

## Gibson County Opioid Settlement Grant

### Announcement of Funding

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Due to the extensive damage and loss of life caused by the opioid crisis that was brought on by the unethical and over-prescribing of opioid medications, the state of Tennessee will be receiving over \$1 billion over 18 years in settlement funds from several large corporations. Gibson County has been allocated a portion of these funds, which will be received in annual payments. The County has established the Gibson County Opioid Board to oversee the spending of these funds to ensure they are used to remediate the opioid crisis and save lives. The Board will invite community organizations to apply for these funds annually.

#### Availability of Funds

The selection process for funding will utilize a competitive process, and the number of awards will be dependent on the amount of funds available for annual allocation. The amount of funds available and dates of application submissions and awards will differ annually. The amount of funds available for the *2024 funding cycle* will be \$200,000.00, and proposals will be accepted between January 6, 2025, and February 28, 2025.

Up to 20% of the available funds can be held back at the discretion of the Gibson County Opioid Board each funding cycle for urgent needs that may arise between annual funding periods. If the holdback funds are not allocated prior to the next funding cycle, they will be included in the total amount available for distribution.

#### Eligibility

Applications will be accepted from any organization that serves residents of Gibson County but will only be distributed to those that provide services that fall within the approved remediation uses set forth by the TN Opioid Abatement Council, listed below in Allowable Uses of Funds and outlined in [Exhibit E](#). If an applying organization is located outside of Gibson County, funds will only be awarded to that organization if they are used to serve Gibson County residents. The Gibson County Opioid Board will dispense funds in accordance with all applicable rules and regulations that counties must adhere to when allocating funds to community organizations.

#### Required Documents for Application Submission

Proposals are due by **February 28, 2025**, and must be submitted to the Gibson County Mayor's Office by emailing [leslie.milligan@co.gibson.tn.us](mailto:leslie.milligan@co.gibson.tn.us) and [stacytcs@yahoo.com](mailto:stacytcs@yahoo.com) with the following **required documents**:

- Application for funding
- Completed budget template
- Completed work plan
- Current annual operating budget
- State certification, licensure, or accreditation if applicable
- Letters of support from any project partners or collaborators if applicable

## Selection and Award Process

The Gibson County Opioid Board will review and score all applications received. The board will consider scores and along with other factors to make funding decisions. These factors may include county priorities, community needs, funds available, cost-effectiveness, and federal and state regulations. If the total amount requested is higher than the total amount available for distribution, applicants may be contacted to discuss possible project and/or budget revisions.

The County Mayor and Gibson County Commission will have final approval of any funding recommendations provided by the Gibson County Opioid Board.

Notice of award is expected to occur by **May 1, 2025**. Following the notice of award, the organizations will be contacted to discuss the contract process and specific metrics that must be reported back to the county.

The funding period will be *12 months in duration* beginning **July 1, 2025**, unless an alternative project start date is agreed upon by the awardee and Gibson County finance director.

### Allowable Uses of Funds & Funding Restrictions

Awarded funds cannot be used for administrative or indirect costs. Activities must meet the definition of opioid remediation, be evidence-based strategies or promising practices, and align with the core strategies and allowable uses outlined by [Exhibit E](#). The Tennessee Opioid Abatement Council (TN OAC) adjusted Exhibit E into the [Remediation List Strategies](#). Organizations will be asked to use this document when applying and for reporting purposes if funded. Core strategies include:

- Naloxone or other FDA-approved drugs to reverse opioid overdoses
- Medication-assisted Treatment (MAT) distribution and other opioid-related treatment
- Address the needs of pregnant and postpartum women
- Expanding treatment for Neonatal Abstinence Syndrome (NAS)
- Expansion of warm hand-off programs and recovery services
- Treatment for incarcerated population
- Prevention programs
- Expanding syringe service programs
- Evidence-based data collection and research analyzing the effectiveness of the abatement strategies within the state

## Requirements if Awarded Funding

Organizations awarded funding are required to:

- Utilize funds within the defined funding period as agreed upon in the contract. If those funds are not used as agreed in the contract the applicant may:
  - Return any remaining funds to the Gibson County Opioid Board at the end of the funding period, OR
  - Request an extension to use the funds past the funding period, OR
  - Request an amendment to their current contract to use the remaining funds for additional strategies
- Ensure utilization of funds supplements, rather than supplants, existing funding

- Ensure all funds are used in alignment with remediation uses approved by the TN Opioid Abatement Council as described above
- Ensure funds are not used for administrative or indirect costs
- Provide data on program outputs, outcomes, impact, and effectiveness as determined by the Gibson County Opioid Board
- Complete and submit required quarterly and annual reports to the county

## Reporting Requirements

Organizations should provide **quarterly progress reports** to [leslie.milligan@co.gibson.tn.us](mailto:leslie.milligan@co.gibson.tn.us) and [stacytcs@yahoo.com](mailto:stacytcs@yahoo.com) starting **14 days after the first project quarter**. The reports must outline the following:

- Staff working on the project
- Community partners involved with the project
- Challenges and barriers experienced within the associated timeframe
- Successes experienced within the associated timeframe
- Anticipated next steps
- Strategies addressed
- Number of Gibson County residents served with settlement funding
- All project-specific metrics determined by the Gibson County Opioid Board

An **annual report** is to be provided following project close by **June 30, 2026**, annual report due date] or *30 days after project close* if an alternative start date is agreed upon. The annual report must include all the above data and be submitted to [leslie.milligan@co.gibson.tn.us](mailto:leslie.milligan@co.gibson.tn.us) and [stacytcs@yahoo.com](mailto:stacytcs@yahoo.com)

## Application Checklist

To be considered a complete application and qualify for funding, the following items must be submitted:

- Application for funding
- Completed budget template
- Completed work plan
- Current annual operating budget
- State certification, licensure, or accreditation if applicable
- Letters of support from any project partners or collaborators if applicable

# Opioid Settlement Grant Application

## Application Details

Application due date	February 28, 2025
Anticipated notice of award	May 1, 2025
Anticipated funding period	July 1, 2024 – June 30, 2025
Submission date	

## Section One: Organizational Information

Organization Name:  Federal Tax ID #:

Street Address:  City:  Zip code:

Type of organization: ☐ Non-profit and/or 501(c)(3) ☐ For profit ☐ Governmental

Purpose of organization:

Annual operating budget (*must attach documentation*):

Year established:  Number of employees:  Number volunteers:

Is the organization licensed or accredited by the state of TN? ☐ No ☐ Yes (*must attach documentation*)

Project contact name:  Contact title:

Phone number:  Email:

Section Two: Funding Information

Total Funding Request: \$

What percentage of the *total project cost* will the requested funds cover?

What percentage of *funds requested* will be used to serve residents of Gibson County?

Funding currently beginning received from Gibson County

Amount: Purpose:

Budget Narrative

Please provide a detailed justification for each line item in the budget, explaining how these expenses support the project's objectives and goals. We recommend filling out the Budget first and then filling out this section.

Sustainability

Please provide information about how this project will be sustained after the funding period. Include details such as other grants or funding sources that the organization has or plans to obtain.

## Budget Template for Opioid Settlement Funding

**Instructions:** Add or delete rows as necessary. The [TN OAC's remediation list](#) must be used to determine which strategies are addressed.

**Organization:** [enter name]

Expense or Activity	Description	Strategy Addressed	Cost	Quantity	Total Cost
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
				Project Total =	\$0.00

## Section Three: Project Information

### Project Details

Project title:

Strategies that will be addressed with funds (Select all that apply):

☐

Primary Prevention

☐

Recovery Support

☐

Harm Reduction

☐

Education & Training

☐

Treatment

☐

Research & Evaluation

Target population and geographical area:

Anticipated number of people served with requested funds:

Project description (it is recommended to complete the Work Plan first, then fill this section out):

Internal staffing for this project:

External project partners or collaborators (please attach letters of support if possible):

Is this a new or existing project? (Check one):

☐

New

☐

Existing

If existing, have/will you receive grant funding from any other source for this project?

☐

No

☐

Yes

If yes, please list the grants and amounts:

If existing, how will the requested funds be used to supplement rather than supplant the project?

### Supporting Data

Is the project evidence-based or based on promising practices?

☐

No

☐

Yes

If yes, provide links to supporting evidence:

Please provide data to support the need for the project in the community:

### Project Revenue

Will you charge a fee or bill insurances for the services provided with this project?

☐

No

☐

Yes

If yes, please describe for what and the estimated amount:



## Subcontracts

Will your organization subcontract for services?

☐

No

☐

Yes

If yes, what organization will receive funds from you?

Organization contact name:

Email or phone:

Subcontract amount:

Expected activities:

## Data Collection & Use

What system or database will be used to gather and store information relevant to the project?

What methods will be employed to track grant-funded activities and specific assistance?

Who is responsible for the collection and quality assurance of this data?

Describe how your organization plans to use the gathered data to continuously evaluate the project's progress and effectiveness. Please address how this data will inform future planning.

## Project Work Plan

**Instructions:** Add or delete rows as necessary. The [TN OAC's remediation list](#) must be used to determine which strategies are addressed.

**Organization:** [enter name]

**Total Funds Requested:** [enter amount]

**Overall Goal(s) of Project:** [enter at least one goal]

Objectives What is the measurable objective you are seeking to achieve?	Activities What activities will be completed that help achieve the corresponding objective?	Remediation Strategy Please use the TN OAC's table (linked).	Outcomes What measurable results are you seeking to achieve by completing the corresponding activities?	Measures of Success How will the success of the outcomes be assessed? What data points will be measured?	Timeframe When will this part of the project begin and end?	Accountability Who is responsible for each project activity?	Funds Requested What are the requested grant funds for this part of the project?