



Region 3 Prevention Lead Organization
Northeastern Vermont Regional Hospital
Substance Misuse Prevention Services
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Phone 802-753-7551

REQUEST FOR PROPOSAL (RFP): FY26 REGION 3 SUBSTANCE MISUSE PREVENTION

A. DESCRIPTION

[Northeastern Vermont Regional Hospital \(NVRH\)](#) is granting subawards under the Prevention Lead Organization Grant (# 03420-09883) from the [Vermont Department of Health, Division of Substance Use Programs \(DSU\)](#). Funding for this subaward comes from state dollars. This subaward process is the responsibility of NVRH and is being coordinated by the Northeast Vermont Prevention Consortium - Prevention Lead [Region 3 Coordination Team](#) with representatives from three health districts including Morrisville, Newport, and St. Johnsbury. In addition, a [Region 3 Advisory Committee](#) with representatives from all three health districts will approve funding allocations. This funding is intended to increase regional and community capacity to deliver meaningful substance use prevention in all three health districts. In the fall of 2023, a data committee was formed from the Region 3 Advisory Committee together with representatives of community coalitions in Region 3. This process was led by an evaluator from the Pacific Institute for Research and Evaluation (PIRE). The following data sources were reviewed to identify priorities in the region: National Survey on Drug Use and Health (NSDUH); Youth Risk Behavior Survey (YRBS); Vermont Young Adult Survey; Behavioral Risk Factor Surveillance System (BRFSS); Vermont Substance Abuse Treatment Information System; Healthy Lamoille Valley 2023 Community Assessment; Northeast Kingdom Human Services 2023 Community Needs Assessment; and data on schools, community agencies, and coalitions from around the region. Funding is available across all substances and age-groups to address substance misuse in 4 priority areas as follows (applicants are not required to choose all 4 priority areas and will generally choose one):

B. BACKGROUND AND PRIORITY AREAS (Choose One)

Funding offered through the Northeast Vermont Prevention Consortium, Prevention Lead for Region 3 (NVPC-PL3), is for the purpose of preventing the onset of substance use disorder, delaying initiation of use, promoting healthy lifestyles and optimizing well-being among individuals, families, and communities. An assessment was conducted in 2023 to better understand the strengths and gaps within our region, identify our region's priorities, and provide a basis for funding allocation. These assessment activities included a review of local data on substance misuse across all ages, including existing state and local archival data statistics related to risk and protective factors, assessed the capacity for prevention relative to resources and readiness within the region, and assessed health disparities by reviewing data and demographic information across the region. Priority areas were identified and a strategic plan was created as a result of this assessment.

Activities must use evidence-based/evidence-informed and/or promising practices, the [Vermont Prevention Model](#), and the [Strategic Prevention Framework \(SPF\)](#) process and model. It is acceptable to limit your focus to one or two areas of the Vermont Prevention Model and/or the Strategic Prevention Framework.

There will be a data collection component to this work that will include at minimum: a description of specific activities supported by the funds; a description of and the number of people served; and information on the outcomes achieved by this investment in consultation with the state prevention team. Additional data collection may be required. Further information regarding data collection will be in grant agreements and will be explained in a kickoff meeting post-award.

The NVPC-PL3 RFP will focus on the following priorities for the region for competitive grant-making:

Priority 1: Reduce underage substance use (alcohol, cannabis/marijuana use) i.e. youth recovery supports, screening and early intervention, school-based prevention, community-based prevention.

Rationale: Alcohol continues to be the most used substance among youth in the state and in the region. Rates of adolescent alcohol use in Lamoille and Orleans Counties are statistically higher than the state. Youth cannabis use rates were statistically higher than the state in Lamoille County, among LGBTQ (lesbian, gay, bisexual, transgender, and queer or questioning) and BIPOC (Black, Indigenous, and people of color) youth in Orleans County, and among LGBTQ youth in Lamoille County. With legalization and the development of retail cannabis markets around the state, a focus on prevention for youth continues to be very important.

Priority 2: Reduce underage tobacco and electronic vaping product (EVP) use (Newport & St. Johnsbury Health Districts only). i.e. youth recovery supports, screening and early intervention, school-based prevention, including Our Voices Xposed (OVX) or Vermont Kids Against Tobacco (VKAT), work to change policies in schools, businesses, and/or local municipalities.

Rationale: Rates of Electronic Vapor Product (EVP) use among Orleans County youth has been statistically higher than the state, including in 2021, though rates for both the County and state decreased that year. The rate for BIPOC youth in Orleans County in 2021 was also statistically higher. There is currently no tobacco prevention funding in northern Essex and Orleans County.

Priority 3: Reduce adult high risk substance use. i.e., Focus on healthy stress reduction and coping skills, influence on children, shifting community norms, driving while impaired.

Rationale: Rates of binge and heavy drinking are high, particularly among young adults. Older adults in Vermont report using alcohol at significantly higher rates than the US. Older adults are significantly less likely to be asked by their doctor about their alcohol use and offered advice about harmful drinking levels than younger adults. Rates of adult cigarette use are significantly higher than the state in Caledonia and Essex Counties. Adult cannabis use has been increasing in VT and is statistically higher in Lamoille County as compared to the rest of the state. Around half of young adults 18-25 who use cannabis report using it 20 or more days a month.

Priority 4: Create a community where youth and adults feel valued, connected, and supported, i.e., focus on decreasing stigma for getting help for mental health and/or substance use; reducing isolation, particularly for older adults; and building youth resiliency and youth connectedness as protective factors.

Rationale: Only around half of youth in the region report that they feel like they matter to people in the community, and this rate has been declining in recent years in all but Essex County. The rate is also much lower (less than 40%) among LGBTQ youth. More adults in Caledonia, Essex, and Orleans counties do not participate in any leisure time physical activity as compared to all Vermont adults. Adults in this region experience geographic and social isolation. Stigma is a barrier for accessing support/services for mental health and/or substance use

Scoring:

Proposals will be scored according to the following criteria (total of 100 points possible):

Narrative (60 points):

Logic Model (5 points):

Budget (20 points):

Evaluation Plan (15 points):

C. ELIGIBILITY

Project activities must primarily impact the individuals or communities within Region 3 (Morrisville, Newport, and St. Johnsbury Health Districts). Collaborative proposals are welcome, but one entity must submit as the lead applicant. Individual persons are **not** eligible to apply. The following organization types are eligible to apply for funding:

- Individual Schools
- Supervisory Unions/School Districts
- Hospitals/Healthcare systems
- Nonprofits (examples include, but are not limited to: social service agencies, parent child centers, regional planning commissions, and organizations that provide resources and programming to the public, such as libraries, arts organizations, etc.)
- Colleges and universities, including community colleges
- Municipalities
- Native American Indian Tribes recognized by the State of Vermont
- Faith-based organizations
- Community group with a fiscal agent.

D. OPPORTUNITY

Project Period: July 1, 2025 through June 30, 2026. All funds must be expended by June 30, 2026.

FY26 Total Funding Available: \$111,000

Note: Efforts will be made to distribute evenly across health districts. There may be opportunity for multi-year grants.

Minimum Award: \$7,500 Maximum Award: \$20,000

Important Dates:

- Release of RFP: **March 17, 2025**
- Informational Session: **March 26, 2025 9:00 a.m. - 10:00 a.m.**

Zoom Meeting Link:

<https://us02web.zoom.us/j/88067167610?pwd=u4Ra0jqbronwn5VUbuVqNSCdVFdI3Y.1>

- Questions: All questions must be submitted in writing to c.chandler@nvrh.org by **March 28, 2025** by **5 p.m.** Please put "Questions about Region 3 Substance Misuse Prevention Grant" in the subject line. Responses to questions will be available for viewing no later than 5pm April 5, 2025 at <https://nvrh.org/nvpc-pl/>. No additional correspondence should be initiated on your part unless it is to update your contact information or retract your application. You will be contacted if there are clarification questions for your application.
- Proposal due date: **April 18, 2025 by 5 p.m.** Applicants are limited to one application per entity, however, fiscal agents may be attributed on multiple applications. The completed application should be sent to c.chandler@nvrh.org
- **Notice of Award:** No later than **June 30, 2025**

Preparing and Submitting Your Application:

Complete applications must be submitted by email to c.chandler@nvrh.org no later than **5:00 p.m. on April 18, 2025.**

- Anticipated award date: No later than **June 30, 2025.**
- All projects must be completed and all funds expended by **June 30, 2026.**

E. APPLICATION REVIEW INFORMATION

Each submitted application will undergo an initial screening for compliance with RFP requirements. Applications found to be incomplete or out of compliance may not be sent forward for merit review.

Each application will be read by a panel of at least 2 members of the Advisory Committee who will rank each application using a scoring rubric. Revisions on any application needing further clarification may be requested.

F. AWARD EXPECTATIONS

The following expectations are applicable only if proposals are accepted for funding. The expectations are intended to make organizations aware of what to anticipate and help them realistically budget for staff time and effort.

Upon award, funded applicants will be **required to submit a detailed workplan** outlining key activities, timelines, and expected outcomes. This workplan must be **submitted by close of business August 15, 2025 to c.chandler@nvrh.org**. Additional guidance on workplan expectations will be provided during the subgrantee kickoff meeting.

Prevention Lead Organization Funds granted to NVRH through the Vermont Agency of Human Services, Vermont Department of Health, Division of Substance Use Programs, require that costs are incurred up-front and then reimbursed at the end of each month. This opportunity allows for **monthly invoicing for costs incurred in the previous month**. Additionally, **backup/receipts documenting grant expenditures must be submitted with one invoice per every 12 months of the grant period (month TBD)**.

Monitoring methods will include, but are not limited to, review of performance reports, comparison of invoiced costs to the approved budget, site visits, and phone/email check-ins.

All materials created under grants funded through this RFP that are intended for use with the public, such as surveys, prevention toolkits, or educational materials (including but not limited to posters, flyers, brochures, presentations, videos) will be made available for use under the terms of a <https://creativecommons.org/licenses/by-nc-sa/4.0/> and submitted with the appropriate semi-final or final performance report. Acknowledge funder in any advertising by using logo on all materials along with this statement: "Funding for this project made possible through a grant awarded to Northeastern Vermont Regional Hospital Prevention Lead Organization by the Vermont Department of Health, Division of Substance Use Programs."

Grantees will be expected to share state and/or regional prevention messaging through channels such as social media, websites, and newsletters, as applicable. Messaging will be provided to grantees by the Region 3 Coordination Team.

Required Trainings:

- NVPC-PL Subgrantee Kick-Off Meeting (date TBD)
- Prevention 101 Training for applicants who did not attend in FY24/FY25 (dates TBD)
- Other trainings as identified in contract