2017 NORTH SOUND REGIONAL OPIOID SUMMIT BREAKOUT NOTES

ISLAND/SAN JUAN COUNTIES’ BREAKOUT NOTES

Ideas for next steps
- Need more Medication Assisted Treatment (MAT) prescribers
- Workforce – CDP, MH, Deputies (Island & San Juan)
- Need Housing (Island & San Juan)
- Need more flexible Tx options (Camano & San Juan)
- Island County has opioid outreach
- Take-back ordinance (Whatcom Pharmacy)
- Pharmacy Stewardship program; community environmental health (cehstrategies.com)

Education
- Grandparents raising grandchildren
- Pharmacist consult; pain is normal
- Narcan prorating [sliding scale?]
- Community education

- [?] # of supply legislation
- Chronic relapsing disease model
- Skilled TA needed to implement MAT for incarcerated persons

SKAGIT COUNTY BREAKOUT NOTES

- Stewardship Ordinance? Secure long-term funding for pharmacy take-back – no cost –
- Develop ? - someone will pay – probably Rx ? no evidence
- Law Justice Center – are we going in direction of bridging programs (w MAT)?
- Change: Open to MAT; how to ??? in new MAT policies. Compelled to do it. Ideal Options committed to warm handoff for initial (free to jail)
- Can’t go into Oxford House?
- Oxford’s current policy is house by house
- Fair housing – Can’t exclude medication; must figure out how to handle.
- Sedro and Mt Vernon Oxford’s both OK suboxone (not methadone)
- Youth use. How do we get Narcan in the hands of youth?
- Smart Center working with schools, have request for 800,000 targeting prevention in schools; targeting family. Lacking youth treatment, none for male youth in 5 regions [counties?]
- What’s the best place to go for people we pick up?
- Detox/Skagit (Friday AM)
- ER (starts suboxone on weekend); $973.00 to take someone to ER if fit for jail [?]
- New Evergreen detox/inpatient
- Facebook pays; getting info out...
- get a web page similar to Snohomish – working to gather that info
- What are total numbers for those using across Skagit? Hard to know.
- C-PIT team (co-occurring)
- Who runs Skagit Breaking? Put an ad in it....
• an Opioid Coalition [?]

1. Need for Outreach. Partnering with law, hospitals (Snohomish had to build a system) Have a start with Embedded Social Worker
2. Social Worker communicating with attorneys, assisting with a multitude of issues
3. Need Embedded Social Worker in jail; call CD providers if law enforcement finds ???

Mobile unit that could go to where they need ?????

• Jail services > MAT policy for people coming into jail already on MAT. Ideal Options would take warm hand-off.
• Would inmate coming out find housing? Sober housing may preclude MAT; Fair Housing may preclude exclusions. Have to figure out how to accommodate.
• Youth use > How to get Narcan into hands of youth, 10th grade HYS results are alarming. Skagit looking at data and EBPs or Best Practice, staff response, locking residential Tx facility.
• Best option, patrol officers are running into people using every day take people on street to ER, costs $973 to take someone to ER for fit for jail [?]
• CPIT info needs to get out into community
• LE meeting to discuss opioid outreach

1. Law enforcement and outreach (idea of CHART and GRACE)
   a. Diversion and triage
   b. Embedded SW has had positive impact re: stigma; SW communicates with public defender
   c. LE could call someone in Tx to see what options are available > Clearinghouse for information about Tx services
2. Moving forward w Stewardship Ordinance
3. MAT in the new correctional facility; policies around MAT in the jail. Need for transition planning and care coordination for people leaving jail.
4. New regional Evergreen (need for increased inpatient Tx)

• Stewardship ordinance discussion
• New Justice Center and potential for “bridge” services; “warm hand-off” to Ideal Options
• Housing options for those on MAT
• Youth outreach – Skagit Co PH, North Sound BHO, schools, UW SMART Center
• Discussed role of police departments – How they can link with services. IP/Detox – Evergreen new facility
• How do we get word out to people about available services, Facebook, website, “Skagit Breaking,” central resource hub
• Mobile unit development – intervention
• Skagit has mobile needle exchange – Phoenix Recovery

**SNOHOMISH COUNTY BREAKOUT NOTES**

Diversion program starting in old work release building (want more info)
2 buildings at Sno Co Jail
Carnegie – One stop service center (CD, MH, employment) exiting jail > going right in
Work release space – Sno Co Diversion Center

- Individual homeless, SUD, working w ESW
- Throughout county
- Waiting for supportive housing, Tx or detox
- Open to individuals working w ESWs not only OUD
- Initial plan is ESW

Housing that does not accept people on MAT

- Education important
- How do we implement that?
- Need to work w landlords to educate on MAT
- Oxford House model for MH clients
- Smaller housing programs who work w MH (YWCA)
- How many living (?) units needed currently?
- Heard 20-40k for all spectrums (?)
- Two 16-bed SUD Tx @ DJJC – no adult IP in Sno Co (130 beds – underutilized currently for youth)
- Cities w ESWs: Lynnwood/Edmonds, Marysville, Arlington (Everett)
- Detox won’t take methadone maintenance (ERC). Culture shift needs to occur.
- Prescribers lacking in Sno Co – We need providers to prescribe as we move more towards MAT
- Nurse Care Manager very integrated part of recovery
- Nurse practitioner, PA’s, etc. want to provide services & how do we advocate for change on #s of patients (no regulation on # of opioids prescribed yet limit on suboxone Rx)
- Local County Council can raise limit (suboxone) > clinic set up as a methadone clinic style
- Fewer opportunity for selling (subs) when lockbox provided
- 11/7 planning commission vote for additional OPT facility in Everett
- Incident Command Center (response to Opioid Crisis) multi-agency coordination – addressing the silos of agencies – working together
- Meth still prevalent in society – ESWs still treat meth users same way opioid users are
- Opioid stories much more prevalent; so many people affected directly
- How will current plans Snohomish County be integrated with Accountable Communities of Health (ACH)? Unsure at this point –
- Snohomish County wants to share things that are working w other counties
- Working with local jurisdictions eventually
- Inpatient Tx providers seem to be resistant to MAT clients

GAP > Family Groups?

- Family education needed in our communities
- Holding family outreach groups?
- Setting boundaries, education

Narcan for free? Needle exchange is free. Insurance covered. Medicaid covered 1X/year

Doing

- Diversion/Carnegie – homeless
- Repurpose DJJC – Adult IP
- Incident Command Model to address opiate epidemic; multi-agency coordination; collaboration (LEESW Jail)

Gaps

- Housing providers zero MAT
Prescribing providers
Inpatient providers accepting clients on MAT Tx
Community education

TRIBAL PARTNERS’ BREAKOUT NOTES

Goodwill is willing to come out to programs to facilitate job training
- Bringing community resources on-site
- Will Goodwill help to find employment? (w MAT and criminal history?)
- 2nd chance employers: need a list of employers who hire MAT individuals

Interested in learning more about discharge planning from jails
- Services are contracted out
- Is there any coordination of care back from jail to community? – Yes, the gap is community to jail. Trying to coordinate w contracted provider, locate that person.

Looking for new EHR to help with integration of primary/SUD/MH/methadone/all aspects of health.
- Working toward total care of a person.
- Information sharing
- Need to ID SUD residential that accepts methadone

How are the Tribes/employees handling stigma about methadone? Education.

Small steps adding naloxone to pharmacy.

Community Leaders
Educating community support groups
Engaging Tribal Elders/Council > results/stories
Harm reduction

How do you give them hope? > give a dream
- Housing
- Counseling
- Job training
- Medical
Developing hope . . .

WHATCOM COUNTY BREAKOUT NOTES

- Need for case management support in combination w MAT programs
- Syringe exchange program is useful for outreach
- Legal and ethical need for Tx in jail
- Medication may continue when stable
- PCP’s that don’t feel capable
  o Need to engage grant for support
- Need for coordination hub
- Points of engagement – ER, jail
  o Need to connect to extended Tx (SeaMar)
- Transportation barriers connected to school outreach
• Advertise the website for the HOPE project
• Operating outside of an Island mentality “become a conta[minator?]”
• Need for outcomes on pilots
• Community resource network
  o Meeting for coordination (Opportunity Council)
  o How can that be expanded?
• Whatcom Thinktank