



## **Request for Applications**

### **Harm Reduction and Primary Care Providers: Academic Detailing Pilot Project**

**Date of release: May 24, 2022**

**\*Applications are due by 11:59 pm E.T. on June 21, 2022\***

## Summary Information

**Project Title:** Harm Reduction and Primary Care Providers: Academic Detailing Pilot Project

**Proposal Due Date and Time:** June 21, 2022, at 11:59 pm E.T.

**Selection Announcement Date:** On or around July 8, 2022

**Source of Funding:** Centers for Disease Control and Prevention

**NOA Award No.:** 6 NU38OT000306-04-01

**Maximum Funding Amount:** Up to \$35,000 per site.

**Estimated Period of Performance:** August 1, 2022 – December 31, 2022.

**Point of Contact for Questions Regarding this Application:** Audrey Eisemann, Sr. Program Analyst, Injury and Violence Prevention ([aeisemann@naccho.org](mailto:aeisemann@naccho.org))

### I. Background and Funding Overview

The National Association of County and City Health Officials (NACCHO) represents the nation’s nearly 3,000 local health departments (LHDs), which work to protect and improve the health of all people and all communities. NACCHO provides resources to help LHD leaders develop public health policies and programs to ensure that communities have access to the vital programs and services people need to keep them protected from disease and disaster.

With support from the Centers for Disease Control and Prevention (CDC), NACCHO is pleased to offer a funding opportunity to develop key messages that can be delivered through one-on-one educational outreach, also known as academic detailing, for health departments to use with primary care providers to increase their knowledge of harm reduction; increase their ability to incorporate harm reduction into the provision of care; and increase referrals of individuals who use substances to harm reduction services in their community.

The United States is experiencing unprecedented levels of overdose deaths, with synthetic opioids driving a significant portion of both fatal and nonfatal overdoses.<sup>1</sup> Harm reduction strategies are critical to reducing the morbidity and mortality of people who use drugs (PWUD) and encompass a broad array of practices and services that can reduce substance use, connect people to treatment, and prevent overdoses.<sup>2</sup>

Academic detailing is an established technique that has been shown to change behavior of providers.<sup>3</sup> The technique uses on-on-one interactions between an academic detailer and a provider, establishing a relationship in which the detailer shares up to date and accurate information that can

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<sup>1</sup> Jones, C. M., Einstein, E. B., & Compton, W. M. (2018). Changes in synthetic opioid involvement in drug overdose deaths in the United States, 2010-2016. *JAMA*, 319(17), 1819-1821.

<sup>2</sup> CDC. (2019, June 21). *Summary of Information on The Safety and Effectiveness of Syringe Services Programs (SSPs)*. Retrieved December 3, 2019 from <https://www.cdc.gov/ssp/syringe-services-programs-summary.html>.

Bernard, C. L., Owens, D. K., Goldhaber-Fiebert, J. D., & Brandeau, M. L. (2017). Estimation of the cost-effectiveness of HIV prevention portfolios for people who inject drugs in the United States: A model-based analysis. *PLoS Med*, 14(5). doi:10.1371/journal.pmed.1002312.

Coffin, P. O., Behar, E., Rowe, C., Santos, G. M., Coffa, D., Bald, M., & Vittinghoff, E. (2016). Nonrandomized intervention study of naloxone coprescription for primary care patients receiving long-term opioid therapy for pain. *Annals of Internal Medicine*, 165(4), 245-252.

Sherman, S.G., Park, J.N., Glick, J., McKenzie, M., Morales, K., Christensen, T., Green, T.C. (2018) FORECAST Study Summary Report. Johns Hopkins Bloomberg School of Public Health. Retrieved December 3, 2019, from [https://americanhealth.jhu.edu/sites/default/files/inline-files/Fentanyl\\_Executive\\_Summary\\_032018.pdf](https://americanhealth.jhu.edu/sites/default/files/inline-files/Fentanyl_Executive_Summary_032018.pdf).

<sup>3</sup> Liebschutz, J.M., Xuan, Z., Shanahan, C.W., et al. (2017). Improving adherence to long-term opioid therapy guidelines to reduce opioid misuse in primary care: A cluster-randomized clinical trial. *JAMA Internal Medicine*, 177(9), 1265-72.

benefit patients. This pilot aims to determine whether academic detailers and detailing sessions can assist primary care providers by enhancing their knowledge of harm reduction; improving their ability to incorporate harm reduction into services they provide; and increasing referrals for PWUD to harm reduction services in their community.

Through this funding opportunity, NACCHO will award up to five applicants. **Applicants are defined as Local or State Health Departments or other non-profit organizations/academic institutions that provide academic detailing.** Project proposals must identify the existence of these programs and capacity to pilot the academic detailing projects. The project period shall begin upon receipt of the Notice of Award and will end **December 31, 2022**. Applications must be submitted via email no later than **June 21, 2022**. In fairness to all applicants, NACCHO will not accept late submissions.

Applications are due **by 11:59 pm E.T. on June 21, 2022**. The applicant must designate one main point of contact to submit the application and communicate directly with NACCHO subsequently. Applicants will be notified of their selection status by e-mail to the project point of contact on or **around July 8, 2022**. All necessary information regarding the project and application process may be found below. All questions should be sent via email to Audrey Eisemann ([aeisemann@naccho.org](mailto:aeisemann@naccho.org)) and will be reviewed by NACCHO.

Applicants are advised to consider the following deadlines and events for this application.

Event	Date/Time
Application Submission Deadline	June 21, 2022 at 11:59 pm E.T.
Award Notification Date	On or around July 8, 2022
Period of Performance	August 1, 2022 – December 31, 2022

## II. Eligibility and Contract Terms

**Eligibility requirements:** To be considered eligible for this funding opportunity, applicants must:

- Be a Local or State Health Department or other non-profit organization/academic institution that provides academic detailing; and
- Have a harm reduction services program within the jurisdiction.

**Contract terms:** Selected applicants will be required to identify and designate an agency, if it is not the state or local health department, to enter into a contract with NACCHO for the submission of the deliverables specified in the contract and serve as a fiscal agent for the project. NACCHO expects you as the applicant to review and agree to the NACCHO [standard contract language](#). However, if you know in advance that your agency or organization is going to have difficulty accepting any of the provisions in the contract, please contact NACCHO immediately to discuss. If you are an applicant from Florida, please contact NACCHO immediately for a copy of the Florida standard contract.

NACCHO will establish a fee-for-service contract with the awarded applicant whereas deliverables will be listed in the recipient contract and payment will be remitted upon submission and acceptance of those items; see Section III for the deliverable schedule.

### III. Project Requirements and Expectations

This funding opportunity is open to all Local or State Health Departments or other organization/academic institutions who have

- a current academic detailing program with at least two trained and experienced academic detailers
- Relationships with primary care providers/primary care provider officers or health systems or a strategy for recruiting primary care providers (non-residents)
- Knowledge of local harm reduction resources to support people who use drugs (participants will develop a local resource guide as part of the project)

All awardees will be required to conduct the following activities throughout the project period:

- **Kick-off Call and Recruitment:** Sites will attend a kick-off call with NACCHO and CDC to meet other sites and review the goals and expectations. After this call, sites will begin recruitment efforts for the pilot.
- **Key Messages Training:** Sites will participate in a one-hour training about the key messages for the academic detailing pilot.
- **Monthly Calls**
  - **Individual Technical Assistance Calls:** Sites will participate in a monthly, one-hour TA call with NACCHO and CDC. The purpose of these calls will be to discuss progress towards goals, identify challenges, and provide additional materials to assist detailers in their work with primary care providers.
- **Academic Detailing**
  - Sites will aim to provide **three academic detailing visits to 10 providers** in the local community (for a total of 30 visits).
    - The awardee is not required to, but may use their discretion to target a subpopulation within the population of primary care providers (e.g. primary care providers that are X-waivered, serve rural jurisdictions, serve jurisdictions with high rates of overdoses, etc.)
  - Development and dissemination of a **local resource guide** to provide to primary care providers.
  - Development of a **project workflow** to ensure all aspects of the pilot are completed.
  - Participation with the project's **evaluation materials** including provider visit tracking and feedback and provider feedback surveys.
- **Evaluation:** Towards the end of the pilot, academic detailer and program managers will provide feedback on a survey to share successes, challenges, and feedback on the pilot project.

The following outlines the deliverables to be produced by each awardee; however, a finalized scope of work will be agreed upon post awardee selection.

Invoice number	Primary Task/Deliverable	Payment Schedule	Payment Amount
Invoice 1	1. Participate in project kick-off call with NACCHO, CDC, and project partners. Time and date TBD. Provide list of attendees. (1.1)	10%	Invoice 1: \$10,500
	2. Participate in key messages training for the academic detailing pilot. (1.2)	10%	
	3. Develop list of local resources for academic detailers based upon the needs of the detail and jurisdiction. This may include primary care providers that are X-waivered; treatment facilities and their capacity; peer support programs; harm reduction service providers; etc. (1.3)	10%	
Invoice 2	1. Pilot academic detailing key messages to incorporate harm reduction practices and referrals into the provision of care by primary care providers and provide surveys to detailees. Provide monthly data tracking submission for August- September 2022. (2.1)	30%	Invoice 2: \$10,500
	2. Participate in monthly check-in calls with NACCHO and CDC. Provide call schedule August- September 2022. (2.2)	n/a	
Invoice 3	1. Pilot academic detailing key messages to incorporate harm reduction practices and referrals into the provision of care by primary care providers and provide surveys to detailees. Provide monthly data tracking submission for months October – November 2022. (3.1)	30%	Invoice 3: \$10,500
	2. Participate in monthly check-in calls with NACCHO and CDC. Provide call schedule October – November 2022. (3.2)	n/a	
Invoice 4	1. Provide feedback through participation in a survey on the challenges, successes, considerations, and lessons learned of the academic detailing for primary care providers. (4.1)	10%	Invoice 4: \$3,500

Please note: NACCHO reserves the right to make changes to the project timeline and payment schedule if necessary.

#### IV. Application Instructions

To apply for this funding opportunity:

- Review the requirements and expectations outlined in this RFA.
- Review NACCHO’s [standard contract language](#) and provide a copy to the individual with signing authority for the LHD (or entity that would be contracting with NACCHO, e.g., city government), including any relevant financial or legal offices for advanced consideration. *Do not sign or send back the contract with the application.*
- Submit the application to NACCHO’s Overdose Prevention Team at [IVP@naccho.org](mailto:IVP@naccho.org) by June 21, 2022 at 11:59 pm ET. Submissions after this deadline will not be considered. Please use the subject line, “Harm Reduction and Primary Care Providers: Academic Detailing Pilot Project”.
  - NACCHO will confirm receipt of all applications, however, receipt does not guarantee verification of completeness. All questions may be directed to Audrey Eisemann at [aeisemann@naccho.org](mailto:aeisemann@naccho.org).
- The application must include the following items to be deemed complete:
  - Narrative (**no more than 3-5 pages**) that addresses the three domains described below:
    - Statement of Need
    - Applicant Information and Implementing Capacity

- Proposed Approach
- Community Resources
- Budget and budget narrative (templates provided in Section VI)
- Completed attachments (see Section VI)

Applicants will be notified of their selection status by e-mail to the project point of contact **on or around July 8, 2022**. Selected applicants will be required to confirm participation and agreement with the contract scope of work after receiving a notification. The designated point of contact for selection must be available to receive and respond to the notification in a timely manner.

## V. Selection criteria

Applications will be reviewed by NACCHO and CDC and scored based on the following criteria. The budget will not be included in the scoring criteria but is required for complete application submissions. NACCHO will not review incomplete applications.

### 1. Project Narrative (no more than 3-5 pages)

- **Statement of Need (20%)**
  - Describe the public health and public safety impact of the overdose epidemic in the jurisdiction (e.g., fatal, and non-fatal overdose rates, trends of concern). Include any relevant background and community context.
- **Applicant Information and Implementing Capacity (30%)**
  - Identify and provide an overview of the existing academic detailing program, including:
    - number of full-time and part-time staff; and
    - previous detailing on topics related to overdose response and prevention.
  - Describe your engagement with primary care providers on academic detailing or other projects in the past.
  - Provide resumes or curriculum vitae of all key project staff, highlighting relevant knowledge, expertise/qualifications, and experience. These items do not count towards page limit.
- **Proposed Approach (30%)**
  - Describe your proposed approach for an academic detailing pilot project with primary care providers as the intended audience.
  - Describe your strategy for recruiting primary care providers.
  - Describe the challenges you anticipate and how you plan to address them.
  - Include a brief description of the staff plan to implement the strategy and approach, including the process for ensuring the timely completion of deliverables.
- **Community Resources (20%)**
  - Describe your community's resources that could support this project and be a part of the resource guide.
  - Describe local organizations that could receive referrals from primary care providers.

## 2. Budget and Budget Narrative (templates provided)

- Refer to the [Budget](#) and [Budget Narrative](#) templates. Each complete application must also include a budget justification using the sample budget template, with the funding period to begin on 8/1/2022. Each applicant may request up to \$35,000 to support project activities. Please note that the final budget amount cannot be changed after submission.
- The budget will not be included in the scoring criteria but is required for complete application submissions. The purpose of the line-item budget is to demonstrate that the applicant has considered appropriate funding needed to accomplish the proposed work.
- Items that may be included in the request for funds include, but are not limited to:
  - staff salaries and fringe benefits
  - supplies
  - indirect costs to support the completion of the deliverables within the project period
  - training for staff on this project
- Activities supported directly by project funding will be constrained by allowable costs under CDC guidelines. Funds may not be used for equipment purchases.
- **Include a budget narrative** (one page or less) to explain each line-item and how the amounts were derived. See detailed guidance below.
  - Personnel: List all staff positions by title (both current and proposed). Give the annual salary or hourly rate of each position, the percentage of each position's time devoted to the project, and the activities you anticipate these staff persons to conduct.
  - Fringe Benefits and Indirect Rates: Provide a breakdown of the amounts and percentages that comprise fringe benefit costs such as health insurance, etc. We require a copy of your federally approved rate for our records. If your rate isn't federally approved, please provide a signed letter on letterhead that provides a detailed breakdown and allocation for expenses incorporated as the indirect rate in your budget. Note: If your organization charges an indirect cost recovery rate greater than 10%, additional documentation will be required justifying the rate and showing a breakdown of what goes into the pool. If you use the 10% *de minimis* rate, no additional documentation is needed.
  - Travel: Specify the purpose and details of the travel.
  - Supplies: Identify supplies in the detailed budget and the intended use for these supplies (i.e., what activities will the supplies support).
  - Contractual: Identify each proposed contract and specify its purpose and estimated cost.
- Respond to the following three questions in your application:
  - Do you have prior experience in Federal Contracting?
  - Have you completed a Single Audit?
  - When researching contractors, vendors, or supplies was a reasonable inquiry used to ensure that contractors or vendors are compliant with Section 889 of the National Defense Authorization Act?

## VI. Attachments

Please find below, links to additional information, forms, and resources needed for this application submission:

- Required: Complete and submit the [Budget](#) and [Budget Narrative](#) templates
- Required: Complete and submit the [Vendor Information Form](#)
- Required: Complete and submit the [Certification of Non-Debarment](#)
- Required: Submit a [W-9](#)
- Required: Proof of active registration with SAM.gov in accordance with UEI number
- Federally approved indirect/fringe rate or a signed letter on letterhead that provides a detailed breakdown and allocation for expenses incorporated as the indirect rate in your budget (as applicable)
- Required for applications of \$25,000: [FFATA form](#) (if you are not able to complete this by the application deadline, you may submit it one week after you have been selected).

## APPENDIX A

### Unallowable Cost Guidelines

Recipients may use funds only for reasonable program purposes, including personnel, travel, supplies, and services. NACCHO reserves the right to request a revised cost proposal, should NACCHO and CDC determine applicant's proposed cost as unallowable. Restrictions that must be considered while planning the programs and writing the budget:

- Naloxone/Narcan and syringes
- HIV/HCV/other STD/STI testing
- Drug disposal programs and supplies. This includes implementing or expanding drug disposal programs or drug take-back programs, drug drop box, drug disposal bags.
- The provision of medical/clinical care.
- Wastewater analysis, including testing vendors, sewage testing and wastewater testing
- Direct funding or expanding the provision of substance abuse treatment.
- Recipients may not use funds for research.
- Development of educational materials on safe injection.
- Participant costs, including food and beverage as well as incentives for participation will be approved on a case-by-case basis and will require the submission of further documentation.
- Prohibition on certain telecommunications and video surveillance serves or equipment (Pub. L. 115-232, section 889): Recipients and subrecipients are prohibited from obligating or expending grant funds (to include direct and indirect expenditures as well as cost share and program funds) to:
  - Procure or obtain
  - Extend or renew a contract to procure or obtain; or
  - Enter into a contract (or extend or renew contract) to procure or obtain equipment, services, or systems that use covered telecommunications equipment is telecommunications equipment produced by Huawei Technologies Company or ZTE Corporation (or any subsidiary or affiliate of such entities).
    - For the purpose of public safety, security of government facilities, physical surveillance of critical infrastructure, and other national security purposes, video surveillance and telecommunications equipment produced by Hytera Communications Corporation, Hangzhou Hikvision Digital Technology Company, or Dahua Technology Company (or any subsidiary or affiliate of such entities).
    - Telecommunications or video surveillance services provided by such entities or using such equipment.
    - Telecommunications or video surveillance equipment or services produced or provided by an entity that the Secretary of Defense, in consultation with the Director of the National Intelligence or the Director of the Federal Bureau of Investigation, reasonably believes to be an entity owned or controlled by, or otherwise, connected to the government of a covered foreign country. President's Emergency Plan for AIDS Relief (PEPFAR) funding is exempt from the prohibition under Pub. L. 115-232, section 889 until September 30, 2022. During the exemption period, PEPFAR recipients are expected to work toward implementation of the requirements
- Generally, recipients may not use funds to purchase furniture or equipment, including motor vehicles. Any such proposed spending must be clearly identified in the budget.
- Travel Costs – Hotel, meals and incidentals generally are unallowable if they exceed daily the Federal Travel Per Diem Rates published by the General Services Administration. There are

many rules and exceptions in applying this rule. Please contact NACCHO with specific questions about these exceptions.

- Reimbursement of pre-award costs generally is not allowed unless the CDC provides written approval to the recipient.
- Other than for normal and recognized executive-legislative relationships, no funds may be used for
  - publicity or propaganda purposes,
  - for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body
  - the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body
- See Additional Requirement (AR) 12 for detailed guidance on this prohibition and additional guidance on lobbying for CDC recipients.
- The direct and primary recipient in a cooperative agreement program must perform a substantial role in carrying out project outcomes and not merely serve as a conduit for an award to another party or provider who is ineligible.
- In accordance with the United States Protecting Life in Global Health Assistance policy, all non-governmental organization (NGO) applicants acknowledge that foreign NGOs that receive funds provided through this award, either as a prime recipient or subrecipient, are strictly prohibited, regardless of the source of funds, from performing abortions as a method of family planning or engaging in any activity that promotes abortion as a method of family planning, or to provide financial support to any other foreign non-governmental organization that conducts such activities.