



# NC DHHS Notice of Funding Availability

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**DHHS Division/Office issuing this notice:** Division of Public Health / Chronic Disease and Injury Section / Injury and Violence Prevention Branch

**Date of this notice:** February 1, 2021

**RFA Title:** A-381 Expanding the Grassroots Response (EGR): Building Capacity for Community-Driven Harm Reduction and Overdose Prevention

**Purpose:** The purpose of this Expanding the Grassroots Response (EGR): Building Capacity for Community-Driven Harm Reduction and Overdose Prevention RFA is to fund community-based organizations to deliver overdose prevention and other harm reduction services for people who use drugs. This RFA benefits people who use drugs by increasing access and linkages to care in overdose prevention. In addition, this RFA builds capacity and local infrastructure to respond to the overdose crisis in North Carolina.

**Description:** This RFA consists of two parts:

- Part A of this RFA is to fund community-based organizations to implement specific strategies including developing or expanding syringe services programs, connecting justice-involved persons to care, establishing or strengthening post-overdose response teams, advancing access to education and employment opportunities, expanding or establishing housing first or rapid re-housing services, and incorporating overdose prevention and harm reduction into existing services.
- Part B is to fund well-established organizations to serve as mentors to smaller, less developed programs or organizations in the field of overdose prevention and harm reduction by providing them with technical assistance and administrative support to either bolster existing services or implement new programs.

For Part A, the Division of Public Health has identified multiple implementation strategies for communities that are in line with the following two priority areas of the Opioid Action Plan:

- “Reduce Harm” by expanding syringe services programs and naloxone access and addressing social determinants of health, and
- “Connect to Care” by expanding access to treatment and recovery supports and by addressing the high-risk needs of justice-involved populations.

The implementation strategies are:

1. Develop or expand syringe services programs (SSPs)
2. Connect justice-involved persons (JIP) to care
3. Establish or strengthen post-overdose response teams (PORT)
4. Advance access to education and employment opportunities
5. Expand or establish housing first or rapid re-housing and retention services
6. Incorporate overdose prevention and harm reduction into existing services

For Part B, the Division of Public Health is seeking multi-agency applications in which a well-established organization, such as an organization that already receives state or federal funds directly, is paired with a smaller, or less-developed organization, such as an organization that does not have an official non-profit status or has not received state or federal funds, that may not be prepared to receive direct state funding. The well-developed organization serving as mentor organization must apply as the primary recipient of the funding and list the mentee organization as a subcontractor in the budget. Therefore, Part B applications are meant to be mentor/mentee collaborations in which the mentor organization assists in developing capacity for the mentee organization. Applications to Part B can include a variety of activities in the project narrative. These activities may include but are not limited to:

1. Preparing mentee organizations to receive state funding in the future, including but not limited to establishing 501(c)3 status, improving organizational capacity for administrative functions such as invoicing, budgeting, and grant reporting, and preparing state documentation such as a DUNS number.
2. Establishing programmatic design and implementation plans for the mentee organization to perform any of the primary strategies listed in Part A (develop or expand SSPs, JIPs, PORTs, education and employment, housing and retention, integration into existing other services) or any additional high-impact harm reduction or overdose prevention strategies.
3. Purchasing supplies, funding staff, and/or providing technical assistance support to develop a harm reduction or overdose prevention program.

**Eligibility:** This RFA is open to all 501(c) (3) nonprofit organizations located and licensed to conduct business in the state of North Carolina. Applicants may be individual organizations or a partnership/collaboration of multiple organizations, one of which must serve as the fiscal agent or the organization that will take overall responsibility of the fiscal and grant-related requirements.

**How to Apply:** The announcement of the RFA and instructions for receiving the RFA will be posted at the following DHHS website on 02/01/2021:

<http://www.ncdhhs.gov/about/grant-opportunities/public-health-grant-opportunities> and may be sent to prospective organizations via email, and posted to the Program's website: <https://injuryfreenc.ncdhhs.gov/library/rfa/A381.htm>

Separate applications are required for Part A and Part B. Applicants must submit their respective Part A or Part B application as one consolidated PDF file with all required attachments and scanned signatures to [beinjuryfreenc@dhhs.nc.gov](mailto:beinjuryfreenc@dhhs.nc.gov). Paper mailed and faxed applications will not be accepted.

**Deadline for Submission:** All applications must be received by 5:00 pm ET on Friday, April 2, 2021. Only emailed applications will be accepted (scanned signatures are acceptable).

**How to Obtain Further Information:** Direct all inquiries concerning this RFA to: [beinjuryfreenc@dhhs.nc.gov](mailto:beinjuryfreenc@dhhs.nc.gov)