

Aitkin County Health and Human Services

Contact:

Please direct all correspondence to the contact information provided below.

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Aitkin County Public Health

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2025

Opioid Settlement (OS) Funding Application

Section 1: Applicant Information

Date	
Organization Name	
Street Address	
Mailing Address if different	
City, State, Zip Code	
County	Aitkin

Primary Contact	
Phone	
Email	

Financial Contact	
Tax ID/SSN	
Phone	
Email	

Information provided in this application may be used for promotional materials. This includes, but is not limited to: fact sheets, Minnesota Department of Health reports, newsletters, social media posts, and media releases. Additional information may be requested by Aitkin County Public Health e.g. a release might be requested for individuals in photographs.

☐ By checking this box, you acknowledge and accept the statement above.

PROJECT NAME:	
Brief Overview	
Funding Request Amount	

Section 2: Project Category

Each project should fall within one or more of the following mitigation categories. Select one or more of the categories that best match your project.

Treatment

☐ Support treatment of Opioid Use Disorder (OUD) and any co-occurring Substance Use Disorder or Mental Health condition through evidenced based or evidence informed programs or strategies.

Examples may include:

- Treat OUD
- Support People in Recovery
- Connect People who need help connecting to the services they need (connections to care i.e. transportation)
- Address the needs of criminal justice-involved persons
- Address the needs of the perinatal population, caregivers, and families including babies with neonatal opioid withdrawal syndrome
- Medication-assisted treatment (MAT) such as methadone, buprenorphine or naloxone.

Prevention

☐ Support efforts to prevent over-prescribing and ensure appropriate prescribing and dispensing of opioids through evidenced based or evidenced informed programs. Support efforts to discourage misuse of opioids through evidence based or evidenced informed programs. Examples may include:

- Training for health care providers
- Continuing Medical Education on appropriate prescribing of opioids
- Media campaigns to prevent misuse
- Funding evidence-based prevention programs in schools
- Upstream education on the harm of other addictive and harmful substances such as alcohol, tobacco or marijuana.

Harm Reduction

☐ Harm reduction is a set of ideas and interventions that seek to reduce the harms associated with both drug use and ineffective, racialized drug policies. Harm reduction stands in stark contrast to a punitive approach to problematic drug use—it is based on acknowledging the dignity and humanity of people who use drugs and bringing them into a community of care in order to minimize negative consequences and promote optimal health and social inclusion. Examples of Harm Reduction may include:

- Support Services for children and families affected by substance use disorders.
- Overdose Prevention including distribution of Narcan, Fentanyl test strips, safe use education materials and increased access to proven effective and promising overdose prevention practices utilized in other counties and states.
- Community education to reduce the stigma around OUD

Research and Training

☐ Support opioid abatement research and training. Examples may include:

- Funding for staff training or networking programs and services to improve the capability of government, community, and not for profit entities to abate the opioid crisis.
- Monitoring, surveillance, data collection and evaluation of programs and strategies described in this opioid abatement strategy list.
- Research non-opioid treatment of chronic pain.
- Research on novel harm reduction and prevention efforts such as the provision of fentanyl test strips.

Section 3: Guiding Principles

Your project will need to be guided by the following five principles set forth by the Johns Hopkins School of Public Health. Please indicate which of these principals apply to your program. You do not have to meet all of the guiding principles.

- ☐ Spend Money to Save Lives.
 - OS dollars will be used on a specific project and not to fill budget gaps or shortfalls in other programs. OS dollars are being used to expand on an existing evidenced based program or initiative.
- ☐ Use Evidence to Guide Spending
 - There is evidence to support expansion of an existing program. This could include an initiative or program that was not successful but there are learned outcomes that could be successful.
- ☐ Invest in Youth Prevention
 - This program supports, children, youth and families in effective programs.
- ☐ Focus on Racial Equity
 - This program serves a specific demographic or underserved population in our community. Check one.
 - ☐ Socioeconomic
 - ☐ Veterans
 - ☐ Other _____
 - ☐ Seniors
 - ☐ Homeless
 - ☐ LGBTQ
 - ☐ Youth
 - ☐ Black/Indigenous/People of Color
- ☐ Develop a Fair and Transparent Process for Spending Funds
 - There is a process in place for clear and transparent use of OS dollars

Please Note:

It is the Applicant's sole responsibility to keep clear and detailed records that demonstrate the OS dollars requested were used for the amount and purpose(s) outlined in the initial application. Aitkin County Public Health and/or the Minnesota Attorney Generals Office, reserves the right to audit the Applicants records at any time without prior notice.

Section 4: Work plan and Goals

Give a detailed description of your project work plan and goal. List your goals related to the project. Include planned activities to meet these goals, intended timeline and responsible individual(s). Add rows as needed.

ACTIVITIES TO ACCOMPLISH GOAL(S)	TIMELINE	RESPONSIBLE INDIVIDUAL(S)

Section 5: Evaluation:

If your request is \$25,000 or more please complete this section. If it is under \$25,000 you do not need to complete this section. What would indicate to you that this project was successful? How will you measure progress or change? Describe your anticipated impact(s). Add rows as needed.

Project Outcomes	How will you measure these changes?	What will you do with these results?

PROJECT SUSTAINABILITY: Identify how you will work to sustain the project beyond the initial funding.

Section 6: Budget and Funding Request

Please complete the total project funding table below or the attached Excel sheet. You can also attach your own detailed budget.

Total Project Funding Table

A) How much funding are you requesting from the Aitkin County Opioid Settlement Funds?	\$
B) Do you anticipate any additional funding for this project? <i>Include other grants, donations, fundraised amounts, budgeted dollars, etc.</i>	\$
C) How much do you or a partner anticipate contributing in-kind to the project? <i>Include staff/volunteer time, etc.</i>	\$
Total Project Cost <i>(should equal the sum of the 3 lines above)</i>	\$

Submit your completed application via email to kelli.crowther@aitkincountymn.gov
Please put OS Application in the subject line.