



COUNTY OF SAN DIEGO

AGENDA ITEM

NORA VARGAS First District

JOEL ANDERSON Second District

TERRA LAWSON-REMER Third District

> VACANT Fourth District

JIM DESMOND Fifth District

DATE: October 10, 2023

13

TO: Board of Supervisors

SUBJECT

RECEIVE AND APPROVE THE UPDATED OPIOID SETTLEMENT FRAMEWORK; DIRECT REPORT BACK ON SIGNIFICANT UPDATES TO THE OPIOID SETTLEMENT FRAMEWORK; AND AUTHORIZE ONE STAFF YEAR FOR TOXICOLOGY SERVICES TO EXPAND SURVEILLANCE OF EMERGING DRUG TRENDS (DISTRICTS: ALL)

OVERVIEW

In response to the regional overdose crisis, the San Diego County Board of Supervisors (Board) has approved the following actions including, but not limited to:

- Adoption of the County of San Diego's (County) Comprehensive Harm Reduction Strategy (June 8, 2021 (4);
- Approval of a media campaign to prevent fentanyl overdoses in youth (October 19, 2021 (2):
- Declaring Illicit Fentanyl a Public Health Crisis (June 28, 2022 (22);
- Enhancing Fentanyl Education and Strengthening Harm Reduction Efforts for Young People (October 11, 2022 (11);
- Adoption of the San Diego County Opioid Settlement Framework (October 25, 2022 (20); and
- Update on Opioid Settlement Framework Implementation and Harm Reduction Media Campaigns (May 23, 2023 (26).

Pursuant to Board direction on May 23, 2023 (26), today's action authorizes approval of the updated Opioid Settlement Framework (Framework) priorities that are in alignment with allowable spending uses defined in the Opioid Settlement Agreements guidelines set forth by the California Department of Health Care Services and directs the Chief Administrative Officer to report back on significant updates to the Framework. This action also requests authorization for the Public Safety Group, Medical Examiner's Office to add one staff year for toxicology services to expand surveillance of emerging drug trends.

This item supports the County's vision of a just, sustainable, and resilient future for all, specifically those communities and populations in San Diego County which historically have been left behind, as well as the ongoing commitment to the regional *Live Well San Diego* vision of healthy, safe,

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and thriving communities. This will be accomplished by investing in access for care, support, outreach, and education for those impacted by the opioid crisis.

RECOMMENDATION(S) CHIEF ADMINISTRATIVE OFFICER

- 1. Receive and approve the updated Opioid Settlement Framework, which is aligned with Opioid Settlement Agreements and new State guidance by approving Option A or Option B.
 - A. Authorize the spending plan, as outlined in Attachment A, inclusive of \$0.5 million of one-time Opioid Settlement Funds for a focused pilot program to distribute drug disposal bags to individuals prescribed opioids after a medical procedure (reduced from an approved amount of \$8.0 million per prior San Diego County Board of Supervisors action on October 25, 2022 (20), supporting ongoing investments through Fiscal Year 2030-31 with revenue from finalized and anticipated near-term settlements, or,
 - B. Authorize the same spending plan referenced in Option A but also include a one-time investment of \$7.5 million to support funding for the East County Recovery Bridge Center, part of Capital Project 1024603, replacing the \$7.5 million unspent on the initially recommended drug disposal pilot program. Under this option ongoing investments would be supported through Fiscal Year 2028-29, instead of Fiscal Year 2030-31, with revenue from finalized and anticipated near-term settlements.
- 2. Direct the Chief Administrative Officer to report back on significant updates to the Opioid Settlement Framework that will include adjustments based on ongoing review of existing programs and according to any new guidelines for Opioid Settlement Funds.
- 3. Approve and authorize the Public Safety Group, Medical Examiner's Office to add one staff year for toxicology services to expand surveillance of emerging drug trends and direct the Department of Human Resources to classify the positions at the appropriate level.

EQUITY IMPACT STATEMENT

San Diego County residents may experience the world differently and have unique circumstances and opportunities that can impact health, lifestyle behaviors, and overall well-being, leading to differences in health outcomes, or health inequities. These health disparities exist among communities, including when it comes to overdose and substance use. Although no single age group, race/ethnicity, gender, or socioeconomic status is immune to the current overdose crisis, data from the County of San Diego (County) Medical Examiner Office and the San Diego Association of Governments reveal trends over time and disproportionate impacts among varying groups in San Diego County. From 2017 to 2021, the rate of opioid overdose deaths increased by 209%, with the fentanyl overdose death rate increasing by 885% in that same period. However, opioid overdose death rates were highest among those between the ages of 18-45 years old, as well as Native American/Alaska Native and Black/African American residents compared to all other groups. In fact, these groups experienced opioid overdose death rates that were two to three times

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as high as the overall county rate. Based on this, efforts are underway in collaboration with regional stakeholders to learn the unique needs of San Diego County's communities.

Although overdose deaths reached a high in 2021, preliminary data show a 10% decrease in overdose deaths in the first two quarters of 2022 compared to 2021, which may indicate a plateau and demonstrates the critical need to continue the work laid out by the Opioid Settlement Framework (Framework). Today's update builds on the San Diego County Board of Supervisors' prior actions, including the adoption of the Framework, to specifically address the opioid and illicit fentanyl public health crisis. Through the implementation and performance monitoring of programs and services driven by the Framework's key components, as well as the current and future responsive behavioral health public messaging, outreach, and education efforts, the County strives to reduce harm to San Diego County residents impacted by this crisis.

SUSTAINABILITY IMPACT STATEMENT

Today's actions support the County of San Diego's (County) Sustainability Goal #2 to provide just and equitable access to County services with investments focused on chronically underserved communities. The implementation of the Opioid Settlement Framework ensures that programs and services are informed by the community and are available countywide to address the opioid and overdose crisis. This item also supports Sustainability Goal #4 to protect the health and well-being of everyone in the San Diego County region, through broad public messaging campaigns designed to enhancing community awareness of the harms associated with opioid misuse, overdose prevention and the availability of community resources.

FISCAL IMPACT

Opioid Settlement Fund Distribution Assumptions (Attachment B)

The distributions for the two ongoing settlements finalized to date (Janssen and Distributor) are estimated at \$6.1 million combined annually through Fiscal Year (FY) 2029-30 when the Janssen settlement payments are scheduled to end. Additionally, it is the County of San Diego's (County) understanding that settlements for TEVA, Allergan, Walmart, Walgreens, and CVS are being finalized, and it is expected the first annual payments will be received in the last quarter of 2023 or first quarter of 2024. Final County amounts and timing are not yet known. Assumptions were made based on the size of the nationwide settlement amounts to calculate estimates of \$3.2 million per year for the County for planning purposes. Spending would be rightsized to manage to resources available, as necessary.

Recommendation #1 Recommendation #1 Option B, using the revenue assumptions for Janssen and Distributor, as well as the planning estimates for TEVA, Allergan, Walmart, Walgreens, and CVS. Amounts for various other settlements in the pipeline were not included in Attachment B but will be monitored and costs adjusted accordingly as needed to meet available revenues and priorities, with a recognition that these are one-time funds over a finite number of years. Under both options of Recommendation #1, unspent funds from FY 2022-23 are being used to help support ongoing operations in the out years. However, Option B reprograms some of these unspent

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funds to help cover a gap in funding for the East County Recovery Bridge Center, shortening the period of funding for ongoing operational costs. Under either option, to promote sustainability of programs implemented where possible, County Health and Human Services Agency (HHSA) and County Public Safety Group (PSG) will explore additional Medi-Cal billing opportunities and grants and federal and State allocations, should they become available.

Recommendation #1- Option A

Funds for this request are partially included in the FY 2023-25 Operational Plan in HHSA and San Diego County Fire, Emergency Medical Services. The FY 2023-25 Operational Plan includes a total of \$7.1 million for the Opioid Settlement Framework (Framework), including \$6.8 million in the HHSA and \$0.3 million San Diego County Fire, Emergency Medical Services, respectively.

If approved, this request will result in estimated additional FY 2023-24 costs and revenues estimated at \$1.57 million, inclusive of \$0.97 million in the HHSA, \$0.5 million within the Sheriff's Department for evidence-based treatment and recovery support services for individuals within or transitioning out of the County's correctional facilities, and \$0.1 million within the Medical Examiner's Office for toxicology services to expand surveillance of emerging drug trends.

Total costs and revenues associated with implementation of the Framework as presented today in Attachment A are estimated to be \$8.67 million in FY 2023-24 and \$10.65 million in FY 2024-25. The funding source is Opioid Settlement Funds. HHSA will use existing appropriations and the PSG will return to the San Diego County Board of Supervisors (Board) to establish appropriations by the third quarter budget adjustment. Funds for subsequent years will be incorporated into future operational plans. There will be no change in net General Fund cost. There will be an increase of 1.0 staff year in the Medical Examiner.

Under Recommendation #1 Option A, it is anticipated that ongoing operational costs would be sustained through FY 2030-31.

Recommendation #1- Option B

This fiscal impact for Recommendation #1 Option B is the same as Recommendation #1 Option A, with one addition. Recommendation #1 Option B includes all of the same operational costs listed in Attachment A, but also includes an additional up-front investment of \$7.5 million to support the East County Recovery Bridge Center (RBC), part of the East County Crisis Stabilization Unit (CSU) and RBC Capital Project. The CSU/RBC project previously had grant funding added as part of the FY 2023-24 Operational Plan, however HHSA's initial grant application was not awarded. Under this option, staff would return to the Board as part of the quarterly status letter update to exchange \$7.5 million of grant funding with Opioid Settlement Funds for the RBC portion. HHSA is exploring Mental Health Services Act funds for the CSU portion and would use existing appropriations under this option. If this option is adopted, HHSA will still pursue future infrastructure grants should they become available. If any future grant funding were to be awarded, staff would return to the Board to suggest an alternative use for the Opioid Settlement Funds, including potential infrastructure projects.

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The initial Framework approved by the Board on October 25, 2022 (20), included \$8.0 million to distribute drug disposal bags to all households across San Diego County. In Attachment A this amount has been reduced to \$0.5 million to focus on individuals prescribed opioids after a medical or dental procedure in hospitals in the Central and East service regions, where increased rates of overdose mortality have been documented. Recommendation #1 Option B reprograms the \$7.5 million balance to support the East County Recovery Bridge capital project.

Under Recommendation #1 Option B, it is anticipated that ongoing operational costs for services as outlined in Attachment A would be sustained through FY 2028-29, meaning the operational gap would start two years earlier in Recommendation #1 Option B.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

At their regular meeting on August 3, 2023, the Behavioral Health Advisory Board voted to approve the recommendations.

BACKGROUND

In response to the regional overdose crisis, the San Diego County Board of Supervisors (Board) has approved the following actions including, but not limited to:

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- Declaring Illicit Fentanyl a Public Health Crisis (June 28, 2022 (22);
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- Adoption of the San Diego County Opioid Settlement Framework (October 25, 2022 (20); and
- Update on Opioid Settlement Framework Implementation and Harm Reduction Media Campaigns (May 23, 2023 (26).

The October 25, 2022 (20) and May 23, 2023 (26) actions noted above detail initial implementation of the Opioid Settlement Framework (Framework) which leverages unprecedented awards resulting from lawsuits against particular opioid pharmaceutical companies, manufacturers, and distributors. These awards, in addition to other County funding streams, collectively advance the broad range of work the County has taken toward overdose prevention and harm reduction.

Today's action authorizes approval of the updated Framework (Attachment A) to align with guidelines set forth by the California Department of Health Care Services (DHCS), which requires

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no less than 50% of budgeted activities allocated to High Impact Abatement Areas (specific priorities as defined by DHCS) to align with core strategies and approved uses of opioid funds. A review of the Framework, approved on October 25, 2022 (20), was conducted to prioritize evidenced-based activities that meet State guidelines, support, expand, or enhance current County opioid abatement efforts, and are not otherwise supported by other funds. The review provided an opportunity to restructure the Framework in accordance with the State's defined core strategies, highlight activities included in the current budget plan and prioritize new activities. Today's action also includes direction to report back to the Board on significant updates for the Framework.

Healthcare Integration

The Framework includes allocated funding for healthcare integration initiatives that aim to improve access to care, minimize stigma, lower costs, and improve overall health outcomes for people who use drugs (PWUD). These efforts include the development of the San Diego Relay program, the County Emergency Medical Services (EMS) buprenorphine pilot program, and an Overdose Surveillance and Response Unit.

San Diego Relay Program

Design and implementation of San Diego Relay, a 24/7 nonfatal overdose response service delivered by peers in select emergency departments (EDs) in San Diego County, is currently underway. Peer and support services are crucial in helping people enter and stay in recovery. For this reason, San Diego Relay services are designed to leverage the lived experience of peers who can both support program participants and, through their unique perspective, inform and improve service delivery in meaningful ways. Allocated funding will support the execution of contracted services that will aim to increase linkages to care and reduce subsequent overdoses for San Diego Relay participants. Services will focus on the delivery of peer-led interventions that foster engagement, address immediate needs, provide overdose education and naloxone access, and support linkages to care and other vital services. Funding for contracted services will support operational and administrative costs necessary to offer the 24/7 service including funds to support staffing, supervision, and sub-contracts with participating emergency departments. Additionally, the budget plan includes funds allocated to support expansion of San Diego Relay to support warm hand offs initiated by EMS' buprenorphine pilot program described below. A request for proposals (RFP) is slated for release this fiscal year, with an anticipated launch of services by early winter 2024.

EMS Buprenorphine Pilot Program

As part of the County's efforts to offer opportunities for increased access, engagement, and retention among those seeking medication assisted treatment (MAT) services, EMS has launched a pilot program authorizing paramedics to utilize buprenorphine, a treatment used in MAT, in the prehospital setting to treat patients in opioid withdrawal. Planning and implementation activities have included the addition and recruitment of 2.0 full-time equivalent (FTE) County staff to focus on opioid mitigation, which are included in the Fiscal Year (FY) 2023-25 Operational Plan and

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funded by Opioid Settlement Funds. In addition, efforts are underway to train staff, develop protocols, and establish warm hand offs for buprenorphine pilot participants to MAT services.

Overdose Surveillance and Response Program

In an effort to improve detection of overdose outbreaks and facilitate more effective responses, the County has been working to establish a cross-departmental County Overdose Surveillance and Response (OSAR) program, within the County Health and Human Services Agency, Behavioral Health Services (BHS) and Public Health Services (PHS) departments. This program will ensure the County can effectively implement and manage cross-sector, surveillance, and timely response to overdoses in San Diego County. The program will be responsible for the monitoring of trends, identification of possible clusters, investigation of individual or cluster events, and community response, including public messaging and education. OSAR activities include the recruitment of 14.0 County FTEs funded by Opioid Settlement Funds and included in the FY 2023-25 Operational Plan.

Additionally, the Framework has been updated to include the expansion of surveillance and data collection of emerging drug trends through a collaborative partnership between PHS and the County Public Safety Group (PSG). Specifically, Opioid Settlement Funds funding is proposed for 1.0 County FTE within the San Diego Medical Examiner's Office focused on drug testing of both seized substances and decedents of suspected overdose cases. Testing will be conducted on unknown substances, pills, syringes, and associated paraphernalia from decedents. It is expected that information gathered from testing of unknown substances by the San Diego Medical Examiner's Office, combined with drug seizure testing data currently housed and maintained by the Crime Lab, will provide insights into the local seized drug data. It is also anticipated that emerging toxic drug trends can originate with overdose victims first before routinely being observed in forensic testing from crimes including drug possession, sales, distribution and trafficking and drug facilitated crimes, such as sexual assault and driving under the influence. Tracking substances and associated paraphernalia will provide information on emerging drug use evolutions.

Today's action requests authorization for the PSG Medical Examiner's Office to add one staff year for toxicology services to expand surveillance of emerging drug trends.

Treatment for Incarcerated Individuals

Substance Use Disorder (SUD), including Opioid Use Disorder (OUD), are notably overrepresented in incarcerated populations. According to a study conducted by Oregon Health and Science University and the Oregon Department of Corrections, nearly two-thirds of all adults in U.S. custody have a documented SUD. Additionally, people with OUD recently released from custody are 40 times more likely to die from an overdose compared to the general population determined by a study conducted in North Carolina analyzing overdose mortality rates among former inmates from 2000-2015. Incarcerated individuals are at an increased risk for fatal and nonfatal overdose due to a variety of factors including decreased tolerance, lack of education

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regarding overdose risk, and limited connectivity to vital services and supports such as harm reduction and treatment services.

Providing evidenced-based treatment for incarcerated individuals, including offering MAT while in custody, has been documented to result in increased treatment engagement and retention post-release and a decreased risk for overdose. According to the California Department of Corrections and Rehabilitation and California Correctional Health Care Services, the rate of overdose declined 58% among the California prison population from 2019-2020 after implementation of the Integrated Substance Use Disorder Treatment (ISUDT) Program. As enrollment in the MAT component of the ISUDT grew, overdose deaths and hospitalizations decreased. There are a total of 129 patients with Clinical Opiate Withdrawal Symptoms /Clinical Institute of Withdrawal Assessment. Total enrollment in MAT is 414 with another 170 patients on the medication but not in the full program. The implementation of the updated Framework includes allocation of revenue to Sheriff of \$0.5 million for evidence-based treatment and recovery support services for individuals within or transitioning out of the County's correctional facilities.

Harm Reduction and Prevention

Harm reduction services and prevention strategies are critical components of the Framework and are necessary tools for addressing the opioid crisis. Harm reduction interventions that meet people where they are and directly serve PWUD to prevent overdoses and disease transmission, and to improve the well-being of those served are included in the Framework. Additionally, prevention strategies, including public messaging campaign activities that focus on engaging and empowering individuals to choose healthy behaviors, and primary prevention efforts aimed at preventing opioid misuse among youth through resiliency and refusal skills-building, are supported by the Framework.

Primary Prevention

Primary prevention efforts are designed to educate youth on the harms of substance use and to support resilience and awareness before they start using or experimenting with substances. Investing in evidenced-based primary prevention programs that have been studied and are proven to be effective, are key to helping reduce risk factors for drug use among youth. For example, the Life Skills School-Based Substance Use Prevention program is a classroom-based substance use prevention program that supports development of skills to reduce the prevalence of substance use among youth using an evidence-based curriculum, Project Alert.

Project Alert, validated for use in seventh and eighth grades, is currently being adapted to extend to sixth grade, and focuses on building resiliency and refusal skills among participants. The curriculum includes eleven core sessions and three booster sessions, which are incorporated in either science, health, or physical education classes (depending on school determination). The program has been implemented through a collaboration with designated school sites throughout San Diego County through a contract with San Diego County Office of Education. Currently, the program is partially funded by the Substance Abuse Prevention & Treatment Block Grant

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American Rescue Plan Act funding through June 30, 2025. Included in the Framework is funding to support extending the program by funding services for an additional two and a half years through June 30, 2027, to allow for full contract implementation and evaluation.

Public Health Messaging

Public health messaging that promotes awareness and access to information about opioid misuse and treatment resources and is responsive to the community is vital to address stigma and empower individuals impacted by substance use to seek and engage in services and practice healthy behaviors. The Framework supports outreach and education efforts through community informed public messaging and materials aimed at enhancing community awareness of the harms associated with opioid misuse, overdose prevention, and the availability of community resources. These efforts will build and expand upon the County's youth illicit fentanyl and harm reduction public messaging campaigns with the aim to further enhance and reinforce prevention efforts. Public health messaging activities include the recruitment of 4.0 County FTEs included in the FY 2023-25 Operational Plan and funded by Opioid Settlement Funds.

In addition, activities supported by Opioid Settlement Funds aimed at engaging parents, family members, schools, community organizations and businesses through ongoing public health messaging campaigns and targeted community naloxone distribution events continue. These efforts offer opportunities to further enhance community members' understanding of substance use and available treatment resources. Furthermore, public messaging and education efforts reduce stigma and draw support for behavioral health interventions which can normalize conversations about behavioral health needs, empower individuals to be advocates and allies, and help drive change.

Expanding Naloxone Access and Supply

Naloxone is a life-saving medication that reverses the effects of an opioid overdose. The Framework reflects the County's priority to increase the availability and distribution of naloxone to community members priorities. Through the County's Naloxone Distribution Program, efforts to saturate the community with naloxone have been tremendously successful. As of July 6, 2023, over 60,000 naloxone kits have been allocated to County's naloxone distribution network partners, of which an estimated 35,000 have been distributed to community members, over 2,000 of which were accessed through 12 naloxone vending machines that have been placed across the county. Although the County receives free naloxone from the State's naloxone distribution project, expanded efforts require additional resources to support these on-going overdose prevention activities. For this reason, the budget plan includes an annual allocation for the purchase of naloxone. It is anticipated that this dedicated funding will support the distribution of over 21,000 additional naloxone kits a year to community members.

The Framework also includes funding to support expanding naloxone access and distribution efforts. Specifically, this funding supports activities that will enhance access to community naloxone education and training with special attention to increasing access among communities of

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color and vulnerable populations. These activities will include expanding naloxone access points, supporting targeted naloxone education and training events and the implementation of a naloxone response team, a dedicated naloxone distribution deployment team available to respond to OSAR identified overdose clusters or spikes.

Drug Checking Services

Design and implementation of drug checking services in San Diego County are underway. Drug checking services are a harm reduction public health intervention that informs individuals on the chemical composition of their drug samples and pairs peer led interventions to support more informed decision-making and access to linkage to care services. Drug checking services can serve as an immediate intervention tool aimed at changing an individual's drug use and can help PWUD to understand their overdose risk. Drug checking data can also be used to help determine trends in the unregulated drug supply offering opportunities to help inform the development and implementation of effective community responses.

Funding for contracted services will support operational and administrative costs necessary to provide services including funds to support staffing, supervision, training, and drug checking technology. Additionally, the Framework includes funds allocated to support expansion of the drug checking services model to increase the program's capacity to reach targeted high-risk populations, particularly those from rural communities and communities of color. An RFP is slated for release in this fiscal year, with an anticipated launch of services by early spring 2024.

Harm Reduction Services

Opioid Settlement Funds will be utilized for 4.0 County FTEs to staff the County Harm Reduction Services program, which were included in the FY 2023-25 Operational Plan. These four staff will be responsible for a range of duties that will support the direct delivery of services to program participants. Additionally, with the support of Opioid Settlement Funding, an updated community assessment will be conducted to determine and address needs between current conditions and desired conditions as they relate to program services. Currently, program services are scheduled to launch by the end of 2023.

Prescription Medication Disposal Bags

As reported by the National Center for Drug Abuse Statistics, 52 million or 18.4% of Americans over the age of 12 have misused prescription drugs at least once in their lifetime. The prolonged presence of prescriptions and medications in homes can lead to misuse, increasing the chances of addiction and overdose. Prescription medication disposal bags are specifically designed to help people safely dispose of unused prescription drugs making them unavailable for misuse and safe to dispose in the trash. Efforts to provide these disposal bags offer an opportunity to increase awareness, reduce the risk of unintended overdose, and prevent misuse.

The original Framework activity included \$8 million to support the delivery of drug disposal bags to all households across San Diego County. In order to implement additional harm reduction and

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prevention strategies, this update to the Framework includes one year of funding at \$0.5 million to pilot medication disposal bag distribution. The pilot will be focused on individuals prescribed opioids after a medical or dental procedure in the Central and East service regions, where increased rates of overdose mortality have been documented. Preliminary analysis of data from the Controlled Substance and Utilization Data system, California's prescription drug monitoring program, estimates that about 41,326 opioid prescriptions related to surgical or dental procedures were provided in 2022 within the identified regions. Distribution efforts will be informed by these estimates and activities to engage hospitals, dental providers, and relevant pharmacies in the identified regions. Outreach and education will be provided in multiple languages and in a culturally respectful manner. Outcomes of the pilot will be shared in future Framework updates.

Recommendation #1 Option A versus Recommendation #1 Option B

The activities outlined in the sections above, and as described in Attachment A, would continue under both options of Recommendation #1. The difference between the options is that Recommendation #1 Option B also includes an additional up-front investment of \$7.5 million in one-time costs in the HHSA supporting the East County Recovery Bridge Center (RBC). This amount is equal to the balance of \$7.5 million from the amount initially budgeted for the larger drug disposal bag program. Under Recommendation #1 Option B, it is anticipated that ongoing operational costs would be sustained through FY 2028-29 as compared to FY 2030-31 under Recommendation #1 Option A. Using current revenue estimates, programs may need to be scaled back earlier under this option.

The RBC is part of the East County Crisis Stabilization Unit (CSU) and East County RBC Capital Project. The CSU/RBC project previously had grant funding added as part of the FY 2023-24 Operational Plan, however HHSA's initial grant application was not awarded. Under this option, staff would return to the Board to exchange \$7.5 million of grant funding with Opioid Settlement Funds for the East County RBC portion. HHSA is exploring Mental Health Services Act funds for the CSU portion. The guidance around Opioid Settlement Funds allows for infrastructure investments for new or expanded substance use disorder treatment infrastructure. The East County RBC presents an opportunity to leverage Opioid Settlement Funds to fill a gap in funding that exists so that the East County RBC project can move forward. The East County RBC will allow adults who are publicly intoxicated to be dropped off by health, safety, and law enforcement agencies within a supervised within a non-medical environment that provides short-term services for less than 24 hours. Individuals are screened for SUD, including OUD, or mental health conditions, offered a place to stabilize from substance use, receive counseling services, and are provided resources and connections to ongoing behavioral health services. Outpatient substance use disorder services will also be available to ensure continuity of care.

Under this option, HHSA would still pursue future infrastructure grant opportunities as they become available. If any future grant funding were to be awarded, or if the State did not allow application of the Opioid Settlement Funds for the East County RBC, staff would return to the

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Board to suggest an alternative use for the Opioid Settlement Funds, including potential infrastructure projects.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed actions support the County of San Diego's 2023-2028 Strategic Plan Initiatives of Equity (Health) and Community (Quality of Life and Partnership) by expanding programs which support, outreach, and education for all impacted by the opioid crisis.

Respectfully submitted,

Zin C. Mw anall

HELEN N. ROBBINS-MEYER Interim Chief Administrative Officer

ATTACHMENT(S)

Attachment A – Opioid Settlement Framework Overview of Budgeted Activities

Attachment B – Opioid Settlement Funds Cash Flow