

## Agenda

Together, recovery is possible action collaborative

August 16, 2022

### Together, recovery is possible

August 16, 2022; 1:00 pm to 2:30 pm

OCH Headquarters, 41 Colwell Street Port Hadlock, WA

<https://us02web.zoom.us/j/81433830398>

**UPDATED COVID Protocol:** *To best protect and honor everyone's safety, county and venue-specific safety precautions are followed at all OCH events. At this event the following safety precautions will be followed:*

- *In alignment with venue protocols, masks will be optional.*
- *OCH encourages participants to take additional safety precautions as they aid in personal comfort.*
- *Please note OCH is no longer requiring proof of vaccination for in-person attendance*

### Purpose

The purpose of the together, recovery is possible action collaborative is to create a 4-year action plan (2023-2026) with organizational, Tribal, community, and regional actions to advance the focus area including: a desired regional result, indicators, target population, and both near- and long-term actions.

At the end of 2022, the four action collaboratives will come together to present to the OCH Board of Directors on progress and plans for the upcoming year.

### Objectives

1. Review inputs and work to date
2. Prioritize actions

### Agenda

Item		Topic	Lead	Purpose	Attachments
1	1:00-1:15pm	Welcome & Introductions	Miranda	Welcome, connecting	- May 17 meeting summary - Situational overview
2	1:15-1:25pm	Grounding in process	Miranda	Grounding in journey to date, what's happening today, and next steps	
3	1:25-1:45pm	Summary	Miranda & Ayesha	What's missing from the actions	- DRAFT summary
4	1:45-2:25pm	Prioritizing actions	Miranda & Ayesha	Refine and prioritize actions considering, what's missing, what benefits from a collective regional	

				response, impact, and ease	
5	2:25-2:30pm	Next steps	Miranda		- 2022 meeting schedule

#### Next Meeting:

October 18, 2022 1:00-2:30pm, Port Gamble S’Klallam Wellness Center, Room 212, 32014 Little Boston Road, Kingston, WA 98346

**Olympic Community of Health**  
**Meeting Summary –**

<b>Date:</b> 5/17/2022	<b>Time:</b> 1:00-2:30pm	<b>Location:</b> Port Gamble S’Klallam Wellness Center, Little Boston, Kitsap County
<p><b>Attended in-person:</b> Brian Boyer, Kitsap Recovery Center; Kaela Moontree, Kitsap Public Health District; Brian Burwell, Suquamish Wellness Center; Reba Harris, Port Gamble S’Klallam Tribe; Brigitte Young, Molina; Joseph Montalbo, Suquamish Wellness Center;</p> <p><b>Attended online:</b> Luisa Sheppard, Reflections Counseling; Stormy Howell, Lower Elwha S’Klallam Tribe; Karla Cain, Answers Counseling; Holly Eiland, FirstStep Family Support Center; Tanya MacNeil, West End Outreach Services; Lauren Hasely, Olympic Personal Growth; Bergen Starke, PCHS; Bruce Davis, Kitsap County;</p> <p><b>Staff and Contractors:</b> Ayesha Chander, Drew Gilliland, Miranda Burger</p>		
<p><b>Purpose</b></p> <p>The purpose of the Together, Recovery is Possible action collaborative is to collaboratively create a 4-year action plan (2023-2026) with organizational, Tribal, community, and regional actions to advance the focus area including: a desired regional result, indicators, target population, and both near- and long-term actions.</p> <p>At the end of 2022, the four action collaboratives will come together to present to the OCH Board of Directors on progress and plans for the upcoming year.</p>		
Topic	Discussion/Outcome	Action/Next Steps
Opening & welcome	<ul style="list-style-type: none"> <li>Partners had opportunities to introduce themselves and share something they’re reading, listening to, or watching</li> <li>Briefly reviewed purpose and meeting objectives</li> </ul>	
Indicators	<ul style="list-style-type: none"> <li>OCH reviewed the process of the action collaboratives for the year</li> <li>OCH reminded group of universal result statement from previous meeting</li> <li>OCH reviewed indicator themes from previous meeting and facilitated further small group activity on indicators – What’s missing? What resonates? What would benefit from a collective regional response? OCH captured group discussion</li> </ul>	Staff will flesh out the indicators and will bring a simplified version back to the group.
Moving to action: Brainstorming	<ul style="list-style-type: none"> <li>OCH facilitated writing activity &amp; large group discussion on potential future actions and target populations in a way that: <ul style="list-style-type: none"> <li>Benefits from collective response</li> <li>Aligns with universal result</li> <li>Taps into expertise of those in the group</li> <li>Builds on prior work or is innovative</li> </ul> </li> </ul>	Staff will compile the ideas and bring something back to the group to further flesh out.

	<ul style="list-style-type: none"> <li>• OCH captured discussion</li> </ul>	
Next steps	<ul style="list-style-type: none"> <li>• OCH briefly shared the next meeting's purpose and time/date/location.</li> </ul>	Don't forget to block travel time.

**Next meeting:**

June 14 1:00-2:30pm, North Olympic Healthcare Network, 240 W Front St. Port Angeles, WA

## Reduced substance misuse and abuse

### Situational overview

Substance use hits close to home for far too many individuals and families across the region. Most of us have a friend, family member, neighbor, or coworker who has struggled with addiction. Olympic Community of Health (OCH) and our partners hold a common vision for a region of healthy people, thriving communities—which includes addressing local substance misuse and abuse. By prioritizing collaborative and innovative approaches to addressing substance use, partners and communities will be able to foster effective treatment and prevention strategies.

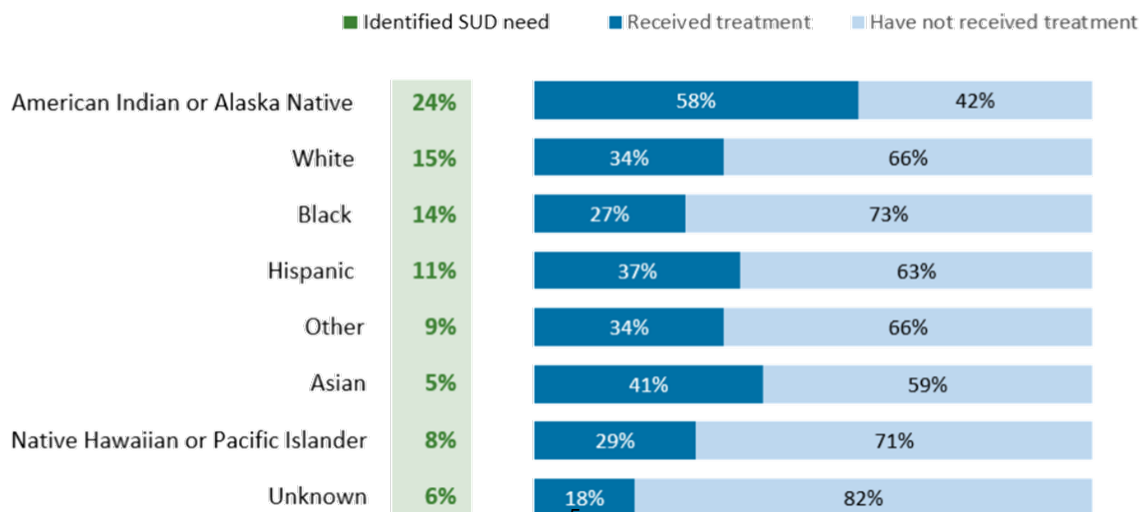
OCH aims to ultimately reduce unhealthy use of all substances, with an emphasis placed on primary prevention and coordinating region-wide standards of care. OCH can serve in a lead role, expanding on initial collaborative successes addressing the opioid epidemic to include additional substances such as alcohol and stimulants. The region will address local substance misuse and abuse by focusing on reducing stigma, ensuring broad access to appropriate and preferred evidence-based treatment options, and working to reduce substance addiction before it starts.

### Background

Youth substance use (Olympic region 10 <sup>th</sup> graders, 2018) <sup>1</sup>	Olympic Region Rate			WA
Used a painkiller to get high in the last 30 days	4%			4%
Used prescription drugs not prescribed to you in the last 30 days	7%			7%
Ever used heroin	2%			3%
Drank alcohol in the last 30 days	19%			19%
Had 5 or more drinks in the past 2 weeks	10%			10%
Used marijuana or hashish in the past 30 days	20%			18%
Smoked cigarettes in the past 30 days	8%			5%
All ages substance use (county level, 2018)	Clallam	Jefferson	Kitsap	WA
Substance use disorder treatment penetration <sup>2</sup>	47%	39%	33%	40%
Follow up after ED visit for alcohol and other drug abuse (7 days) <sup>3</sup>	30%	14%	21%	21%
Patients Prescribed High-Dose Chronic Opioid Therapy: >=50mg MED <sup>4</sup>	41%	48%	37%	34%
Current (past 30 days) alcohol use (grade 10) <sup>5</sup>	18%	31%	19%	18%

Additionally, substance use needs in the Olympic region vary by race and ethnicity.

### Identified SUD need and treatment rate among Olympic region adult Medicaid enrollees, by race/ethnicity (2019)<sup>6</sup>



### Clallam<sup>7</sup>

According to the 2019 Community Health Needs Assessment of Clallam County, heroin/other opioids and alcohol were identified as the most problematic substances abused in the community, followed by methamphetamine/other amphetamines and prescription medications. 72.2% of survey respondents perceive substance abuse as a “major problem” in the community. Key informants rated substance abuse as ranked the second highest local health concern, following mental health.

### Jefferson<sup>8</sup>

While Jefferson County’s opioid and drug overdose death rates appear to be decreasing (although small numbers may impact the validity of these rates), the rate of hospitalizations for non-fatal opioid overdose continues to increase. There is a need in Jefferson County to opportunity to develop broader community support and awareness of current syringe exchange programs as well as expansion into rural parts of the county.

### Kitsap<sup>9</sup>

In 2019, more than a half of the Kitsap Community Health Priority Survey respondents identified substance abuse (alcohol, drugs, opioids, etc.,) as one of the top three biggest health problems impacting the overall health of Kitsap County. 58% said that drug and alcohol abuse has the largest impact on health of youth (ages 11-18).

## Current efforts

Organization	County	Program/Project Description
Kitsap Public Health District	Kitsap	Kitsap Public Health District is partnering with Peninsula Community Health Services to transition the public health district's syringe exchange services to a network of fixed-location health care facilities while continuing to provide a mobile syringe exchange program in rural areas of Kitsap County.
Jefferson County Community Health Improvement Program (CHIP)	Jefferson	Jefferson County CHIP works to strengthen and expand substance use disorder and opioid use disorder <b>prevention, treatment and recovery services</b> . They conducted a needs assessment addressing the treatment and recovery needs of Jefferson County and developed a strategic, workforce, and sustainability plan.
Jamestown Family Health Clinic	Clallam	Jamestown Family Health Clinic recently completed the <b>Six Building Blocks program</b> , a process aimed at improving clinic management of patients who are on long-term opioid therapy.
Three-County Coordinated Opioid Response Project (3CCORP)	Clallam, Jefferson, Kitsap	3CCORP is a multi-sector collaborative effort made up of a Steering committee and a treatment workgroup. These groups provide guidance for identifying existing efforts and gaps to <b>reduce opioid-related morbidity and mortality</b> .
Olympic Community of Health	Clallam, Jefferson, Kitsap	OCH was awarded \$245,000 by Cambia Health Solutions and directed those funds be used to implement a <b>multiprong approach to combat behavioral health stigma in our region</b> , especially stigma related to substance use disorder. OCH will soon be embarking on a series of strategies to reduce stigma.

## Major gaps

- There are currently zero **medically assisted withdrawal management facilities** operating in Olympic region.
- There is a strong presence of **stigma of substance addiction** across the region that acts as a barrier to treatment and recovery.
- There is a need for **community awareness** of how to recognize and respond in the event of an overdose.
- There is currently no cohesive or collaborative effort addressing **alcohol use** in the Olympic region.
- While **prevention activities** are happening, there is a need for more collaboration and sharing of successes and lessons learned.

## Example activities

- Address addiction stigma (work starting in 2021) through a multi-pronged approach including training, advocacy, communications, etc.
- Coordinate improved communication across sectors through establishing shared understanding of privacy laws, guidance, and promoting best care coordination practices.
- Address the need for additional withdrawal management and stabilization services in the region.
- Support and expand homeless outreach and police navigation programs.
- Convene those working on youth engagement, school-based prevention, and positive youth development to prevent substance use before it starts.

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<sup>1</sup> Washington State Department of Health (2018). *Healthy Youth Survey: 10<sup>th</sup> Graders*.

<sup>2</sup> Healthier Washington. (2020, March 31). *Measure Explorer & Trend Dashboard, Substance Use Disorder Treatment Penetration*.

<sup>3</sup> Healthier Washington. (2020, March 31). *Measure Explorer & Trend Dashboard, Follow up after ED visit for alcohol and other drug abuse*.

<sup>4</sup> Healthier Washington. (2020, March 31). *Measure Explorer & Trend Dashboard, Patients Prescribed High-Dose Chronic Opioid Therapy*.

<sup>5</sup> Washington State Department of Health (2018). *Healthy Youth Survey: All Ages*.

<sup>6</sup> Olympic Community of Health. (2021). *Olympic Region Behavioral Health Report, 2021*. [https://ea40b83f-bff5-4a61-aa55-a97621e13e64.usrfiles.com/ugd/ea40b8\\_4348718198b743b88c9804f199a78c91.pdf](https://ea40b83f-bff5-4a61-aa55-a97621e13e64.usrfiles.com/ugd/ea40b8_4348718198b743b88c9804f199a78c91.pdf)

<sup>7</sup> PRC, Inc. (2019, September). *Community Health Needs Assessment*. Report prepared for Olympic Medical Center. <https://www.olympicmedical.org/wp-content/uploads/2019/12/2019-PRC-CHNA-Report-Clallam-County-WA.pdf>

<sup>8</sup> Behavioral Health Consortium. (2020, January 6). *RCORP-PP G25RH32956- Readiness / Needs Assessment*. [https://793b0af6-bf22-4c2c-91c8-8cc6fd2f172d.filesusr.com/ugd/2fdcd\\_6b8b745522ec47759438812438556a66.pdf](https://793b0af6-bf22-4c2c-91c8-8cc6fd2f172d.filesusr.com/ugd/2fdcd_6b8b745522ec47759438812438556a66.pdf)

<sup>9</sup> Washington State Center for Court Research. (2021, January). *KitsapGirls Court Program: Community Profile*. <https://ccvj.org/wp-content/uploads/2021/06/Kitsap-Community-Assessment.pdf>

## Olympic Community of Health

### Together, Recovery is Possible Action Collaborative

**Result statement** - A region with compassion for individuals impacted by substance use and supports individuals throughout their personal recovery journey.

### **Possible indicators** *(will be selected based on prioritized actions)* -

- Number of overdoses
- Percentage of youth with SUD
- Number and quality of collaborations between providers and community
  - Number of documented partnerships between hospitals/ERs & BH entities
- Number of people engaged in care
- Time required to access services
- Policy changes
  - Law enforcement
  - Housing
  - Employment
- Number of MAT facilities
- Number of withdrawal management beds
- Number of crisis-level beds
- Number of SUD-related housing units (transitional, permanent supportive, Oxford, etc.)
- Number of BH entities that embrace a harm reduction model

### **Possible populations of emphasis –**

The population of emphasis includes persons in recovery and their community supports (including family and providers). Specific action items may include further refinement and detail on specific populations of emphasis which may include:

- Folks in recovery
  - High risk of overdose
  - Intravenous drug users
- Family of folks in recovery
- People with disabilities
  - Traumatic brain injuries
- Co-occurring (SUD and mental health)
- Survivors of human trafficking
- Survivors of sexual assault
- People experiencing homelessness
- Incarcerated or recently incarcerated individuals
- Tribes
- LatinX community
- LGBTQ
- Families



- Parenting
- Pregnant
- PPW/CPS involved moms
- Youth

**Possible actions** *(for prioritization)* -

Addressing stigma	<ul style="list-style-type: none"> <li>● Host, sponsor, and/or promote events and training that increase community compassion around SUD and address stigma. Topics may include person first language, promoting a recovery friendly region, prevention/education in schools, provider compassion, etc.</li> <li>● Identify laws, policies, and practices that perpetuate stigma and advocate for trauma informed changes and approaches. <ul style="list-style-type: none"> <li>○ Identify housing and employment policies and practices that perpetuate stigma and prohibit those most in need from obtaining housing and employment, and advocate for changes.</li> </ul> </li> </ul>
Housing	<ul style="list-style-type: none"> <li>● Increase the availability of long-term permanent supportive housing for people throughout their recovery journey.</li> <li>● Increase the availability of transitional housing for people throughout their recovery journey.</li> <li>● Create safe spaces for people waiting for detox or inpatient treatment.</li> </ul>
Treatment & access	<ul style="list-style-type: none"> <li>● Promote harm reduction model across the full spectrum of care (primary care, mental health, SUD, hospital, community), including access to Naloxone and fentanyl testing. <ul style="list-style-type: none"> <li>○ Work with emergency departments to improve interventions for those in crisis or after an overdose.</li> </ul> </li> <li>● Increase availability of co-occurring treatment.</li> <li>● Increase the availability of local crisis and medical withdrawal management beds.</li> <li>● Increase the availability of inpatient services.</li> <li>● Increase services to meet people where they are, including embedded SUD services in mobile units and jail programs.</li> <li>● Establish inventory/resource directory for available treatment options (inpatient and outpatient)</li> <li>● Establish programs to recruit, retain, and develop the SUD workforce.</li> </ul>
Coordination	<ul style="list-style-type: none"> <li>● Establish a central call number for regional SUD services and supports.</li> <li>● Centralize and streamline intake process for treatment and resources.</li> <li>● Create regional standards for policies and messaging.</li> <li>● Establish shorter community-based assessments.</li> </ul>
Resources & support	<ul style="list-style-type: none"> <li>● Identify gaps in community resources and supports, and address top barriers collaboratively. <ul style="list-style-type: none"> <li>○ May include transportation.</li> </ul> </li> <li>● Increase availability and consistency of family-oriented supports, including parenting classes, family preservation programs, family education, family support groups.</li> <li>● Offer incentive programs to increase treatment engagement including distributing cell phones.</li> </ul>

\*Note the above possible actions do not include actions around primary prevention (preventing substance use disorder before it starts).

## **Resources needed to facilitate success as we pursue possible action items -**

- Increased funding (prevention, etc.)
- Bring in additional partners (like elected officials, first responders, SUD providers, other community leaders, schools, early childhood, lay community members, etc.)
- More lived experience at the table

## Olympic Action Collaboratives 2022 Meeting Schedule

In-person attendance is encouraged to facilitate optimal collaboration.





### COVID-19 Protocols:

To best protect and honor everyone's safety, county and venue-specific safety precautions are followed at all OCH events. At this time, OCH is also requiring proof of up-to-date COVID-19 vaccination for in-person attendance, in support of the health-serving workforce.  
*Up-to-date means fully vaccinated and have received a booster dose if eligible.*

Event specific safety protocols will be shared one week in advance. OCH encourages participants to take additional safety precautions as they aid in personal comfort.

Please contact [och@olympicch.org](mailto:och@olympicch.org) with any questions or concerns.

A **Zoom** link will be available for those more comfortable attending virtually.

Action Collaborative	Meeting Dates	Locations
<b>Together, recovery is possible (substance use disorder)</b> 	<b>Apr 19</b> , 1-2:30p <b>May 17</b> , 1-2:30p <b>Jun 14</b> , 1-2:30p <b>Aug 16</b> , 1-2:30p <b>Oct 18</b> , 1-2:30p	WSU Jefferson County Extension Classroom 97 Oak Bay Rd Port Hadlock, WA Port Gamble S'Klallam Wellness Center, Room 212, 32014 Little Boston Road, Kingston, WA North Olympic Healthcare Network, 240 W Front St, Port Angeles, WA <b>LOCATION CHANGE:</b> Olympic Community of Health 41 Colwell St, Port Hadlock, WA Port Gamble S'Klallam Wellness Center, Room 212, 32014 Little Boston Road, Kingston, WA
<b>Access to the full spectrum of care</b> 	<b>Apr 27</b> , 1-2:30p <b>May 18</b> , 1-2:30p <b>Jun 21</b> , 1-2:30p <b>Aug 17</b> , 1-2:30p <b>Oct 19</b> , 1-2:30p	WSU Jefferson County Extension Classroom 97 Oak Bay Rd Port Hadlock, WA Port Gamble S'Klallam Wellness Center, Room 212, 32014 Little Boston Road, Kingston, WA Peninsula Behavioral Health, 118 E. 8 <sup>th</sup> Street Port Angeles, WA <b>LOCATION CHANGE:</b> Olympic Community of Health 41 Colwell St, Port Hadlock, WA Port Gamble S'Klallam Wellness Center, Room 212, 32014 Little Boston Road, Kingston, WA
<b>Individual needs are met timely, easily, and compassionately</b> 	<b>May 4</b> , 1-2:30p <b>Jun 8</b> , 1-2:30p <b>Jul 13</b> , 1-2:30p <b>Aug 24</b> , 1-2:30p <b>Oct 26</b> , 1-2:30p	WSU Jefferson County Extension Classroom 97 Oak Bay Rd Port Hadlock, WA Port Gamble S'Klallam Wellness Center, Room 212, 32014 Little Boston Road, Kingston, WA North Olympic Healthcare Network, 240 W Front St, Port Angeles, WA <b>LOCATION CHANGE:</b> Olympic Community of Health 41 Colwell St, Port Hadlock, WA Port Gamble S'Klallam Wellness Center, Room 212, 32014 Little Boston Road, Kingston, WA
<b>Everyone housed</b> 	<b>Apr-May</b> <b>Jun 29</b> , 1-2:30p <b>Aug 30</b> , 1-2:30p <b>Nov 1</b> , 1-2:30p	Members will be asked to schedule 1:1 meetings with OCH North Olympic Healthcare Network, 240 W Front St, Port Angeles, WA <b>LOCATION CHANGE:</b> Olympic Community of Health 41 Colwell St, Port Hadlock, WA Port Gamble S'Klallam Wellness Center, Room 212, 32014 Little Boston Road, Kingston, WA 98346
<b>Value-based purchasing (VBP) action group</b>	<b>Mar 8</b> , 2:30-4p <b>May 3</b> , 2:30-4p <b>Jul 12</b> , 2:30-4p <b>Sept 13</b> , 2:30-4p	All VBP meetings will take place at OCH headquarters: 41 Colwell St, Port Hadlock, WA
<b>All collaboratives</b>	<b>Dec 12</b> , 1-3p	Updates to OCH Board of Directors, Red Cedar Hall, 1033 Old Blyn Hwy, Sequim