



Effingham County, Illinois

Opioid Settlement Funding Request Application Outline

I. Cover Letter

- a. A brief letter addressed to the Effingham County board describing your organization, proposed project, project partners, and total request.
(4-5 sentences)

II. Contact Information

- a. Please include information for your organization's primary contact including, but not limited to:
 - i. Name, Title, Mailing Address, Phone Number, Email Address

III. Proposed Project

- a. Describe in detail your proposed project and how this project relates to one or more of the nine Core Opioid Epidemic Abatement Strategies.
(3-4 paragraphs)

Core Opioid Epidemic Abatement Strategies

1. Broaden access to Naloxone
2. Increase use of medications to treat opioid use disorder
3. Provision of treatment and support during pregnancy and the postpartum period
4. Expand services for neonatal opioid withdrawal syndrome
5. Fund warm hand-off programs and recovery services
6. Improve treatment in jails and prisons
7. Enrich prevention strategies
8. Expand harm reduction programs
9. Support data collection and research.

IV. Proposed Budget & Justification

- a. Describe in some detail your proposed project budget and proposed use of Effingham County Opioid Settlement Funding. Please specifically list your planned expenses alongside a short justification for the expense.
(1-2 sentence per line item)

V. Performance Measurement

- a. Please describe how you will quantitatively measure the effectiveness of the Effingham County Opioid Settlement Funding on your project. For example, the number of individuals that received direct assistance due to this funding allocation.

(4-5 Sentences)

Application requests can be submitted by mail, in-person, or electronically utilizing the contact information below:

Effingham County Board

Effingham County Office Building

C/O Angie Thompson

101 S. 4th Street

Suite 301

Effingham, Illinois 62401

Phone: (217) 342-4990

Email: countyboard@effinghamcounyil.gov