

# Preston County Commission Opioid Advisory Board

## Project Scoring Rubric (100 Points Total)

### 1. Alignment with the Preston County Commission Opioid Advisory Board Mission & Community Priorities (25 points)

*(Prevention, treatment, recovery, and harm reduction grounded in Preston County needs)*

**5** – Little or no connection to opioid prevention, treatment, or recovery in Preston County; does not align with the Committee’s mission or community priorities.

**10** – General connection to substance use issues, but weak or unclear relevance to Preston County’s specific needs or the Committee’s mission.

**15** – Moderate alignment with the Committee’s mission and opioid response goals; limited use of local data or community context.

**20** – Strong alignment with the Committee’s mission and priorities; proposal reflects Preston County needs and identifies a clear opioid-related focus area (prevention, treatment, recovery, or harm reduction).

**25** – Excellent alignment with the Preston County Opioid Advisory Committee’s mission and strategic priorities; clearly grounded in local data, community input, and opioid impact in Preston County, with a well-defined path to community benefit.

### 2. Community Engagement, Equity, and Transparency (25 points)

*(Community-based leadership, fair access, and accountable use of opioid settlement funds)*

**5** – Minimal attention to community engagement, equity, or transparency.

**10** – Limited description of who will be served, how communities will be engaged, or how funds will be used transparently.

**15** – Some community involvement and equity considerations are described, but plans lack depth or clarity.

**20** – Clear plans for community engagement, inclusive service delivery, and transparent project management; demonstrates collaboration with local partners or stakeholders.

**25** – Strong community-based approach that centers people with lived experience, underserved populations, and cross-sector partners; clearly describes transparent

decision-making, ethical stewardship of settlement funds, and equitable access to services.

### 3. Evidence-Based and Best-Practice Strategies (25 points)

*(Use of proven approaches and alignment with opioid response best practices)*

**5** – Strategies are unclear, unsupported, or inconsistent with best practices in opioid prevention, treatment, or recovery.

**10** – Limited evidence base; strategies appear loosely connected to known best practices.

**15** – Mix of evidence-informed and unproven strategies; some explanation provided but limited detail.

**20** – Strong use of evidence-based or promising practices relevant to opioid response; proposal demonstrates awareness of research or established models.

**25** – Clearly grounded in evidence-based or nationally recognized best practices (e.g., SAMHSA, CDC, Community Guide, peer-reviewed research); thoughtfully adapts strategies to fit Preston County's local context.

### 4. Implementation Capacity, Impact, and Evaluation (25 points)

*(Feasibility, accountability, and measurable community outcomes)*

**5** – No clear plan for implementation, staffing, partnerships, or evaluation.

**10** – Implementation plan is vague; limited information on capacity, timelines, or outcomes.

**15** – General implementation plan with some gaps; evaluation approach is basic or underdeveloped.

**20** – Realistic implementation plan with timelines, roles, and partnerships; includes outcome tracking and basic evaluation methods.

**25** – Well-developed implementation plan demonstrating strong organizational capacity, clear milestones, defined partner roles, realistic budget use, and a robust evaluation strategy with measurable short- and long-term outcomes tied to opioid prevention, treatment, or recovery.