

HMA

Safe Supply Work Group

Work Group Meeting

August 01, 2024

8:30 a.m. to 10:30 a.m.

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Photo source: <https://filtermag.org/people-who-use-drugs-safer-supply/>

Land Acknowledgement

We stand on the lands of the Chehalis, Chinook, Colville, Cowlitz, Duwamish, Hoh, Jamestown S’Klallam, Kalispel, Lower Elwha Klallam, Lummi, Makah, Muckleshoot, Nisqually, Nooksack, Port Gamble S’Klallam, Puyallup, Quileute, Quinault, Samish, Sauk-Suiattle, Shoalwater Bay, Skokomish, Snoqualmie, Spokane, Squaxin Island, Stillaguamish, Suquamish, Swinomish, Tulalip, Upper Skagit, Wanapum, and Yakama tribes.





AGENDA

- » Introductions
- » Personal Stories from the Field
- » Public Comment
- » Member Recommendations Process
- » Next Steps

HMA TEAM INTRODUCTIONS



Charles Robbins, MBA

(he/him/his)

Principal

Health Management
Associates



Erin Russell

(she/her/hers)

Principal

Health Management
Associates



Megan Beers

(she/her/hers)

Senior Consultant

Health Management
Associates



Cami Collins

(she/her/hers)

Consultant

Health Management
Associates

MEMBER INTRODUCTIONS *(NOT GENERAL PUBLIC)*

Please use chat to enter the following:

- Name
- Pronouns *(optional)*
- Affiliation



PERSONAL STORIES FROM THE FIELD

» Speaker: Prima

STORIES FROM THE FIELD

>> Speaker: Addie

QUICK POLL

- » What is your preferred location for the in-person meeting?
 - » Tacoma
 - » Olympia
 - » Seattle

REVIEW PROVIDER SURVEY

PUBLIC COMMENT

- » The workgroup meetings of the Safe Supply Work Group are not subject to the WA Open Public Meetings Act
- » Members have requested the ability for non-members to participate, but in listen mode only
- » We would like to offer 15 minutes for public comment at this time. Please be respectful and brief in your remarks.
- » Please know that future meetings may be closed at the discretion of membership
- » Members may request a link to view recordings of missed meetings. Presentation PDFs will be shared with members after the meeting.

DISCUSSION (MEMBER-FOCUSED)

GROUP AGREEMENTS

- » Designate a reporter (person with the next birthday)
- » Designate a scribe (person with the most recent past birthday)
- » Give everyone time to speak
- » No bad ideas, handle everyone's input with care
- » Give each other benefit of the doubt

NOTE ON PROCESS

- » The workgroup will develop recommendations for the State
- » Audience for recommendations is the state legislature but this may be read by a wider audience
- » HMA will draft the report
- » Review by HCA and legislative affairs/reporting office
- » Opportunity for further refinement and changes with the workgroup in person in September
- » Final report by HCA

AVOID GROUPTHINK

- » Teams that have potentially opposing points of view can more effectively counter biases
- » It is helpful to speak up if you think differently
- » Anonymous, independent contributions make sure that perceived seniority, alleged expertise, or hidden agendas don't play a role in what the group decides to do

Each group will review a topic for 15 minutes, and then rotate to review what the previous group developed.

THREE CATEGORIES/GROUPS

Injectable Opioid Agonist Treatment (iOAT)

- Clinical trial for diacetylmorphine, hydromorphone, etc.

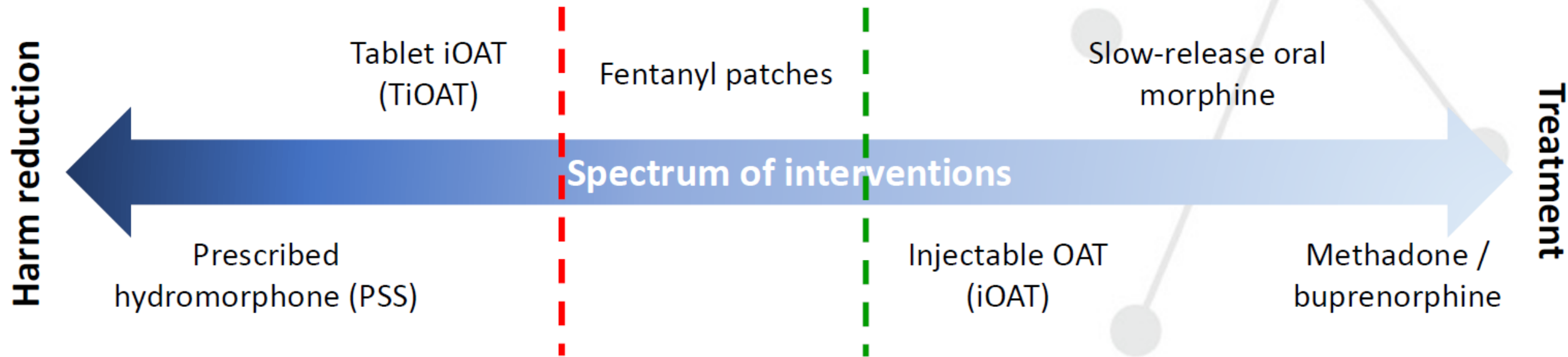
Prescribed Safe Supply

- FDA petition
- Approval or off-label use of short-acting opioids i.e. fentanyl, hydrocodone,

Criminalization Carve-out

- Allow for testing and redistribution for public health purposes
- Compassion club

Health Canada: Safer supply is defined as “providing prescribed medications as a safer alternative to the toxic illegal drug supply to people who are at high risk of overdose”.



GROUPS AND ASSIGNED TOPICS

	Round 1	Round 2	Round 3
Group 1	iOAT	PSS	Compassion Club
Group 2	PSS	Compassion Club	iOAT
Group 3	Compassion Club	iOAT	PSS

DISCUSSION QUESTIONS

1. What do we know about this safer supply model?
2. In what ways would this mode be helpful for people in Washington?
3. What are the barriers to implementing this safer supply model?
4. What are the steps that would need to be taken to address barriers?
5. If we could only do one thing to make progress on this item, what would it be?
6. Can we identify other policies that would support the implementation of this safer supply method? (harm reduction policies, social services and supports, etc.)

CONSENSUS TO DATE

1. People deserve more options for the treatment of opioid use disorder
2. Safer supply is an effective opioid overdose reduction strategy
3. We can dream big while being practical and realistic

NEXT STEPS

- » Next meeting:
 - » Thursday September 5, 2024 /
8:30am – 10:30am (PST)