



OSF-11
Opioid Settlement Fund
Application
Status: Active
Submitted On: 6/3/2024

Primary Location

No location

Applicant

Tasha Withrow
 304-962-6795
 twithrow32@gmail.com
 116 Heritage Place
Scott Depot, WV 25560

Internal Section

Decision

—

Award Amount

—

Additional Comments

Certification

PLEASE CERTIFY THAT YOU HAVE REVIEWED THE SCHEDULE A CORE STRATEGIES AND SCHEDULE B-APPROVED USES

Digital Signature*

Tasha N Withrow
Jun 3, 2024

[Click here for more information.](#)

Contact Information

Organization Name*

Project Mayday

Address* 

116 Heritage Place, Scott Depot, WV
25560

Website (if applicable)

maydayx.net

Phone Number* 

3049626795

Email Address*

twithrow32@gmail.com

 Tax ID Number

Tax ID Type*

SSN

Tax ID Number*

***-**-9475

Project Summary

Please provide a narrative overview or summary of your proposal, including but not limited to the following:

1. Brief description of the proposal *

Project Mayday aims to provide the community and people who use drugs with low-barrier access to naloxone and other overdose prevention tools such as fentanyl and xylazine test strips. To effectively implement overdose prevention efforts, Project Mayday is in need of supplies to create what the group has termed "Mayday Kits". Mayday Kits are overdose response kits that anyone can keep on their person, in their homes, or their cars. Each kit contains two doses of nasal narcan or intramuscular naloxone, gloves, CPR face shield, hand sanitizer, fentanyl test strips, and a portable sharps container. This equips the person who responds to an overdose with the tools to properly do so, to keep them and the other person safe, and to safely dispose of everything following the event. These supplies are purchased on Amazon and are currently purchased through the use of donations and personal funds. The kits are issued during outreach events and supply distribution.

2. Purpose and key anticipated outcomes*

The purpose of this proposal is to prevent fatal overdoses among people who use drugs. The anticipated outcomes include: 1) provide education on overdose response; 2) provide supplies needed for overdose response; and 3) provide information on harm reduction services to people post-overdose.

3. Individuals or communities served*

People who use drugs in Kanawha County

4. Amount of funding requested*

5000

5. Amount of any bids or cost estimates received to date, if applicable

—

6. Amount of matching funds raised or committed by your organization*

100

7. Source of matching funds raised or committed by your organization*

Personal

8. How Opioid Settlement funds, if awarded, will be used*

- a. Mayday Kits which will include the following:
 - i. Gloves
 - ii. CPR face shield
 - iii. Hand sanitizer
 - iv. Portable sharps container
 - v. Naloxone
 - vi. Fentanyl test strips
 - vii. Xylazine test strips
- b. Education materials
 - i. Brochures
 - ii. One pagers
 - iii. Stickers with QR code for naloxone reporting

9. Which Core Strategies or approved uses will be met*

- a. Core Strategy: A - Naloxone or other FDA-Approved drug to reverse opioid overdoses
- b. Approved Use: H - Prevent overdose deaths and other opioid-related injuries

10. How long it will take you to complete the project if awarded funding

Approximately 3-6 months

Proposal Details

1. Please describe the problem or need which your project seeks to address*

Our project seeks to address the problem of opioid overdoses in Kanawha County.

2. Please provide the details regarding the design and strategy of your proposal*

The proposal is designed to replicate a current initiative of Project Mayday which are the Mayday Kits. The strategy of the proposal outlines the methods in which the Mayday Kits will be implemented. The strategy is simple and straight forward. Funds will be used to purchase the materials needed to create the Mayday Kits. Once the materials arrive the kits will be assembled. Upon completion of the kits, they will then be distributed during outreach events, narcan pop-up events, and supply distribution.

3. Please provide your project timeline* 

Month 1: Order, receive and assemble Mayday Kits

Month 2-6: Conduct 'narcan pop-ups', outreach events and supply distribution events to distribute Mayday Kits

4. Please provide your project's total proposed budget.*

Item	Cost	Amount	Total
CPR Face Shields	\$27.59	50	\$1379.50
Hand sanitizer	\$13.24	50	\$662.00
Sharps Container	\$14.95	100	\$1,495.00
Canvas bag	\$9.99	100	\$1,000.00
Gloves	\$7.48	50	\$374.00
Fentanyl Test Strips	FREE		
Xylazine test strips	FREE		
TOTAL			\$4,910.50

5. Please list any partners in this proposal, and the partner's role and your relationship with them. *

None

6. Please identify the anticipated leadership of the proposal and upload/attach their resume(s) or CVs*

Tasha Withrow

7. Please describe your plan for sustainability of the project or initiative after the grant award has been exhausted

This grant will help sustain the initiative long enough to raise funds through donations to purchase more supplies.

Organization Information

1. Please provide your organization's mission statement. *

Project Mayday is a drug-user and peer led collective that operates within a harm reduction framework and participates in community-based mutual aid to ensure the collective well-being of our neighbors. Our mission is to center the health and well-being of folks who use drugs and those experiencing homelessness, especially in Appalachia by meeting them where they are, identifying systemic and institutional barriers, and providing support and resources to help mitigate those barriers.

2. Describe the history of your organization, tell us about your current programs and activities*

We were created in October 2022 in response to the need for harm reduction and mutual aid in the area. We currently provide what is legally allowed for safe use and safe sex supplies, referral to harm reduction programs, and provide education on harm reduction, safer drug use, safer sex, and overdose prevention/response. We are a group of people with lived experience and the desire to give back to the community.

3. List any federal, state, local or private grant awards or funding received in the last three years and the current status of those funds. If your organization has previously received funds from Kanawha County, please list the amount, nature of the project(s) and current status of the funding and project(s). *

NACCHO and ORAU - \$15,000: This grant was for a very specific project. We created a photo essay of folks with lived experience with harm reduction and disseminated it online and in print with this grant. This grant was not permitted to be used to for supplies.

4. Please list your Owner(s), Board of Directors, senior staff members, or other key members of your organization:*

Tasha - Chair/Treasurer
Tommy - Co-chair
Dani - Secretary

5. Please list the staff involved with this project and describe their roles and responsibilities:*

Tasha - program management, treasurer, creation of education materials, grant management., outreach, education
Tommy - education, peer navigation, outreach
Dani - education, wound care, outreach

6. Please upload/attach the following financial documents, if applicable:

Cash flow statement for applicant's most recent fiscal year



No File Uploaded

Two years of audited financial statements



No File Uploaded

Current operating budget



No File Uploaded

If the applicant has not been audited, please include an unaudited balance sheet and income statement as prepared by the applicant



No File Uploaded

7. If you have made an application for funding for this project from other sources (city, state, private or non-profit organizations) please list the same here.*

Not applicable

8. Please describe three significant accomplishments of your organization within the last three years

1. Continued support from friends and the community.
2. Successful benefit show, awareness activities, and outreach events.
3. Receipt of a grant to develop a communication project and the creation of a photo essay.

Supplementary Information

1. Please enter contact information (name, email, and phone) for at least one third-party reference.*

Sarah Stone, scord227@gmail.com, 681-220-2352

2. Please include any supplementary information or documentation (such as letters of support, newspaper articles, etc) which you feel will be essential to the County's review.



No File Uploaded

Attachments



Optional: Additional Proposal Leadership resume(s) or CVs

RESUMECV (1).docx

Uploaded by Tasha Withrow on Jun 3, 2024 at 3:54 PM

History

Date	Activity
6/3/2024, 3:58:01 PM	changed the deadline to Jun 04, 2024 on approval step Application Review on Record OSF-11
6/3/2024, 3:57:59 PM	Tasha Withrow submitted Record OSF-11
6/3/2024, 3:23:55 PM	Tasha Withrow started a draft of Record OSF-11

Timeline

Label	Activated	Completed	Assignee	Due Date	Status
✓ Application Review	6/3/2024, 3:57:59 PM	-	-	6/3/2024	Active
📄 Request Letter of Acknowledgement	6/3/2024, 3:57:59 PM	6/3/2024, 3:57:59 PM	-	-	Completed