

# **TOWN OF LITTLETON**

## **Request for Proposals For Regional Opioid Abatement Coordination and Support Services – Nashoba Opioid Abatement Collaborative (NOAC)**

**Town of Littleton  
Procurement Office  
37 Shattuck Street  
Littleton, MA 01460  
[Kkouvo@littletonma.org](mailto:Kkouvo@littletonma.org)**

**Release Date: March 4, 2026  
Deadline for Questions: April 17, 2026  
Proposal Deadline: May 1, 2026  
Selection Notification: May 29, 2026  
Project Start Date: July 1, 2026**

## **Introduction**

The *Nashoba Opioid Abatement Collaborative (NOAC)* invites qualified consultants to submit proposals for the coordination, implementation, and oversight of opioid settlement-funded initiatives within seven North Central MA/Nashoba Valley area towns. These efforts will support the development of evidence-based substance use prevention and remediation strategies across participating municipalities. The selected consultant will work collaboratively with each community to assess needs, design responsive programming, and drive measurable impact. A key component of this role is ensuring program sustainability through the identification and pursuit of alternative funding sources, including grants and reimbursable services.

## **Background**

The *NOAC* (including the towns of Harvard, Littleton, Bolton, Shirley, Ayer, Groton, and Pepperell) seeks to pool Opioid Abatement Settlement Funds regionally to meet the evolving needs of the community around substance use disorder and mental health.

The group has been meeting for over a year to develop a plan for pooling funds to maximize impact across the involved towns, in line with the [Attorney General's Massachusetts State Subdivision Agreement for Statewide Opioid Settlements](#), with planning support from Nashoba Associated Boards of Health. The group of towns will sign an MOU/IMA and develop an advisory board to oversee the activities within the scope of this request for proposals.

## **Scope of Work**

The contracted organization will be responsible for the following:

### **1. Community Partnership:**

- o Building up appropriate partnerships across sectors, including town agencies, first responders, schools, community organizations, and healthcare and/or treatment centers
- o Building and maintaining relationships with other professionals, institutions, and agencies implementing substance use services via education, prevention, outreach, support and treatment.
- o Planning and facilitating meetings as needed, including setting agendas and timelines, and documenting plans.
- o Collaborating with police and existing co-response programs and restorative justice initiatives as appropriate to provide evaluation and intervention services for court-involved residents

## 2. Assessment & Referral:

- o Assessing resident needs and referring to appropriate resources, providing “connections to care” and “warm handoffs”

## 3. Education & Program Planning:

- o Developing and overseeing a comprehensive substance use prevention strategic action plan including goals, objectives, and activities; evaluates the Plan on an annual basis.
- o Identifying, coordinating, and implementing programs in line with population priorities
- o Planning, identifying, applying for, and managing grant funding to sustain and expand programming
- o Planning and facilitating the utilization of speakers, presentations, assemblies and other community education and awareness programs on substance use and mental health related issues

## 4. Resource Brokerage & Advocacy:

- o Providing updated alcohol, tobacco and other drug prevention education and treatment resource guides and violence prevention + mental health-related resources and materials.
- o Maintaining a strong working knowledge of existing area and state-wide resources for behavioral health and substance use disorder
- o Engaging in advocacy related to mental health and substance use disorder (ex., access to treatment and resources)

## 5. Data Collection, Analysis & Reporting:

- o Assessing and prioritizing regional needs, taking into account existing data sources such as town survey results, Massachusetts Health Data Tool, community health assessments, etc.
- o Fielding input from folks with lived experience
- o Collecting and analyzing data to evaluate program effectiveness. Prepare detailed reports on program activities, outcomes, and impact; shares results at least semi-annually with the *NOAC* advisory board
- o Performing all State reporting requirements as outlined in State Subdivision Agreement

## 6. Other Responsibilities:

- o Maintaining a strong working knowledge of best practices in the field of public health, substance use disorders, and harm reduction, and staying informed of opioid settlement activities in other jurisdictions.
- o Seeking and applying for grant funding and identifying other funding mechanisms (ie, insurance reimbursable/billable services) to maintain program sustainability
- o Contractor responsible for immediate supervision and making sure employees are properly trained and licensed.
- o Performing similar or related work as required, directed or as situation dictates.

## **Budget**

Funding will come from pooled Opioid Settlement Funds contributed by the participating municipalities. Each community will allocate an annual settlement distribution under this regional agreement. The combined funds available will vary each year in accordance with [annual opioid settlement disbursements](#).

Respondents are required to submit a detailed cost proposal identifying the total annual cost to provide the services described in this RFP, inclusive of all personnel, benefits, administrative, and overhead expenses. The proposal must demonstrate that services can be delivered within the available settlement funding.

Respondents should not assume that the total pooled funds are available for a single fiscal year. Instead, funding will be budgeted annually and be renewed contingent upon available settlement distributions and satisfactory performance.

## **Deliverables**

- Proposal including suite of services (draft and final)
- Executive Summary highlighting key high-level points
- Presentation of plan to stakeholders

## Proposal Requirements

Interested contractors must submit a proposal that includes:

1. **Company Profile:** Background, experience, and expertise with mental health, substance use disorder, and community engagement
2. **Approach and Methodology:** A detailed hiring/retention plan (if applicable) and programming timeline, including sustainability considerations
3. **Health Equity:** Demonstrated commitment to and proven track record of reaching vulnerable populations and infusing health equity into approach, particularly in rural areas
4. **Qualifications:** Resumes of key personnel responsible for program oversight and implementation.
5. **Budget Proposal:** Cost breakdown of proposed services aligned with State reporting requirements (See attached budget template).
6. **Reporting Structures:** Description of data collection, reporting methods, and success measures provided to stakeholders semi-annually.
7. **References:** List of municipalities or organizations previously served. NOAC reserves the right to contact up to three references from that list.

## Evaluation Criteria

Proposals will be reviewed based on the following non-price criteria using the following rating system: *Highly Advantageous*, *Advantageous*, *Not Advantageous*, or *Unacceptable*.

### 1. Company Experience and Expertise

**Highly Advantageous:** The agency has more than five years of experience delivering substance use disorder and behavioral health programs, with a proven record of success in municipal collaborations. The agency demonstrates strong organizational capacity, employs evidence-based practices, and has successfully managed grant-funded or settlement-funded initiatives. References and examples of prior work clearly demonstrate measurable outcomes and sustained community impact.

**Advantageous:** The agency has at least three to five years of relevant experience providing substance use disorder services and demonstrates a competent understanding of regional collaboration. The agency has completed comparable projects with generally positive results and adequate administrative and reporting capacity.

**Not Advantageous:** The agency has limited experience (one to two years) providing substance use disorder services or lacks sufficient experience in regional or municipal settings. The proposal provides minimal evidence of prior outcomes or successful project management.

**Unacceptable:** The agency has little to no relevant experience in substance use disorder or behavioral health programming or fails to demonstrate the organizational capacity to perform the required scope of work.

## 2. Methodology and Approach

**Highly Advantageous:** The proposal provides a comprehensive, detailed, and realistic plan demonstrating community engagement and collaboration and a clear understanding of regional needs and objectives.

**Advantageous:** The proposal includes a credible and practical plan that addresses most objectives with adequate detail.

**Not Advantageous:** The proposal lacks sufficient detail or omits key project elements.

**Unacceptable:** The proposal fails to address key objectives or lacks a clear service plan.

## 3. Timeline for Implementation

**Highly Advantageous:** The proposer commits to full implementation within 3 to 6 months of contract award and provides detailed project design and schedule.

**Advantageous:** The proposer provides a feasible implementation timeline of 6 to 9 months.

**Not Advantageous:** The proposed implementation timeline is 9 to 12 months with limited detail.

**Unacceptable:** No realistic timeline provided or implementation plan exceeds 12 months.

## 4. Qualifications of Personnel

**Highly Advantageous:** The proposed team includes professionals with a combination of advanced degrees, licensure, and certifications in behavioral health or substance use disorder-related fields. Team members demonstrate significant (ten or more years) experience delivering substance use prevention, intervention, or recovery services in municipal or regional settings. The proposal clearly identifies roles, responsibilities, and supervisory structures, and demonstrates a strong capacity to perform all aspects of the scope of work.

**Advantageous:** The proposed team includes personnel with relevant degrees or certifications and moderate experience (five to ten years) in substance use or behavioral health programming. The proposal identifies key staff and responsibilities and demonstrates a general ability to meet work scope requirements.

**Not Advantageous:** The proposed team includes personnel with limited direct experience (two to 5 years) in substance use or behavioral health work, or lacks clear definition of roles and qualifications. The proposal shows minimal evidence of experience in municipal or regional service delivery.

**Unacceptable:** The proposal fails to identify qualified personnel, lacks necessary licensure or certifications, or provides insufficient information to evaluate team qualifications.

## 5. Cost-Effectiveness and Fiscal Responsibility

**Highly Advantageous:** The proposed budget is complete, transparent, and demonstrates exceptional cost-efficiency. The proposer provides clear justification for all expenses, aligns costs with deliverables, and demonstrates a strong understanding of fiscal management in contracts. The proposed cost structure reflects sustainability and efficient use of pooled funds.

**Advantageous:** The budget is reasonable and well-organized, with adequate justification for most expenses. The proposer demonstrates general fiscal responsibility and the ability to perform services within the available funds.

**Not Advantageous:** The budget lacks sufficient detail or justification for key expense categories. Some costs appear excessive or misaligned with proposed activities, raising concern about fiscal management.

**Unacceptable:** The budget is incomplete, inconsistent, or unrealistic. Proposed costs do not line up with the described services, or the proposal demonstrates a lack of financial understanding.

## 6. References

**Highly Advantageous:** References report outstanding performance and strong communication with past municipal partners.

**Advantageous:** References provide positive feedback with minor concerns noted.

**Not Advantageous:** References express some concerns about performance or reliability.

**Unacceptable:** References report significant issues or non-performance.

## **Submission Instructions**

Proposals must be submitted in two separate envelopes. The first envelope shall contain the Technical Proposal detailing how the proposer will meet the scope of work and program objectives. The second envelope shall contain the Price Proposal, which will be opened only after the Technical Proposals have been evaluated. All proposals must be submitted May 1, 2026 electronically in PDF format no later than [kkouvo@littletonma.org](mailto:kkouvo@littletonma.org) with the subject line: PROPOSAL – REGIONAL OPIOID ABATEMENT COORDINATION AND SUPPORT SERVICES. Late submissions will not be considered.

## **Questions & Clarifications**

All questions must be submitted via email to [fdagle@littletonma.org](mailto:fdagle@littletonma.org) no later than **April 17, 2026**. Responses will be shared publicly through the official town websites of participating municipalities.

## Terms & Conditions

- The *NOAC* reserves the right to accept or reject any or all proposals.
  - The selected consultant must comply with all applicable local, state, and federal laws.
  - Contract award is subject to ongoing Opioid Abatement litigation and funding availability.
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For further information, please contact:

[kkouvo@littletonma.org](mailto:kkouvo@littletonma.org)

**Vendor Name:**  
**Fiscal Year:**

Nashoba Opioid Abatement Collaborative (NOAC)  
 Regional Opioid Abatement Coordination and Support Services

**Date of Submission:**

Program Component	FTE	BUDGET	Comments/Narrative
<b>PROGRAM STAFF</b>			
<b>STAFFING SUB TOTAL</b>	0.00	\$ -	

Program Component	BUDGET	Comments/Narrative
<b>Contracted Program Expenses/Other</b>		
<b>EXPENSES SUB TOTAL</b>	\$ -	

<b>TOTAL PROPOSED BUDGET COST</b>	\$ -
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