

**Application to Dispense Naloxone (NARCAN)
as a Harm Reduction Partner Program in Virginia**

Submit completed application by email to: Bruce Taylor, Drug User Health Coordinator at Bruce.taylor@vdh.virginia.gov.

VDH must approve the application and establish a signed agreement with the applicant before authorized dispensing of Naloxone can begin. You must be a business, agency (governmental or non-governmental) or a non-profit to participate, we cannot provide naloxone to individuals or groups to dispense. If you are an individual or group contact bruce.taylor@vdh.virginia.gov for a list of organizations you may be able to partner with to dispense naloxone.

1. Legal name of organization or agency applying to supply Naloxone as part of a Harm Reduction Partner Program: _____

2. Contact information

Primary Contact

Name _____

Phone _____

Email _____

Secondary Contact

Name _____

Phone _____

Email _____

3. Type of Distribution Program

- Fixed site: program will be run from a permanent, fixed location
- Mobile site: program will be run from a mobile vehicle
- Hybrid site: program will be run from both a fixed site and from a mobile vehicle

4. You may apply to operate your program in any city or county in Virginia. Please list all jurisdictions (city and/or county name) that you plan to provide services in:

5. If you have a fixed site(s), list physical address(es) where you will dispense naloxone. If operating via outreach or from a mobile vehicle, indicate the neighborhoods or sections of town/county you plan to provide services in. Use the following format:

Fixed site: Street, City/Town in Virginia, Zip Code

**Mobile: City/County(s) in Virginia, Town(s), Neighborhood or section if known
(example: City of Staunton, downtown area; Augusta County, near Fairgrounds.)**

5a. Is this also your shipping address? ___Yes ___ No
If no list your shipping address

6. Provide a brief overview (a few paragraphs) of your agency's proposed Naloxone programs and include the following information below. (For this program, Naloxone distribution must be targeted at individuals who use opioids, or their significant others- family, partners, close friends, etc. General public distribution, such as at health fairs, community meetings, etc. is not allowed.)

- Describe the population(s) your program serves or intends to serve, along with you experience working with this population(s). Include demographic information if known.
- Describe related health and/or behavioral health services your agency currently provides and number of years these services have been provided.
- Describe your agency's experience collecting and reporting data.