

**Request for Quote**  
**Addressing Nicotine Dependence in Appalachian**  
**Substance Use Dependence Treatment Centers**

**Purpose:** The Ohio Department of Health (ODH) Tobacco Use Prevention and Cessation Program (TUPCP) is committed to increasing provider engagement in tobacco/nicotine use prevention and cessation efforts, especially in populations that are known to have higher tobacco/nicotine use rates and low utilization of existing cessation programs.

Data from the National Survey on Drug Use and Health from 2007 to 2014, reported percentages of adult cigarette use at 27.3% in rural areas compared with 21.3% in urban areas<sup>[1]</sup> and smokeless tobacco use is reported to be twice as high in rural areas<sup>[2]</sup>. Central Appalachia has the highest prevalence of adult smokers in the nation, 25.2% compared to 16% in the non-Appalachian US. Adult smoking prevalence in Central Appalachia is the highest in the United States, yet few epidemiologic studies describe the smoking behaviors of this population.<sup>[3]</sup> In 2019, the Ohio smoking prevalence was 24.9% for adults residing in Appalachian counties, compared with adults residing in non-Appalachian counties (19.9%).<sup>[4]</sup> TUPCP believes it is important to create awareness of this cessation support, as well as having a trusted community provider involved in promoting awareness of the program.

A recent survey of Ohio behavioral health facilities (with those offering only mental health (MH) treatment and those offering only substance use and dependence (SUD) treatment), conducted by TUPCP, revealed the following.

- Screening for tobacco use for all clients was done by 33% of MH facilities and 52.9% of SUD facilities.
  - Main reasons cited for not doing screening included staffing (48%), that screening for nicotine use if not a priority (46%).
  - More than 62% of facilities have not plans to begin screening.
  - Training (48%), financial assistance (47%) and information about the benefits of screening (42%) were cited as factors that would make facilities likely to screen.
- About one third (34%) of survey participants indicated they would like additional assistance to address tobacco dependence at their facilities.

For this project, ODH will provide funds to behavioral health care provider organizations that are willing to learn more about enhancing their infrastructure to address nicotine dependence in their ***SUD treatment clients*** in ***the 32 Appalachian counties of Ohio***. The project has the followings goals for the funded entity:

- Access the facility's current stage of readiness to implement screening and treatment protocols.
- Address concerns relating to treating nicotine dependence at the same time as treating other co-occurring conditions
- Increase awareness of the evidence around screening for nicotine dependence as part of routine care in SUD treatment facilities.
- Increase staffing infrastructure, confidence and willingness to treat nicotine dependence
- Increase support for implementing nicotine screening and treatment workflows.
- Identify an agency champion that will be responsible for all nicotine dependence activities.

**Qualified Applicants:** Any Substance Use Dependence Facility in one of the 32 Appalachian counties in Ohio. <http://www.appalachianohio.com/ohios-appalachian-counties.php>. The facility must not currently have a screening and treatment protocol in place.

**Service Area:** Applicants may apply for funds to work within a specific geographic area or with a particular subset of Appalachian counties, although only one county per application will be funded.

**Number of Contracts and Funds Available:** Up to 10 contracts may be awarded in this first round of funding. No one award will exceed \$24,000. The selected entity should be prepared to enter into a contractual relationship with ODH and submit any necessary paperwork to become a vendor to the State of Ohio.

**Program Period and Budget Period:** Twelve months from time of award.

### **Scope of Work**

1. Attend project kickoff meeting with all funded projects.
2. Attend monthly call with ODH and other grantees to report on progress.
3. Provide brief written, quarterly project update.
4. Attend ODH training on nicotine dependence in SUD facilities and how to complete the ODH assessment.
5. Complete internal assessment (using ODH provided too) and develop project plan. The plan must include:
  - a. Summary of assessment result, including which stage of change the agency finds itself with regard to implementing screening and treatment protocols.
  - b. Clear explanation of activities (must be at least one from background section) that will be addressed
  - c. An identified mechanism to track at least two identified project outcomes (one outcome must be implementation of a system change).
  - d. Proposed outcomes must be supported by evidence of efficacy (increased identification of tobacco use, referrals to evidenced based treatment, provision of pharmacotherapy)
  - e. A clear plan for evaluation
    - i. ODH is interested in publishing findings from this project and may choose to involve our own evaluation contractor to assist with the project (at ODH's expense).
6. Implement one system change from project plan.
7. Address sustainability by determining opportunities to replicate and scale successful outcomes.

### **Deliverables**

1. Attend kickoff meeting
2. Participate in monthly calls
3. Attend ODH training
4. Complete facility assessment (provided by ODH) and submit results to ODH.
5. Use facility assessment to complete project plan with all required components, submit to ODH for approval.
6. Provide documentation that verifies implementation of activities set forth in approved project plan
7. Provide evidence of at least one significant system change relating to screening and providing treatment for nicotine dependence
8. Submit outcome report, including key findings and project sustainability/replicability plan

## **Budget**

This project employs the use of a deliverable-based budget. All applicants must submit, with their quotes, a line item budget matching each deliverable listed above to a specific dollar amount. The following is an example:

<b>Deliverable</b>	<b>Timeline</b>	<b>Budgeted Amount</b>
Attend kickoff meeting	Month 1	
Participate in monthly calls	Month 1-12	
Attend ODH training	Month 1	
Complete facility assessment and submit results with project plan (with all required components)	Month 2	
Use facility assessment to complete project plan with all required components, submit to ODH for approval.	Month 2	
Provide documentation that verifies implementation of activities set forth in project plan	Ongoing, due by Month 11	
Provide evidence of at least one significant system change relating to screening and providing treatment for nicotine dependence	Month 11	
Submit outcome report, including key findings and project sustainability/replicability plan	Month 12	

## **Proposal/Quote Components**

1. Executive Summary, including demographic data of the service area
2. Organizational capacity to conduct such a project, including level of leadership support for address nicotine dependence.
3. Capacity of key personnel who will be engaged in this project to do the work of the project
4. Identify and describe the staff within the facility that will be engaged by this initiative. Indicate the degree to which these providers currently address nicotine dependence, if at all.
5. Summary description of why the applicant believes the strategy/approach will increase the readiness of the facility to adopt changes that would lead to increasing screening and treatment of nicotine dependence.
6. Budget, using table above.

**Review Criteria:** All proposals will be assessed on the quality, clarity and completeness of the application, according to the extent to which the proposal:

1. Clearly identifies the targeted provider community to whom the candidate will promote engagement
2. Indicates how many staff will be engaged-minimum of 4
3. Clearly describes the strategy that will be used to increase behavioral health provider engagement
4. Describes a reasonable and achievable method for implementing strategy
5. Describes Specific, Measurable, Attainable, Realistic, and Time-Phased (SMART) objectives.
6. Includes identified indicators for measuring success including baseline measures and how indicators will be tracked with report of evaluation metrics and outcomes within six months of project start and, again, at completion of the project.

**Contractor Compensation:** Contractor should choose as many of the above goals they feel they can accomplish for a total reimbursement not to exceed \$24,000. Contractor should also submit a timeline for completing

activities, using days/weeks/months as measurements of time as opposed to calendar dates. No one project activity can run longer than twelve months.

State procurement restrictions prohibit any one award to exceed \$24,000 for this type of opportunity.

### **Contract Process**

Ohio behavioral healthcare providers that wish to engage in this process must do the following:

1. Any entity receiving funds from Ohio Department of Health (ODH) will be required to sign a contract. Please review the sample contract required by ODH and ensure your entity is willing to accept these terms.
2. If you are an entity that wishes to engage in this project, you will need to apply for an OH/ID – Supplier ID number at <https://supplier.ohio.gov> before beginning your application to allow for processing time. Contact Ohio Shared Services at 1-877-644-6771 for assistance.
  - a. If you are already a vendor, please use the same link above to ensure your Supplier ID is active. If it is not active, be sure to reactivate before proceeding.
3. All qualified contractors interested in this project should submit a quote (with all components listed above) to Amy Gorenflo at [Amy.Gorenflo@odh.ohio.gov](mailto:Amy.Gorenflo@odh.ohio.gov). Quotes can be submitted as soon as possible, but all quotes must be submitted by 3/30/2023.