

OREGON HEALTH AUTHORITY OVERDOSE RESPONSE TEAM LISTENING SESSION SUMMARY

Version 1.0 February 2024



Dear Colleague,

The Oregon Health Authority is grateful for your continuing efforts and support as we respond to the opiate/polysubstance and overdose crisis and address its disproportionate impacts on Tribal communities, communities of color and communities experiencing low income across the state.

Over the past 90 days, OHA's Overdose Response Team (ORT) has undertaken <u>Goals for Immediate Action</u>, including enhancing naloxone distribution, public communications and prevention messaging and increasing harm reduction services. OHA has also completed a first round of ongoing statewide listening sessions where providers, partners and members of impacted communities shared insights about the crisis and provided recommendations on how OHA can improve its response.

Listening session participants' invaluable feedback, summarized in the following report, is already being used by OHA to enhance current and future efforts. Hearing requests to increase the availability of naloxone based on evolving community needs, the Save Lives Oregon Harm Reduction Clearinghouse is providing a \$1 Million "Focused Naloxone Distribution Effort" for participating organizations that have spent their supply budget. Following recommendations to share program successes, OHA and Measure 110 Behavioral Health Resource Networks will continue to promote examples of new and expanded Substance Use Disorder (SUD) treatment and withdrawal management services throughout Oregon.

Feedback from the listening sessions is also informing OHA's longer-term strategies. Streamlining the intake process and eliminating administrative burden for partners were consistent listening session themes and will shape future priorities. Feedback on the importance of peer support services, particularly in connection to care coordination of Medication Assisted Treatment (MAT), as well as primary prevention, will be focus areas for overdose response efforts. OHA is scheduling additional community-focused listening sessions in the Spring, and the feedback from these sessions will further refine our work to ensure our statewide approach is meaningfully focused on eliminating health inequities that are unfair, unjust and avoidable.



We want to close by reaffirming our gratitude to listening session participants for your commitment and critical insights, and we look forward to continued collaboration to support the health of all Oregonians.

Respectfully,

Ebony Clarke, Cara Biddlecom, and David Baden

I. Background

Low cost and widespread availability of illicit fentanyl and other substances, layered on centuries of inequitable access to housing, health care, employment and education due to systemic racism and oppression has led Oregon to the current polysubstance and overdose crisis with disproportionate impacts on Tribal communities, communities of color, and people experiencing low income. The Oregon Health Authority (OHA) has responded with the Overdose Response Team (ORT) Goals for Immediate Action. These four goals include: 1) engaging communities for action, 2) adjusting naloxone distribution, 3) enhancing public awareness and education, and 4) increasing outreach, harm reduction and access to treatment.

For ORT Goal 1, in November and December 2023, OHA held statewide listening sessions to speak directly with behavioral health (BH) service providers and impacted community members. Following each listening session, a summary of comments and related next steps was compiled and shared with participants for feedback. These summaries were then analyzed to identify recurring issues raised by participants and related opportunities to improve OHA's overdose response. Additionally, feedback from a public health partner listening session is included in this summary report.

Eight key tactics emerged as opportunities for OHA to enhance its overdose response:

- A. Expand Naloxone Provider Network and Optimize Allocation Based on Evolving Need
- B. Communicate Substance Use Disorder (SUD) Program Success to Promote Awareness and Increase Transparency



- C. Develop Culturally and Linguistically Responsive Materials Focused on, Education, Prevention and Resource Promotion
- D. Support Behavioral Health (BH) Workforce Retention Through Streamlining Oversight and Targeted Investments
- E. Removing SUD-Specific Barriers to Housing and Prioritizing SUD-Focused Development
- F. Expand Peer Support and Eliminate Clinical or Billing Barriers to Service Integration
- G. Improve Access/Continuity of SUD Services During Incarceration and Reentry
- H. Expand and Enhance Intentional Collaboration Across the Care Delivery System

II. Key Tactics

Each key tactic summarizes a recurring issue raised by participants and specific opportunities to enhance OHA's overdose response SUD service provision.

A. Expand Naloxone Provider Network and Optimize Allocation Based on Evolving Need

Naloxone remains a vital tool for preventing opioid overdose deaths.

Opportunities to improve naloxone provision through the Save Lives Oregon
Harm Reduction Clearinghouse include expanding eligibility thresholds for Local
Public Health Authorities (LPHAs) to receive naloxone, reducing the financial
burden of procuring naloxone, and optimizing naloxone allocation based on
changing needs.

B. Communicate SUD Program Success to Promote Awareness and Increase Transparency

Clearly communicating program accomplishments is critical to program success. Opportunities to improve communication include sharing success stories about effective programming, Behavioral Health Resource Network (BHRN) services impacts, managing expectations around M110, and increasing awareness around the specific benefits of harm reduction.



C. Develop Culturally and Linguistically Responsive Materials Focused on Education, Prevention and Resource Promotion

Education materials based in evidence, and culturally and linguistically tailored to impacted communities are critical for overdose prevention. Opportunities exist to improve overdose prevention include education for at-risk populations including youth and people experiencing generational substance use disorder; identification of available resources and associated providers; and demystification of harm reduction and associated stigmas.

D. Support BH Workforce Retention Through Streamlining Oversight and Targeted Investments

Oregon's BH workforce is in crisis due to challenges in recruitment and retention and key gaps in cultural competence and language proficiency. Opportunities to support the BH workforce include reducing administrative burden, allowing more flexibility in how funds are spent, and supporting key staff like the overdose prevention coordinator role.

E. Removing SUD-Specific Barriers to Housing and Prioritizing SUD-Focused Development

Access to stable housing is a critical element of effective overdose prevention and treatment for SUD. Opportunities to improve access to housing include clarifying or removing funding restrictions and barriers that limit housing access for people with SUD, building more long-term transitional and recovery residences, and conducting an economic analysis on future funding strategy.

F. Expand Peer Support and Eliminate Clinical, Correctional, or Billing Barriers to Service Integration

Peers play an essential role connecting people to services, constitute a critical community supporting people who use drugs, and are in demand. Opportunities exist to improve the integration of peer services by streamlining or waiving clinical certification/experience requirements; providing clarity on billing for peer services; and providing guidance on peer service provision in correctional settings.



G. Improve Access/Continuity of SUD Services During Incarceration and Reentry Individuals exiting incarceration have an overdose risk 10X the general population. Opportunities exist to improve SUD support during/following incarceration including proactive insurance coverage and provider assignments, transitional harm reduction services, and increased Medication-Assisted Treatment (MAT) access.

H. Expand and Enhance Intentional Collaboration across the Care Delivery System

Oregon's BH System of care can be strengthened though increased formal coordination between government (Governor's office and Counties), OHA, Tribal, and community providers across the care continuum. Opportunities exist to improve coordination through intentional gatherings, centralized reporting, and formalized coordination anchored in accountability and equity.

III. Mapping to 90-Day ORT Goals

In November 2023, OHA began a 90-day implementation of four ORT Goals for Immediate Action, the first of which to host the statewide listening sessions. The table below shows how six of the eight tactics from the listening sessions map to the ORT goals and will help guide planning next steps and future action.

90-Day ORT Goals	Listening Session Key Tactics
1. Engage communities for action	H. Expand & Enhance Intentional Collaboration Across the Care Delivery System
2. Adjust naloxone distribution	A. Expand Naloxone Provider Network and Optimize Allocation Based on Evolving Need
3. Enhance public awareness and education	B. Communicate SUD Program Success to Promote Awareness & Increase Transparency C. Develop Educational Materials for Specific At-Risk Populations and to Improve Awareness of Key Resources



	F. Expand Peer Support and Eliminate
4. Outreach, harm	Clinical/Correctional, or Billing Barriers to Effective
reduction and access to	Service Integration
treatment	G. Improve Access/Continuity of SUD Services
	During Incarceration and Reentry

The remaining two tactics that did not align to an ORT goal included, **D) Support BH Workforce Retention Through Streamlining Funding/Clinical Oversight**, and **E) Removing SUD-Specific Barriers to Housing & Prioritizing SUD-Focused Development**. In all the listening sessions, administrative burden, which is part Tactic D, was a consistent issue flagged for next step follow-up. Tactic E, housing, continues to be a prominent issue that should also be considered as part of future strategy.

IV. Next Steps Identified During Listening Sessions

Listening session attendees were provided, after each session, a summary of the discussion including a *Next Steps* section. The table below illustrates how these Next Steps from each listening session aligns to the ORT Goals for Immediate Action and/or Key Tactics.

Listening Session	Next Steps
Eastern Oregon (December 13, 2023)	 OHA staff to work with OHA communications team on public materials clarifying harm reduction definitions (Goal 3, Tactic C) OHA Behavioral Health staff are looking into current intake rules at the point of entry to treatment (Tactic D)
Lane and Douglas Counties (November 15th, 2023)	OHA staff to work with OHA communications team on elevating M110 success stories in communities (Goal 3, Tactic B)



	OHA Behavioral Health staff are looking into current rules at the point of entry to treatment (Tactic D)
Southern Oregon (November 9th, 2023)	 OHA to share positive stories from BHRN partners to demonstrate impact of measure 110 funding (Goal 3, Tactic B) OHA staff to work on alleviating administrative burden tied to multiple funding sources (Tactic D)
Mid-Willamette (November 8th, 2023)	 OHA staff to work with OHA communications team on elevating success stories in communities (Goal 3, Tactic B) OHA staff to work on alleviating administrative burden tied to multiple funding sources (Tactic D) Identify ways to support primary prevention (Tactic C)
Portland Metro (October 25th, 2023)	 OHA Behavioral Health staff are looking into current rules at the point of entry to treatment to see what might be adjusted or streamlined to remove barriers identified (Tactic D) OHA's Public Health Division is following up to determine how OHA can provide additional training for prevention partners

V. Tribal and Community-Focused Listening Sessions

In addition to the listening sessions summarized above, OHA has worked to create opportunities to hear from Tribal communities, communities of color, and communities experiencing low income In December 2023, OHA's Office of Tribal Affairs conducted listening sessions with impacted tribal communities. OHA is currently finalizing the scheduling of additional community-specific listening sessions in Spring 2024.