

FILE NO. 807-2024-A



DAVE YOST
OHIO ATTORNEY GENERAL

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**LAW ENFORCEMENT DIVERSION PROGRAM
GRANT APPLICATION**

This grant supports collaborative partnerships between local law enforcement and behavioral health treatment providers to assist in the replication or expansion of law enforcement diversion programs to address addiction. Programs should be modeled after the Drug Abuse Response Team (DART) and Quick Response Teams (QRT) initially created in Lucas, Hamilton and Summit counties. DART members provide 24-hour assistance to overdose survivors and their families, including treatment options, recovery support and other necessary services. QRT team members visit the overdose survivor at home within 72 hours of an overdose to offer counseling and referral to physical and mental health treatment services. During the visit, the QRT provides a resource packet offering phone numbers of treatment facilities and information about addiction.

NON-PERMISSIBLE USE OF FUNDS

- Bonuses, fees, or reimbursable expenses associated with administrators, staff, board members and executive directors
- Capital campaigns
- Cellular service/equipment
- Contracts for audits
- Debt retirement, including mortgages, line-of-credit, etc.
- Entertainment
- Equipment/technology
- Food and beverages
- Fundraising events or donations to other organizations
- Indirect costs
- Legal costs or legal representation
- Political activity or lobbying
- Rent, utilities, insurance and taxes
- Salaries, benefits and overtime for personnel who are not directly responsible for the program
- Travel and related expenses
- Uniforms/clothing
- Vehicles

NOTICE REGARDING APPLICATION REVIEW

1. The Ohio Attorney General may make use of resources beyond the materials submitted in each application and/or request additional documentation from applicants, as necessary. This may include, but is not limited to, documentation available from published and other sources related to the project and which supports or verifies the content of the application.
2. Requests for additional information from applicants will include a due date by which applicants must submit responses.
3. The Ohio Attorney General's Office reserves the right to make exceptions to these requirements and consider modifying program guidelines on a case-by-case basis.

APPLICATION SUBMISSION

Submit the completed application and all attachments via email to **Mary Lynn Plageman** at **GrantsManagement@OhioAGO.gov**.

CONTACT INFORMATION

Office of Ohio Attorney General Dave Yost
Attn: Mary Lynn Plageman
30 E. Broad St., 17th Floor
Columbus, OH 43215
Phone: 614-728-2280
Website: www.OhioAttorneyGeneral.gov
Email: MaryLynn.Plageman@OhioAGO.gov

ORGANIZATION INFORMATION

Organization name: City of Cleveland
Address: 601 Lakeside Ave
City: Cleveland ZIP: 44114 County: Cuyahoga
Phone number: 216-664-2000

Is your organization tax-exempt under Section 501 (c)(3): Yes No

HEAD OF THE ORGANIZATION

Name: Justin M. Bibb
Title: Mayor
Phone number: 216-664-2000
Email address: MayorBibb@clevelandohio.gov

CONTACT PERSON INFORMATION

Name: Dawn Heartsong
Title: Public Safety Grants Coordinator
Phone number: 216-623-5126
Email address: dheartsong@clevelandohio.gov

WORK PLAN ESSAYS

The Work Plan Essays explain the connections between the different components of the program or project. It is a useful tool for planning, implementation, and evaluation and for quickly explaining to others what your program is about.

1. What would the grant funds be used for?

This grant will allow the City of Cleveland to implement a Quick Response Team (QRT) model that will be enhanced to reflect the current needs of our community. Cleveland currently offers a successful law enforcement-led QRT program, but our community needs and has requested a QRT program that includes law enforcement as a vital partner, but not as part of the team reaching out to the overdose survivors and loved ones. This grant would allow teams of EMS paramedics and EMTs to conduct the follow-up contacts and offer important resources. The grant will fund efforts to help heal the community from this opioid epidemic, such as: Dissemination of Narcan to community members, drug disposal programs, community awareness, tracking occurrences, continued research, maintaining community partnerships, participating in state/regional networking groups, etc.

2. The primary purpose of the grant is support of law enforcement programs that address the opioid epidemic. Please explain any desired expansion of the program considered necessary to meet the current needs of your community.

This program is a partnership with the Northeast Ohio Regional Fusion Center (the main law enforcement partner) and Cleveland EMS. Cleveland Division Police will also assist in providing guidance for this program. The grant funding, would enable the newly formed EMS QRT to provide non-emergency services and expand 911 response efforts to include: initial contact of survivors to facilitate access to services, follow-up care from a local treatment provider, periodic follow-up phone calls to survivors to check on their welfare. The existing analytics EMS personnel will track detailed records of all overdose-related incidents within the community and regularly disseminate reports to project stakeholders. The primary connection with law enforcement occur through information sharing with the Northeast Ohio Regional Fusion Center which will facilitate greater chances of contact with survivors and concerned family.

3. Outline objectives that will result from the proposed project. Objectives are specific, observable, time-framed and measurable.

Measurable objectives are:

1. Reduce overdose incidents, as documented by 911 calls for service
2. Reduce overdose deaths, as documented by Cuyahoga County Coroner data
3. Reduce the number of repeated overdose incidents, as documented by EMS records
4. Increase the number of survivors seeking treatment, as documented by the survivor through follow-up phone calls
5. Increase the number of Narcan Kits issued to concerned family members and provide instructions on use
6. Increase the number of Narcan administrations by friends/family, as documented through EMS records

4. Describe the steps necessary to accomplish your objectives, including an operational schedule for the project.

1. Obtain legislative authority to accept grant funding – Completed before the grant is awarded.
2. Meetings with EMS/Fusion Center/Police to further plan program – Bi-weekly
3. Work with the Fusion Center to confirm the method of obtaining survivor/next of kin contact information from overdoses – Completed before grant is awarded.
4. Work with local agencies to obtain the information that will be distributed – Completed within 1 month of award.
5. Select EMS employees to operate the program – Completed within 1 month of award
6. Provide training to selected EMS employees on responding to survivors and loved ones – Completed within 3 months of award
7. Meet with stakeholders to determine any necessary modifications needed - Quarterly
8. Disseminate data to city leaders on the results of the program - Quarterly

5. Who will be responsible for completing the work necessary to achieve the objectives? Please list all agency community partners. Treatment providers must be certified by the Ohio Department of Mental Health and Addiction Services.

Orlando Wheeler (Commissioner of Cleveland Emergency Medical Service) or his designee will oversee of the program with assistance from other members of the division. The agency has a data sharing partnership with the Northeast Ohio Regional Fusion Center for the purpose of tracking overdoses by various metrics such as demographics and area. Project Dawn maintains records related to Narcan use in the field. EMS has the ability to create internal and public facing dashboards for the purposes of disseminating data to interest parties.

6. Specify the indicators and measures to be used to determine whether your objectives have been met. The methodology, type of measurement utilized, and responsible individuals for collecting this data should be specified.

Detailed data records related to overdose incidents within the community will be maintained in their current form (and expanded on) for review and statistical analysis. Data variables include; date of incident, time of call, response time, subject's name, subject's age, subject's gender, subject's home address, CAD report number, EMS Run Number, address where the overdose incident occurred, type of location, if Narcan was or was not used, number of doses used, administers of the Narcan (EMS, police, fire, family, friends), suspected drug used, outcome of the subject documentation regarding follow-up home visit to include: dates, if a home visit contact was made and with whom (subject, friend, family, etc.), known if the subject entered treatment, etc.

3. Please provide a detailed description of the items included in the Project Budget table.

Cleveland EMS employees will operate this program on an overtime basis. They will be responsible for obtaining contact information from the Northeast Ohio Regional Fusion Center and reaching out to overdose victims and loved ones to provide vital resources.

All pay rates are calculated using individual employee's scaled hourly contractual rates for overtime. Pension contributions and Medicare are calculated as a percentage of pay and are standard for all Cleveland EMS employees..

4. Please provide a time frame during which the funds will be used, including milestones and project completion.

Once award notification is made, grant funds will be used to build the community outreach program through June 30, 2025.

Overdose statistical reports are routinely disseminated for review and analysis.

5. Should you be using an amount of the funds, within the allowable range, for salary, what is your plan for funding the position(s) once the grant funds are exhausted?

Funds will only be used for overtime costs. No additional positions will be created. Once the benefits of the program are shown, we will seek out additional grant funding and local funding to continue the program past this initial pilot program.

ORGANIZATION AUTHORIZATION AND CERTIFICATION

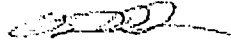
I understand that by signing this application, I grant the Ohio Attorney General's Office or its authorized agents access to any records for verification and evaluation of the information provided in this application. I understand that completion of the application does not guarantee that I will receive the requested grant.

I certify that the information I have provided in this application is, to the best of my knowledge, a true and accurate and complete disclosure of the requested information. I understand that I may be held civilly and criminally liable under federal and state law for knowingly making false or fraudulent statements.

Organization: Cleveland Emergency Medical Services - City of Cleveland

Name: Orlando Wheeler

Title: Commissioner - Cleveland EMS

Signature: 

Date: 05/21/2024