project is recommended for Year 2 **renewal funding of $47,271** and recommended for **PP 2024-2025 carryforward of $15,598** to address workforce needs related to abatement efforts. As part of the project, VSU will educate and prepare Certified Peer Recovery Specialists, Virginia Certified Substance Abuse Counselors (Adult), and Virginia Certified Drug and Alcohol Counselors. The university will also coordinate pipeline opportunities for psychology and social work students at Virginia State University and provide training in risk counseling, STI testing, HIV education, and motivational interviewing.

Evidence-Based Practice: https://library.samhsa.gov/product/overdose-prevention-response-toolkit/pep23-03-00-001

Project Specific Contingencies: The fiscal agent must complete and submit a written agreement between the fiscal agent (VSU) and the subrecipient, VDH Crater Health District, detailing budget, scope, performance measures, expectations, etc. before the OAA will transfer awarded funds. This can be in the form of a contract, MOU, or other written agreement.

Project Title	Grant Year	Carryforward Requested	PP25-26 State Requested	Carryforward Recommended	PP25-26 State Recommended	Unrestricted Recommended	Total Recommended
Mobilization of Access for Underserved and Marginalized Communities	2	$71,832	$169,534	$71,832	$169,534	$0	**$241,366**

Project Summary: This VSU project is recommended for Year 2 **renewal funding of $169,534** and recommended for **PP 2024-2025 carryforward of $71,832** to continue identifying and addressing needs and disparities in access to abatement efforts for individuals in traditionally disadvantaged communities. As part of this effort, VSU will: identify stigmas associated with treatment and recovery programs; increase engagement in such programs by 30%; evaluate evidence-based programs for comparative analysis relevant to VSU's community; and assess cultural and environmental norms, beliefs, values, and the associated misinformation and misperceptions surrounding opioid use.

Evidence-Based Practice: https://library.samhsa.gov/product/overdose-prevention-response-toolkit/pep23-03-00-001

Project Specific Contingencies: The fiscal agent must complete and submit a written agreement between the fiscal agent (VSU) and each subrecipient, VDH Crater Health District and H.E.A.R.T.S., detailing budget, scope, performance measures, expectations, etc. before the OAA will transfer awarded funds. This can be in the form of a contract, MOU, or other written agreement.