

Washington State Opioid Response Annual Report

SOR II No-Cost Extension

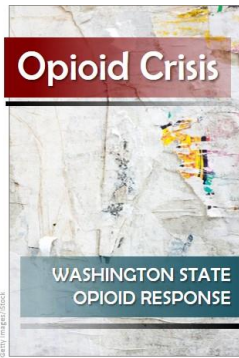
September 30, 2022 – September 29, 2023



Prepared for

The Substance Abuse
and Mental Health
Services Administration

Photo Credit: Greg Purnell



Washington State Opioid Response

No-Cost Extension Annual Performance Progress Report

September 2022 – September 2023

Report on behalf of and in collaboration with the Health Care Authority Division of Behavioral Health and Recovery; funded by the Substance Use and Mental Health Services Administration grant number TI083286.

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WASHINGTON STATE received a no-cost extension (NCE) for the second grant cycle of the State Opioid Response (SOR II) grant, awarded by the Substance Abuse and Mental Health Services Administration. The SOR II program is administered by the Health Care Authority's Division of Behavioral Health and Recovery (HCA). The WA SOR II grant implemented prevention, treatment, and recovery support services to address the opioid crisis. The SOR II grant period ended on September 29, 2022. The SOR II NCE was granted to Washington State to support improvements to emergency department opioid treatment networks, harm reduction, workforce enhancement, and targeted community and tribal prevention and education campaigns. The following is a review of selected activities of the SOR II NCE from September 30, 2022, through September 29, 2023.¹

Clients Served and Overdose Reversals

The SOR II NCE does not fund direct client services such as screening, treatment, or recovery support services; therefore, this report does not provide counts of clients receiving such services.

A total of 1,037 naloxone kits and 6,293 fentanyl test strips were purchased across the 17 SOR II NCE sites. Of those purchased, 440 naloxone kits and 2,348 fentanyl test strips were distributed. A total of 11 overdose reversals were reported. The low overdose reversal reporting was mainly due to insufficient means for tracking and reporting such occurrences.

Major Annual Activities and Accomplishments

This section summarizes major accomplishments identified by project staff managing prevention and treatment programs funded by the SOR II NCE.

Prevention

Community Prevention and Wellness Initiative (CPWI)

All evidence-based programs under the CPWI initiative were primarily completed by May 2023, with a few extending until September 2023. All coalitions attended the Coalition Leadership Institute in Olympia, WA, where they networked with other coalition coordinators and gained further knowledge about program delivery, data collection, and the utilization of the Healthy Youth Survey.

¹ For this annual NCE report, SAMHSA requested details about specific activities supported by the SOR II grant. This report is not a summary of all activities supported by the SOR II NCE.

During the period from May to September, **King County CPWI** coalitions continued their development, expanded their outreach efforts, and planned and implemented strategies for opioid and other drug use prevention. These strategies included distributing prevention materials and prescription drug lock boxes at health fairs, school open houses, and other community events. They also developed a public service announcement (PSA) for the *Starts With One* campaign, focusing on opioid prevention and prescription medicine take-back. This PSA was broadcast on Univision and Spanish digital streaming platforms. In addition, the coalitions planned a public awareness campaign for the October Prescription Drug Take Back event.

The **Enumclaw Coalition** participated in a street fair organized by the Rotary Club of Enumclaw. This event allowed the coalition to engage with the community, share information about their efforts, and encourage attendees to complete their Community Survey. The fair was attended by an estimated 28,000 people and the coalition distributed materials to attendees.

Two coalitions—**Enumclaw and Auburn**—held sessions for the Healing of the Canoe program and had 20 participants. In September, the **Auburn Coalition** initiated their Life Skills series, with 180 students commencing the program.

At an outreach event, the Southeast Seattle Coalition interacted with 50 community members. They were able to promote the Spanish language version of the *Starts With One* campaign and the October Prescription Drug Take Back event. Additionally, the Univision PSA ran from July to September generating 100,000 impressions each month. The coalition also participated in the Samali Health Board Health Fair, and distributed materials to attendees.

Representatives for the **Vashon Island Coalition** attended a middle school community event, engaging with 250 parents and students. They promoted coalition activities, the Community Survey, and various youth and parent programs.

Starts With One Public Education Campaign

The NCE activities related to the *Starts With One* campaign were completed around April 2023 (the close of the SOR mid-year), with SOR III funding being utilized for the latter half of the year. There are no major successes to report for this period.

Northwest Center for Family Support in Collaboration with University of Washington

The Northwest Center for Family Support (NCFS)—committed to enhancing access to evidence-based interventions for families impacted by opioid use disorder (OUD)—collaborated with several opioid treatment and behavioral health agencies, CPWIs, and other organizations that support parents and caregivers in recovery. NCFS engaged with 69 sites, trained 14 facilitators, and reached out to 40 families.

For Our Lives Campaign (formerly Tribal Opioid Solutions)

The Tribal media campaign, *For Our Lives*, presents authentic stories from Native individuals about fentanyl use. The campaign's objective is to educate the community, encourage resilience, and cultivate a connection with culture. Collaborations with various Tribes have been centered on enhancing the campaign's visibility and optimizing search engine results for the website.²

² The For Our Lives campaign website can be found here: www.fornativelives.org.

The campaign aims to expand its reach, while also ensuring the primary target audience remains Native. Efforts are being made to raise awareness and simplify access to resources by distributing campaign materials and fostering nurturing community connections. Regional Tribal Liaisons are responsible for supplying campaign materials to Tribes and distributing them at community events.

Treatment

Washington Access to the Emergency Recovery Bridge Program

HCA negotiated 24/7 consultation services, launched the Emergency Recovery Bridge Program website, and developed a toolkit.³ Beginning in 2024, the website will provide support for on-shift clinicians to effectively treat patients who use opioids or other substances. It will also include direct links to evidence-based clinical support, assistance with scheduling follow-up appointments, and round-the-clock consultations with trained physicians and psychiatrists. Resources and information will be available for clinicians to enhance their understanding of drug use, reduce stigma, provide evidence-based care, and effectively treat OUD. Additional funding for this work was secured through the opioid settlement in Washington State.⁴

Harm Reduction and Workforce Enhancement Program

The SOR II NCE funds allowed for flexible harm reduction supplies, services, and workforce improvement strategies. Each funded site completed an Initial Strategy Report that detailed their harm reduction plans.

Harm Reduction in Action

Klickitat Valley Health – Narcan® vending machine in the emergency department waiting room



Photo credit: Klickitat Valley Health

Approved activities included paying for staff salaries, purchasing naloxone kits and fentanyl test strips, and a Narcan® vending machine. As mentioned previously, the 17 NCE SOR II sites purchased and distributed over 1,000 naloxone kits and fentanyl test strips.

As of November 2023, Klickitat Valley Health's Opioid Treatment Network installed their second Narcan® vending machine in Klickitat County at Skyline Hospital, located in White Salmon. The machine they installed is like the one pictured on the left. The pharmacy team manages the vending machine, and the Washington State Department of Health will keep the vending machine stocked. The vending machine will provide 24/7 access to free naloxone kits. Each SOR-funded kit includes a QR code for individuals to scan and complete an anonymous survey on their usage.

³ The website will fully launch in early 2024 and be located at <https://www.scalanw.org/>. The toolkit is not publicly available yet.

⁴ More information on opioid settlement is located at <https://www.atg.wa.gov/opioid-pharmacy-manufacturer-settlements>

Barriers

The following section outlines the primary obstacles encountered during the SOR II NCE implementation of activities, the strategies used to address these issues, and any challenges that remain unresolved.

Prevention

Northwest Center for Family Support in Collaboration with University of Washington

Due to challenges related to understaffing and capacity, the National Center for Family Support (NCFS) faced difficulties enabling treatment centers and recovery support programs to offer prevention and parenting services to families. Despite these obstacles, NCFS was able to train facilitators at these organizations and host a parenting program. Securing additional funding would ensure that these organizations are able to provide programs more frequently.

Treatment

Barriers related to the federal reporting requirements for naloxone kits and fentanyl test strips prevented one treatment provider site from utilizing all their funds. As a result, this site terminated their SOR II NCE contract in May 2023. The funds were reallocated to another SOR II NCE project. Fortunately, the site that terminated their contract still offered these harm reduction supplies through other state and local funds.

Although the SOR II NCE funds were fully expended, sites consistently report they are unable to track overdose reversals among clients who received a naloxone kit funded by the SOR II NCE. Often sites receive kits through multiple funding streams, so tracking SOR specific kits can be difficult; there is not a reporting system in place to systematically track overdose reversals; and given that these kits are provided to the public, reporting their use is not a top priority. However, sites plan to evolve their programs to find creative solutions to capture overdose reversals.

Disparity Impact

The following section outlines the progress achieved in addressing the needs of diverse populations (e.g., racial/ethnic minorities, LGBTQ+, older adults) and implementation of targeted interventions to promote behavioral health equity.

Prevention

The NCFS program specifically serves parents and guardians with OUD, a population that is typically forgotten for substance use prevention efforts. Parents and guardians with OUD face increased stigma and receive less access to services and programs. Because of this, this subpopulation was specifically targeted by the SOR II NCE prevention programs.

The *For Our Lives* social media campaign focuses solely on the Native population. This community is disproportionately impacted by the opioid crisis. Activities and messaging are developed, implemented, and disseminated by the Native community. Increased efforts are being made to engage more actively with Tribal leadership. This includes keeping them informed about project progress and content, as well as offering opportunities for them to provide insights and share feedback.

Treatment

The harm reduction approach is supported by trauma-informed and culturally sensitive principles. A harm reduction informed approach removes barriers to access and customizes interventions to meet the unique needs of communities and populations. The funded sites offer language interpreter services, collaborate with mobile health units, and establish organizational and community-level health equity committees. Special populations of concern include individuals experiencing homelessness, those dealing with substance use disorder and pregnancy, and incarcerated individuals.

Fiscal Monitoring

Washington State was awarded \$2.65 million for the SOR II no-cost-extension. Through the annual reporting period, the state has spent \$2,623,236, or 99 percent of the award. SAMHSA sets a five percent limit on each of the following activities: (1) indirect/administrative and infrastructure; and (2) data collection and reporting. Washington utilized other funding to cover these expenses.

APPENDIX A | SOR II NCE Staff

Key Personnel

Name	Position Title	Email	Tasks
Lora Weed	Acting Project Director	Lora.weed@hca.wa.gov	Oversees all major activities of SOR grant.
Kris Shera	Project Coordinator	Kris.shera@hca.wa.gov	Oversees Opioid and Overdose Response Plan and Opioid Settlement Funds.
Elizabeth Speaker	Data Coordinator	Elizabeth.speaker@dshs.wa.gov	Oversees all data collection and reporting activities of the SOR grant.

ACKNOWLEDGEMENT

We want to acknowledge the work of our colleagues throughout the research and data analysis division and our partner programs for all the work they do in serving Washington's vulnerable populations.