# Opioid Recovery and Remediation Fund Advisory Council

March 23, 2022

1:00 - 2:30 pm

Zoom

## Agenda

1. Welcome
2. Approval of 1/5 Meeting Minutes
3. Opioid Settlement Update
4. Trust Fund Update
5. Revised Principles and Criteria for Trust Fund Expenditures
6. Support After a Death by Overdose (SADOD)
7. Update on Proposals and Initiatives to Address Racial Equity
8. Upcoming Meetings

## Opioid Settlement Update

Gillian Feiner

Senior Enforcement Counsel

Health Care & Fair Competition Bureau

Massachusetts Attorney General's Office

## Trust Fund Update

Current Revenues

* $11,650,000 (as of 3/8)
* Reminder: approx. $10 million will be utilized from the Trust Fund for the initial proposal to expand harm reduction programming at SSPs; expand low-threshold MOUD access through mobile methadone units; expand low-barrier, recovery housing options and other basic needs support; and develop multi-disciplinary community outreach teams for BSAS clients with high acuity of need.

## Revised Principles and Criteria for Trust Fund Expenditures

Based on members’ feedback during the Council’s 1/5/2022 meeting, the principles and criteria for directing Trust Fund dollars has been revised.

Revised **principles** and **criteria** for directing Trust Fund dollars:

* + An equity-based approach should be followed, taking into consideration specific demographic information, eg, age, ethnicity, to direct resources to historically underserved communities and those most impacted by the opioid crisis.
	+ Support for a county/community-level approach over a broader, regional focus.
	+ Support for utilizing rate of overdoses (fatal and non-fatal), EMS incidents, and identifying clusters of deaths associated with OUD to guide future interventions and spending.
	+ Increased focus on prevention, harm reduction, emergency shelter, community outreach, and community-based recovery services for opioid use disorder, particularly innovative approaches that might fall outside the scope of state and federal funding. *(Hauptmann)*
	+ Promotion of evidence-based standards of care, such as Medication for Opioid Use Disorder (MOUD) and treatment for other substances, where possible, that are culturally-responsive and span 60-90 days of inpatient and outpatient care and outreach services, providing opportunities for accessing housing, jobs and education. *(Rosenthal)*
	+ Support for adolescents, women, and families impacted by opioids, including orphans and grandparents who have lost loved ones due to opioids, as well as those with substance use disorder and co-occurring mental health disorders. *(Peterson)*
	+ Support for justice-involved involved individuals with history of substance use, both currently and recently incarcerated.
	+ Support for individuals with disabilities, particularly the brain-injured population.

## Revised Principles and Criteria for Trust Fund Expenditures

Similarly, feedback from Council members was incorporated into a revised list of potential services that could be supported by the Trust Fund.

Proposed **services** (new or existing) that could be supported by Trust Fund dollars:

* + Residential programs and shelters serving Black, Latinx, and historically-underserved communities.
	+ Strengthened workforce pipeline for clinicians of color working in mental health and addiction.
	+ Funding for multi-cultural, trauma-informed services associated with outreach and continued trauma-informed care accessible to those in recovery.
	+ Additional funding for syringe exchange programs.
	+ Advocate and legalize supervised consumption sites across impacted cities.
	+ Dedicate additional resources to ensure accessibility and affordability of Narcan supply for community-based organizations.
	+ Deploy a multi-pronged approach to increase access to methadone.
	+ Sober living scholarships to support those with extreme financial need.
	+ Technical assistance and training to help organizations implement effective addiction prevention and treatment programs.
	+ Support and additional services for young, homeless women with SUD.
	+ Legal support for communities of color and immigrant populations with SUD.
	+ Services for incarcerated and post-incarcerated populations.
	+ Return to work programs for those in recovery from substance use. *(Chaplin)*
	+ Support for community-based recovery centers and recovery navigators. *(Hauptmann)*

## Support After a Death by Overdose (SADOD)

Franklin Cook, MA, CPC

Co-director, SADOD

Owner, Unified Community Solutions

Glen Lord, BSBA

Co-director, SADOD

President/CEO of the Grief Toolbox

## Update on Initial Proposal for Trust Fund Dollars

| Proposals | Key Updates | Next Steps |
| --- | --- | --- |
| Expansion of Harm Reduction Services | * DPH memo released to harm reduction providers on 12/24/2021 announcing expansion of allowable safer consumption supplies that may be purchased with state funding
* In process of setting up mechanism to allow providers to purchase of fentanyl test strips through Mass Clearinghouse
 | * Finalize purchasing mechanism and provide ongoing training and technical assistance to harm reduction providers on delivery of expanded harm reduction services.
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| Increased Access to Methadone | * Released RFR on 10/29/2021
* Two applications have been received and are in review process, prioritizing equitable distribution and equitable delivery of services
* BSAS continues to outreach and promote this opportunity however vendors report an ongoing lack of workforce as a barrier to applying
 | * Continue to promote procurement through existing networks and partners and review proposals on a rolling basis
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| Expansion of Supportive Housing Programs, including low-threshold | * 12 low-threshold housing programs funded to date statewide with approximately 90 individuals housed as of 2/10/2022
* BSAS continues to work closely with the DPH Office of Healthy Equity and the Mass. Housing and Shelter Alliance (MHSA) to outreach and encourage eligible vendors to apply with an emphasis on reaching vulnerable populations.
 | * Continue to promote procurement and identify opportunities to address lack of available housing stock for programs to use.
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| Community Outreach and Engagement | * Contract executed with Commonwealth Medicine to conduct a landscape analysis of gaps in existing services exist to inform the development of programming that best meets the needs of individuals not currently being adequately served by existing system.
 | * Commonwealth Medicine is currently conducting landscape analysis to identify existing models and gaps in access.
* Implementation to begin no later than 1/1/23.
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## Upcoming Meetings

| **Date** | **Time** | **Location** |
| --- | --- | --- |
| June 28, 2022 | 1:00 - 2:30 pm | Zoom |
| September 1, 2022 | 10:00 – 11:30 am | TBD |
| October 1, 2022 – Submission of Annual Report to the Legislature |