

BHC Meeting

May 12, 2022, 3pm

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Agenda – 05/12/22 BHC Meeting

- Introductions & Updates 20 Minutes
- RoadMap to Recovery 5 minutes
 - Lisa Rey Thomas, ADAI
- Update: BHC Projects 20 minutes
 - Lori Fleming
- Update: BHC's Education and Outreach Efforts 15 minutes
 - Anya Callahan
- Next Meeting: June 9, 3pm Zoom
 - Siobhan Brown, 1115 Next Waiver Overview and impacts to our Community Based Organizations (CBO)
 - Milestone Data Review for September 2021 through February 2022

Roadmap to Recovery

Ensuring Opportunity and Community for Recovery

Introduction and History

- The Health Care Authority received a research and planning grant from the Centers for Medicare and Medicaid Services (CMS)
- At the conclusion of the grant, the Health Care Authority will have a "Roadmap to Recovery" to:
 - Increase the capacity of medicaid providers to deliver a full spectrum of Substance Use Disorders and Recovery Support Services
- The work aligns with the goals of the medicaid waiver, the State
 Opioid Response plan, and the Blake Bill

Summary of Interview Process

- ADAI is contracted with the HCA to conduct a regional environmental scan to understand the system-level innovations, gaps, and opportunities in substance use disorder (SUD) services and funding (harm reduction, treatment, recovery supports).
- Some of our questions ask about services for people with SUD and some questions are focused on financial aspects of SUD services.
- We aren't asking you to share your personal stories or information. We are interested in your experience and observations of services in your region.

Your role

- Be a voice for those you care about
- Help us understand the unique needs of your region
- Advise on innovations, opportunities, and barriers
- Provide information, reports, or financial information to understand the cost of care





ADAl's 3rd Annual Conference



Registration Link

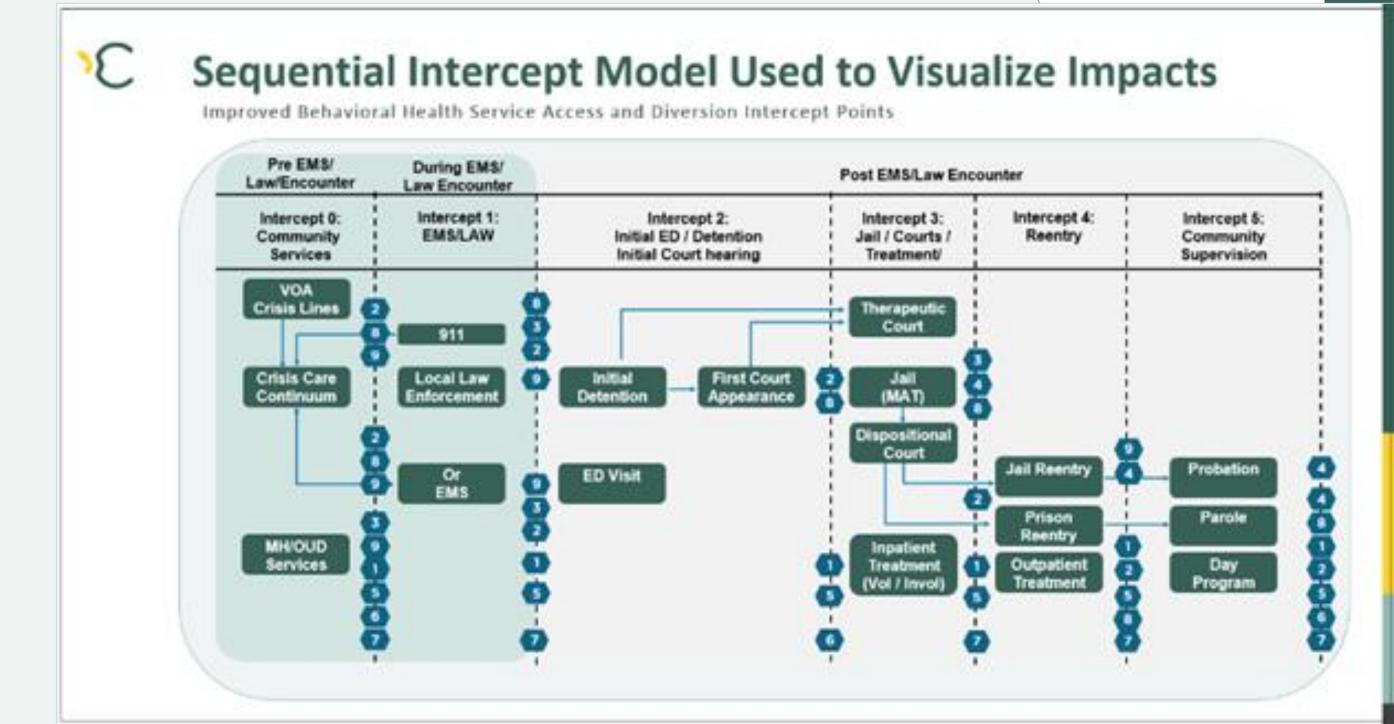


BHC Project Update

Lori Fleming

C BHC Projects

- 1. Increase Integration of Behavioral Health Therapy
 Provider and MAT Prescription
 - 2. Explore Crisis Stabilization Center Feasibility (determined not feasible at this time)
- 3. Develop/maintain online/printed Resource Directory
- 4. Improve Jail-to-Community service connection
- 5. Fund Recovery Café for peer network development and recovery/prevention environment
- 6. Extend Harm Reduction Program Services into South County
- 7. Execute communication/education/integration efforts to address regional stigma
- 8. Coordinate and optimize navigator and care coordination services
 - 9. Initiate collective case management for high utilizers of law enforcement/EMS services



BHC Projects



9. Initiate collective case management for high utilizers of law enforcement/EMS services

Renewal Waiver Q&A

- What role does HCA envision for clinical partners under the renewal waiver? Current focus seems to be mostly on CBOs. Clinical partners have been deeply engaged to date and are curious as to what role they can play moving forward.
- When will HCA be ready to discuss implementation? OCH would like to be ready to "go" at the beginning of the year to maximize time and resources.
- When does HCA anticipate having funds flow, budget amounts, and details on how ACHs will earn renewal waiver dollars? This is critical for planning budgets and partner engagement.
- The Olympic region would like to move forward with a digital communication & referral platform sooner than the state's timeline. Does HCA anticipate that interoperability among various platforms will be considered? Or. does the Olympic region have the potential of "pulling the plug" if the state chooses a single platform without interoperability?



OCH Board members asked these questions of HCA's Policy Deputy Director, Michael Arnis, at the May 9th OCH Board Meeting RE: the upcoming 1115 Waiver Renewal (MTP 2.0) and the new focus on Community Based Organizations (CBO)

"When we talk about community information exchange, there is a sense that more needs to be built up on the community based organization side than on the than on the clinical side, because we've been working on that progressively now for at least a couple of decades with EHRs and other systems...our goal is to combine the two down the road....we have failed to talk about critical community clinical linkages..."



BHC Projects – Therapeutic Courts Update



Thu 5/12/2022 1:06 PM

James Kennedy

Therapeutic Courts Coordinator

To Lori Fleming

The therapeutic courts coordinator is a must have for Jefferson County going forward. This is already a common practice in many jurisdictions.

It became clear last year as we attempted to overhaul our drug court protocols for the first time in nearly 20 years that we needed a full time coordinator to complete this job and help us shape policies and procedures for the future.

Additionally, having a coordinator allows us to coordinate resources and ideas. For example, for years Behavioral Health Court was able to set up housing through Bayside for its participants. Only this year has Drug Court started to do the same. My hope is that having a full time coordinator would also allow that person to keep their eyes open for any potential grant opportunities for our therapeutic courts to bring in even more resources. Right now we don't have anyone whose job it is to do that.

Everyone working with the therapeutic courts in Jefferson County is in agreement that this position is needed, and that it is needed right now. I hope that the 1/10th of 1% board will fund it given that the fund was set up for the specific purpose of funding therapeutic courts.

James M. Kennedy

Jefferson County Prosecuting Attorney / Coroner Phone 360-385-9180



South County Harm Reduction

Exploring Vending Machine for Harm Reduction Supplies

- Located at the Brinnon Community Center site
- Clarifying: budget; how the technology pieces work;
 who will "own" the program; timeline.
- Generating action plan to engage with and create cultural alignment with Community



Stigma of Substance Use...

https://www.youtube.com/watch?v=wYASebEeNTI

Exploring Mobile Harm Reduction Service Integration

- What does the BiR/OPHS operational model look like?
 - How and where are clients accessed?
 - How is the induction process done?
 - What does Client follow up look like?
 - What services will be offered?
 (Needle Exchange? Wound Care?
 Service linkage to support improved social determinants of health?)
 - How will this be integrated with community, EMS, JCPH, etc.?
- Action plan for BiR/OPHS to engage with and create cultural alignment with Community



BHC's Education & Outreach Update

Anya Callahan



Success! It took a Village - and Ours Stepped Up!

Naloxone Piggy-Backed on JCPH Drug Take Back Event

(Wouldn't have happened without Holly Gumm's facilitation with the Empowered Teens Coalition)

Positive Community reception in Quilcene

(Sheriff Nole was a Star)

11 naloxone kits distributed

(Thanks to Dr. Carlbom, the kits were consistent with what EJFR distributes.)



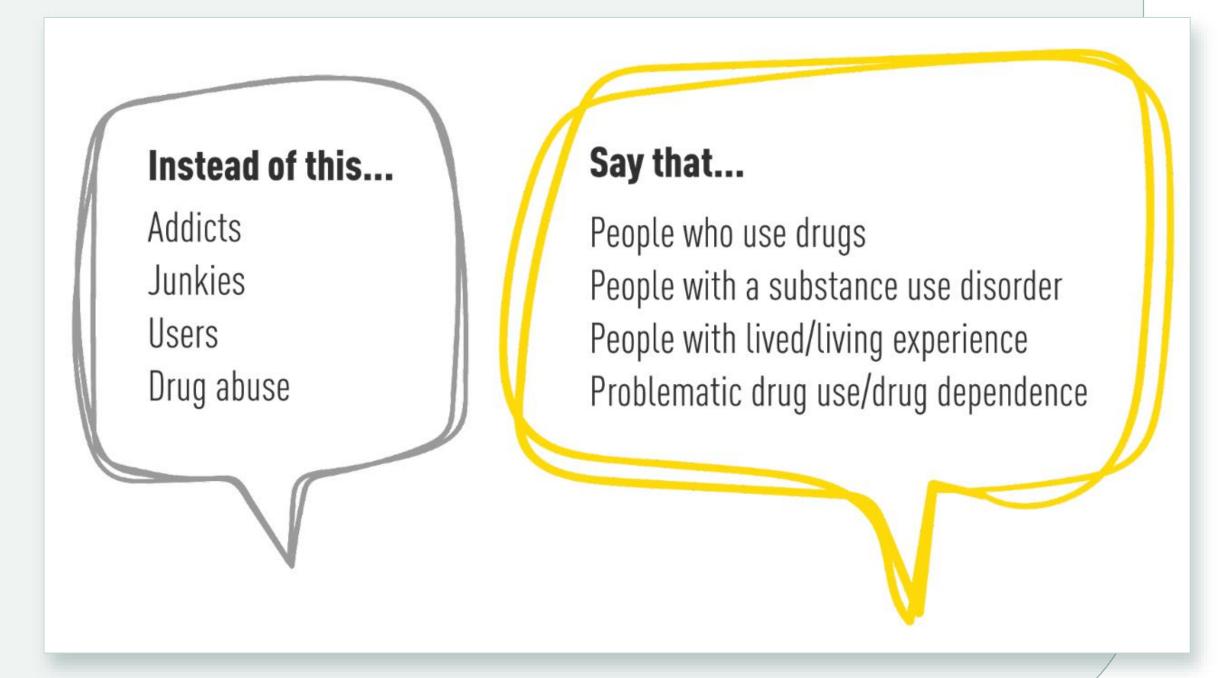
Proposal for October's Drug Take Back Day

 Naloxone kit education and distribution at all three county locations - Port Townsend, Port Hadlock, and Quilcene



Stigma of Substance Use...

https://www.youtube.com/watch?v=wYASebEeNTI





Upcoming Overdose Education and Outreach Opportunities

- Show Us Your Community at Quilcene High School May 20th
- Olympic LGBTQIA Pride in Port Townsend June 25th
- 4th of July at Fort Worden
- Farmer's Market JCPH booth July or August
- Overdose Awareness Day August 31st
- Wooden Boat Festival September 9-11
- Community naloxone trainings in person or zoom community naloxone training.
 Supporting the expanded naloxone services at the Jefferson County Public
 Health Department. (example: Ocean's training with the Public Defender's office and request to offer trainings to other public employees)



Articles of Note

New data shows a surge in overdose deaths involving fentanyl and methamphetamine. Overall, the nation saw a 15 percent increase in deaths from overdoses in 2021. Estimated 30% increase in WA State.

https://www.nytimes.com/2022/05/11/us/politics/overdose-deaths-fentanyl-meth.html

Oregon schools now areas of fentanyl overdose risk, law enforcement warns

"The really at-risk group right now is those 12 to 17 obtaining those pills, taking them thinking that they're something they're not and overdosing and dying as a result of what it is that they've taken," Gibson said.

https://kcby.com/news/local/hidta-warns-local-schools-of-fentanyl-overdose-risk-in-school-aged-youth-naloxone-opioid-death-drugs-narcotics-oregon

Pat Allen, the Oregon Health Authority director, said that, as was the case in other states with surging overdose deaths, the clear difference in 2021 had been the ubiquity of fentanyl. Children as young as 12 are considered at high risk of obtaining counterfeit pills containing fentanyl, and high schoolers are overdosing on them, believing they are opioid painkillers or anti-anxiety medication. The state was working to send naloxone tool kits to schools, similar to a program it has used in fast food restaurants, where people were overdosing in bathrooms.



Legislative Tracking

WA State Bills related to LE's physical use of force, Harm Reduction and Behavioral Health

- HB 5675 Concerning permissible use of force.
- HB 1726 Modifying the standard for use of physical force by peace officers.
- <u>HB 1589</u> Concerning the authority of peace officers to use physical force.
- <u>HB 1737</u> Use for Court Orders or Joel's Law, improving public safety.
- <u>SB 5919</u> Concerning the standard for law enforcement authority to detain or pursue persons (Similar to HB 1737) Concerning the standard for law enforcement authority to detain or pursue persons. Will be discussed/reviewed tomorrow (2/3/2022). Discussion that WASPC is supporting and pushing forward HB 5919.
- SHB 1735 Modifying the standard for use of force by peace officers. Custody under 71.05 and 71.34 ITA Laws and makes a declaration of necessity for officers to respond. Passed on January 28th and read into the senate.
- HB 2037 Modifying the standard for use of force by peace officers.
- SB 5509 Exempting fentanyl testing equipment from the definition of drug paraphernalia..
- <u>SB 5954</u> Reducing the impacts and incidences of chronic and unsheltered homelessness.had a hearing on 2/3 result?
- <u>HB 1761</u> Allowing nurses to dispense opioid overdose reversal medication in the ED.
- SB 5524 Is dead. Was focused on imposing a sentence of life in prison for controlled substances homicide for fentanyl-laced drugs.



Next BHC Meeting

Thursday, June 9, 2022

@3pm



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Acronym Sheet

BH – Behavioral Health **MH** – Mental Health **BHC** – Behavioral Health Consortium **MOUD** – Medications for Opioid Use Disorder **CAP** – Communication Action Plan **OUD** – Opioid Use Disorder **CHA** – Community Health Assessment **PTPD** – Port Townsend Police Department **CHIP** – Community Health Improvement Plan **PWUD** – People Who Use Drugs **DCR** – Designated Crisis Responder RHNDP-P - Rural Health Network Development Program -**DUI** – Driving Under the Influence Planning (HRSA Grant Awarded 2018-2019) **ED** – Emergency Department RCORP-P - Rural Community Opioid Response Program -**EJFR** – East Jefferson Fire Rescue Planning (HRSA Grant Awarded 2019-2020) **EMS** – Emergency Medical Services RCORP-I – Rural Community Opioid Response Program – JCPH – Jefferson County Public Health Implementation (HRSA Grant Awarded 2020-2023) **JeffCo** – **Jefferson County** R.E.A.L. – Recovery, Empowerment, Advocacy, Linkage JHC – Jefferson Healthcare **SUD** – Substance Use Disorder **HFPD** – Health Facilities Planning & Development Consultants **TBH** – To Be Hired **HRSA** – Health Resources and Services Administration **VOA** – Volunteers of America – Crisis Line **ITA** – Involuntary Treatment Assessment **Vol - Voluntary** MAT – Medically Assisted Treatment **Invol** – Involuntary