## Opioid Settlement Advisory Committee



#### **Our Meeting Agenda**

- I. Call to Order & Introductions
  - a. Introductions
  - b. Agenda Review
  - c. Legislative Report Review
- II. Update on State Fiscal Year 2023 & 2024 Recommendations and Procurement Process
- III. Subject-Matter Expert Presentations
  - a. RI League of Cities and Towns
  - b. Racial Equity
- IV. Next Steps & Other Updates
  - a. Governor's Taskforce Updates
  - b. Medicaid Redetermination Update
  - c. Administrative Updates
- V. Public Comment
- VI. Adjourn





#### Call to Order and Introductions



#### Where We Are Today



Update on State Fiscal Year 2023 & 2024 Recommendations and Procurement Process



#### **OSAC Funding Progress** as of 01.13.23

- Items currently complete and projects have begun.
  - Basic Needs Provision for High-Risk Clients and Community Members at Harm Reduction Agencies
  - Increased Harm Reduction Outreach Investments at Harm Reduction Agencies
  - Substance Exposed Newborn Data Enhancements at RI Department of Health
  - Contract amendments to support Basic Needs Provision for High-Risk Clients and Community Members at 6 recovery centers and 2 additional community organizations
  - Youth Behavioral Health Prevention in Schools
  - Staff selected for the Automated Rapid Detection Surveillance System



#### **OSAC Funding Progress** - as of 1.13.23

- Work Underway:
  - Overdose Prevention Centers (RFP) *RFP is in review*
  - Recovery Housing Expansion (Level 2 and Level 3) At Purchasing. Now has an RFP number (to be posted soon), with BHDDH leading
  - Expanded SUD Residential Capacity RFP (Opening 2 or 3 Facilities) Posted at Purchasing. Closed on January 17
  - Biosurveillance Lab Supplies at RIDOH Order is in and RIDOH has requested payment
  - BIPOC Industry Workers & Chronic Pain Treatment and Prevention Negotiations Complete, contract in the process of being signed
  - Harm Reduction Technology Implementation *Negotiations almost complete*
  - Contingency Management Services for People w/ Stimulant Use Disorder Negotiations almost complete



#### **OSAC Funding Progress**

- Work Underway:
  - Data Heat Map Dashboard Contract being finalized. *Work will be completed by June 30*
  - Alternative Overdose Prevention Programming *RFP is at Purchasing and is expected to post soon.*
  - Expanding Street Outreach, with a focus on service BIPOC/Undocumented Residents RFP is at Purchasing and is expected to post soon.
  - Community Prevention Services and Non Profit Capacity Building We are ready to begin work with the Rhode Island Foundation for this grant-making. Applications will be available by the end of the January.
  - Housing Capital, Operating, and Supportive Services Investment strategy drafted per OSAC feedback and is still under review with Department of Housing for next steps.
  - Family Recovery Supports RFP development still underway at BHDDH.



#### **Anticipated Procurement Timeline for FY23 Funds**

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October 2022	<ul> <li>Begin procurement processes for second 4 projects and send to Purchasing. At least 2 of the first procurements are posted.</li> </ul>		
		-	
November 2022	<ul> <li>Begin procurement process for the third group of 4 projects and send to Purchasing. Kick off additional 3 procurements.</li> </ul>		
December 2022	<ul> <li>Begin procurement process for the fourth group of 4 projects and sent to Purchasing. Kick off additional 5 procurements.</li> </ul>		
January 2023	<ul> <li>Continuing procurements and implementation. Working with Purchasing.</li> </ul>		



Status:

#### **Subject-Matter Expert Presentations**



#### RI League of Cities and Towns

Jordan Day, Associate Director





#### Municipal Approach: Opioid Settlement Funds

Jordan Day

**RI** League of Cities & Towns

January 18, 2023

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RHODE ISLAND



#### • RI League Mission & Role

- Municipal Initiatives
- Opportunities for Engagement
- Recommendations



#### **RI League Mission & Role**

- Founded in 1968, originally focused on state-level advocacy.
- Serves as a convener and creates partnerships and programs for the benefit of every municipality in Rhode Island.
- All 39 RI municipalities are members of the League.
- Identified members to serve as county representatives on OSAC.
- Worked with EOHHS, DOH and Attorney General's Office to host/advertise four technical assistance (TA) sessions in late Summer & early Fall 2022.



#### **Municipal Initiatives\***

- Total funding ranges from \$13,000 to over \$6 million.
- For several communities, these funds are the first time they can make an investment in opioid use-related programs.
- Communities that have previously established programs are continuing to invest in those partnerships.
- Several communities are focusing on school-based programs.



#### **Opportunities for Engagement**

- Several communities are looking to establish regional partnerships, while many are still assessing current plans and resources.
- Almost every community has expressed concern that the funding they've received thus far is insufficient.
- Additional funding for creating programs and hiring permanent support staff were among the highest requests.



#### **Recommendations**

- Partner with the League to offer more TA sessions.
- Develop a resource library for members to access prior TA sessions and best practices, including presentations from other municipalities.
- Utilize county representatives to help coordinate regional partnerships along with the League.
- Offer additional funding opportunities to enhance programming and staff-level support.





#### Jordan Day, Associate Director

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## **THANK YOU**



## **Racial Equity**





## Racial Equity and Overdose Prevention

**Opioid Settlement Advisory Committee** 

Jan 18, 2023



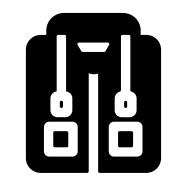


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#### Introductions

#### How Far We've Come, Where we're going

Discussion: How does RE shape the work of the OSAC?



#### **Reframe Health and Justice**

Queer people of color collective

Community, Service, Systems

State and National Focus Racial and Gender Health Equity for PWUD, PWTS



#### Housekeeping

#### Purpose

• To explore how the Recovery WG can integrate racial equity into ongoing work

#### **Discussion Agreements**

- Be curious and ask questions
- We can't be articulate all the time, so give the benefit of the doubt
- Intent vs Impact
- Take Space/Make Space



#### **Our Scope for the Governor's Overdose Task Force**

#### **Strategic Planning**

Supporting working groups to integrate RE into existing work

Monthly Workshops, Resource Development

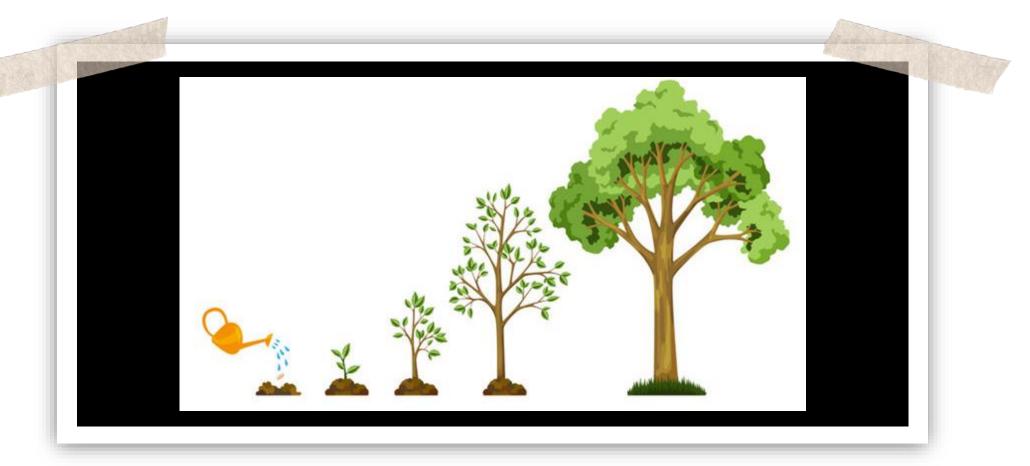
**Training & TA** 



## Equity

"Racial equity is a process of eliminating racial disparities and improving outcomes for everyone. It is the intentional and continual practice of changing policies, practices, systems, and structures by prioritizing measurable change in the lives of people of color."





## Where we Are, Where we're Going



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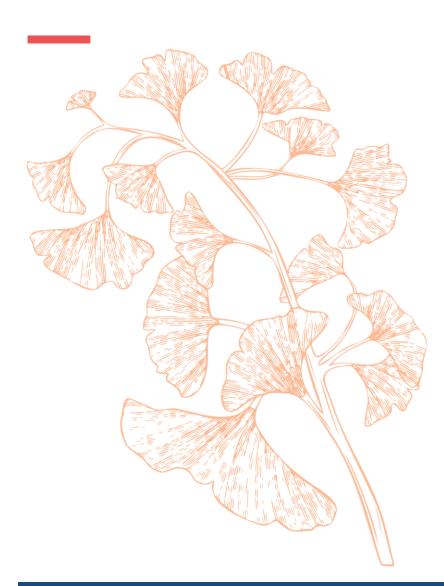


- Connected with co-chairs and sat in on meetings with each work group to understand their role, scope and process
- Drafted a definition of racial equity for the GOTF to narrow in on actionable steps for increasing racial equity
- Identified the direction of a strategic plan for the racial equity work group
- Begun developing a shared understanding for four of the work groups to build on for strategic planning
- Hosting the first in a series of workshops for education and capacity building
- Begun a working document on data collection to support metrics for on-going evaluation



# Where We Are Going

- Monthly workshops and "Office Hours" focused on capacity building and education on topics of health equity for PWUD, each with additional reading materials and media
- Creating a strategic plan for the role and scope of the REWG to both support the GOTF and identify its priorities for change
- Creating a replicable process for WGs to identify gaps in racial equity and identify steps to address those gaps
- Offer recommendations for addressing racial equity in drug user health



# Workshops

January 17 11-12pm EST Racial Equity in Practice

February 21, 11-12pm EST Creating Brave Spaces

March 21, 11-12pm EST Modeling Strategic Racial Equity Planning

April 18, 11-12pm EST Evaluation & the Right Metrics







## **Possibilities for the OSAC**



#### Shaping Funded Orgs

#### Investors in Community

#### Policy Change Voices

Decide on what is required from funded organizations through funding streams and requirements

Directly investing in capacity of communitybased orgs through grants and programming

Make recommendations to administrative bodies for policy change



## From the RE WG

For the Governor's Overdose Task Force, Racial equity is a process of eliminating racial disparities in:

- Availability, accessibility and perception of treatment and services,
- leadership/power in structures and systems,
- and overall health and life circumstances
- for substance users in Rhode Island. It is the intentional and continual practice of changing
  - the make-up of decision-making bodies and leadership,
  - policies across multiple systems,
  - perceptions of the system and
  - diversity in the landscape of service providers

by prioritizing measurable change in the lives of people of color.

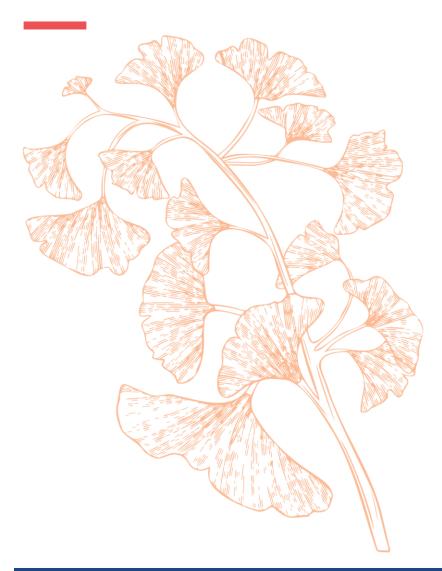


## Discussion

# How has racial equity shaped the work of the Opioid Settlement Advisory Committee thus far?

#### Where would you like it to go?





# Thanks

Do you have any questions?

partners@reframehealthandjustice.com kate@reframehealthandjustice.com susanka@reframehealthandjustice.com justice@reframehealthandjustice.com







#### Next Steps & Other Updates



## Governor's Task Force Update



## Health and Human Services Medicaid Renewals





- **1.** Situational Overview
- 2. Key Messages and Communications Materials
- 3. High-Level Engagement Plan Review
- 4. Moving Forward Together

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## **Situational Overview**



### **Decoupling of Renewals from the Public Health Emergency**

#### **Updated Federal Guidance:**

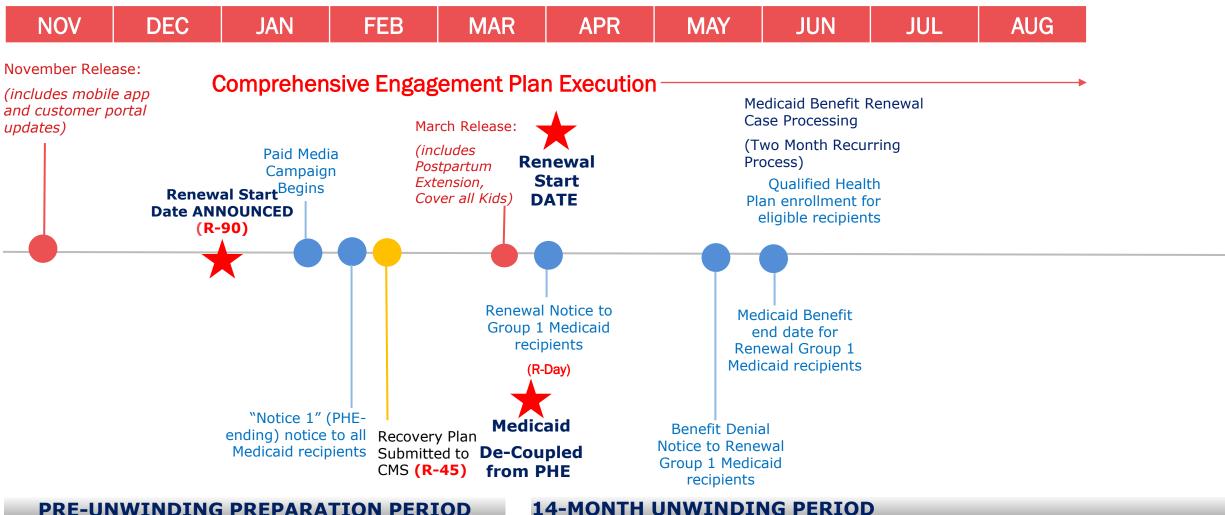
- CMS has released guidance regarding key dates related to the Medicaid Continuous Enrollment on 1/5/2023 <u>https://www.medicaid.gov/federal-policy-guidance/downloads/cib010523.pdf</u>
- CMS's March 2022 guidance permitting a 12-month unwinding period is not changing.
- The March 31, 2023 date in statute ending the continuous enrollment requirement now places definitive parameters around that period. Specifically:
  - States must start their 12-month redetermination period in February, March, or April 2023.
  - The earliest a state may initiate a redetermination resulting in a coverage termination is February 1, 2023.
  - Redeterminations must be initiated for all Medicaid-enrolled individuals by March 31, 2024 and completed by May 31, 2024





### **New Operations Timeline**

Timeline assumes (R-Day) of 04/1/2023. Renewal notices mailed for April 1, 2023



**PRE-UNWINDING PREPARATION PERIOD** 

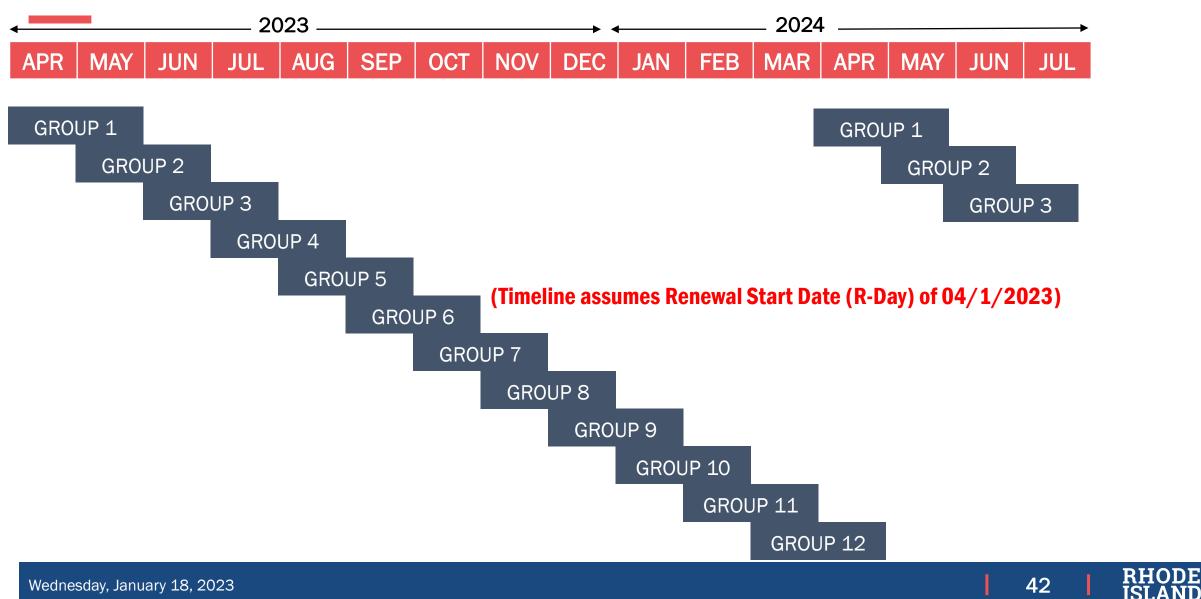
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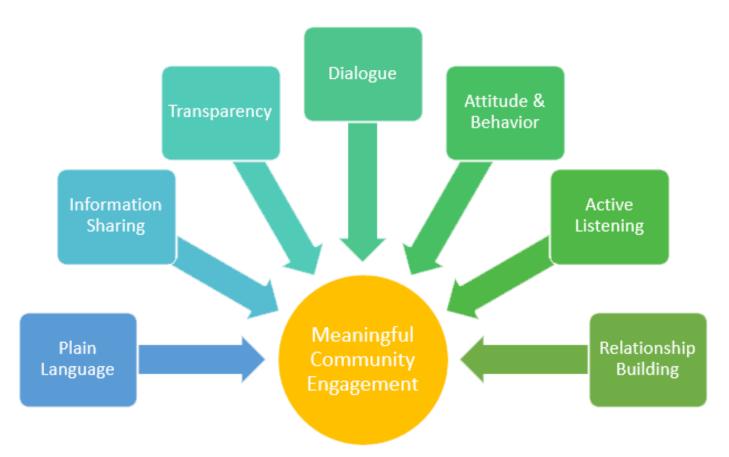
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### **14 Month Renewal Distribution Groupings**



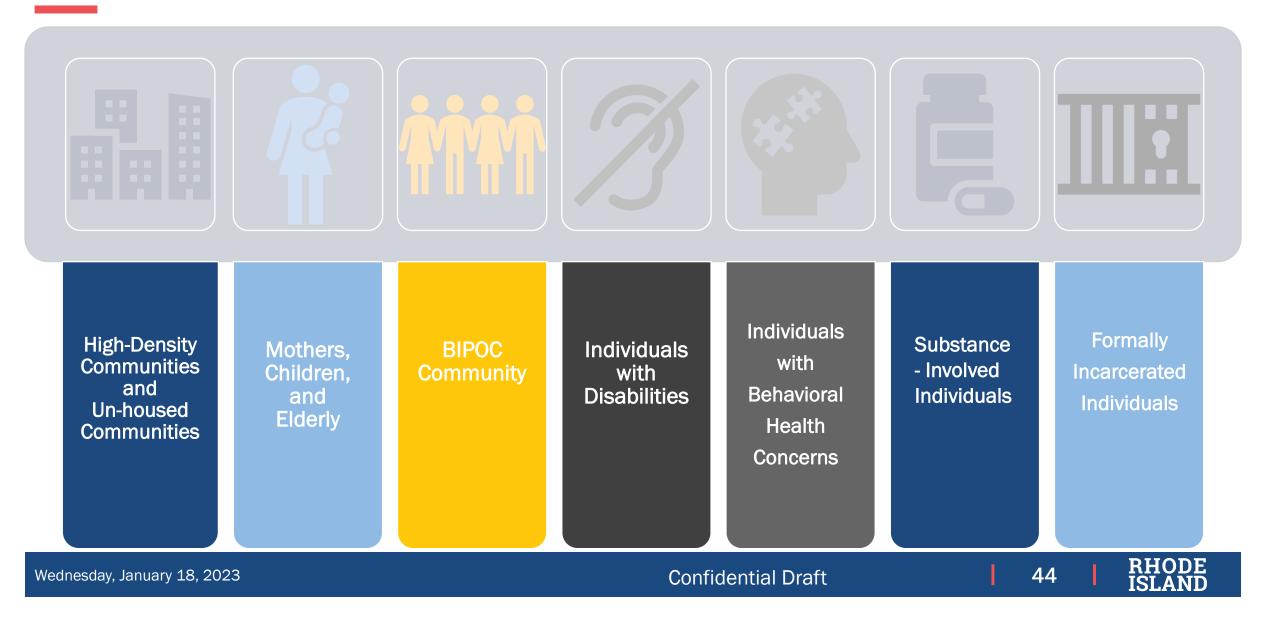
### **Meaningful Engagement is Vital to Medicaid Redeterminations**



Educating and empowering community partners and trusted messengers to share critical information and key actions that must be taken in a timely and linguistically-appropriate manner to reach those most at-risk of being left behind in benefits redetermination.



## **Priority Populations for Targeted Outreach Plans**



## Key Messages and Communications Materials



#### **Three Strategies for Community Engagement for Renewals**

Integrated Communications				
Social Media	Phase I: Broad Engagements			
Press Briefings Media Releases	Key Community Advocate Forum	Phase II: Targeted Outreach Plans		
Online Videos Websites	Municipal and Legislative Outreach	Population-Specific Targeted Outreaches		
All-Staff Messages Applications	Call Center Messages Direct Mailings	Health Equity Zones Canvassing/CHWs		
	Provider Notices Existing Forums and Commissions	New Partnerships Community Trusted Messengers		

#### **MULTILINGUAL MATERIALS**



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## **Main Messages Remain the Same**

The most important action to take at this time is to **continue encouraging Medicaid recipients to update their contact information – mailing address, e-mail, phone number.** 

- Contact your managed care organization (MCO) Neighborhood Health Plan of RI, Tufts Health Public Plan (RITogether) or United Health Care Community Plan (UHCCP)
- Online: Access your account at healthyrhoderi.gov or through the Healthy Rhode Mobile app. HealthSource RI also hosts a live web chat, which is staffed during business hours,
- By Phone: Call HealthSource RI at 1-855-840-4774 or the Department of Human Services (DHS) Call Center at 1-855-697-4347
- In Person: Staff at DHS offices can assist customers in person.
- Partner Toolkit: Coming Soon!



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## **New Information for Awareness**

- RI DHS announces Federal Government will end COVID-19 SNAP emergency allotments for March SNAP distributions
- Originally began in March 2020
- Standard SNAP benefits will remain intact provided eligibility is still current
- DHS is asking all SNAP recipients to ensure it has accurate and updated info so that the highest benefit amount possible can be provided
- More information is available at <u>www.dhs.ri.gov</u>



## High-Level Engagement Plan Review



## **Phase I: January Launch At-A-Glance**

Legislative Outreach, Health and Human Service Providers, and Existing Forums with Advocates

Audience	Lead / Support	Co-Convener	Target (Frequency)	Key Messages
Legislators	GO / EOHHS	Legislative Leaders	1/20 (Bi-Monthly)	Member Navigation/Actions
Interagency State Partners	<mark>go / Eohhs, Dhs, Hsri</mark>	Public Information Officers	1/23 (Monthly)	Key Messages/Target Pops
Existing Partner Convenings	EOHHS / Sister Agencies	Community Co-Chairs	1/16 (Continuous)	Key Messages/Toolkit
Health Equity Zones	RIDOH / EOHHS	HEZ Collaborative Leaders	1/20 (Monthly)	Key Messages/Outreach Plans
Existing Boards/Commissions	EOHHS / Sister Agencies	Chairs	1/16 (Continuous)	Key Messages/Toolkit
HHS Contracted Providers	EOHHS / Sister Agencies	RICHA, MHARI, RIPIN, MCOs	1/16 (Bi-Monthly)	Key Messages/Outreach Plans
Program Beneficiaries	EOHHS / DHS, HSRI	DLT, Other Call Centers	<mark>1/30 (TBD)</mark>	Member Navigation/Actions
Census Outreach Partners	EOHHS / DOA	Community Champions	1/30 (Bi-Monthly)	Key Messages/Outreach Plans
Municipal Leadership	GO / EOHHS	League of Cities and Towns	1/30 (Bi-Monthly)	Target ZIPCODES/Toolkit

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## **Phase II: February Launch At-A-Glance**

Population-Specific Outreach, Grassroots Campaigns, and New Cross-Sector Partnerships

Target Population	Lead / Support	Co-Convener	Target (Frequency)	Key Messages
Released from Incarceration	RIDOC / Courts, Prob.	Community Partners	2/10 (Bi-Monthly)	Member Navigation
Homeless	Housing / EOHHS	Homeless Providers	2/10 (Weekly)	Member Navigation
<b>BIPOC and Faith Communities</b>	GO, Lt. GO / EOHHS	COVID Equity Council	2/10 (Monthly)	Member Navigation
Refugees	RIDOH / DHS	Dorcas, Refugee Dream Ctr	2/10 (Bi-Monthly)	Member Navigation
Children and Mothers	RIDOH / DCYF, DHS	WIC Centers	2/10 (Bi-Monthly)	Member Navigation
Aging Adults	OHA / DHS, EOHHS	United Way, SAGE, Senior Ctr	2/10 (Bi-Monthly)	Member Navigation
Individuals with Disabilities	BHDDH / RIDOH, DCYF	CPNRI	2/10 (Bi-Monthly)	Member Navigation
Individuals with Mental Illness	BHDDH / EOHHS	Gov. Council on BH, CMHCs	<mark>2/10 (Bi-Monthly)</mark>	Member Navigation
Individuals facing Addiction	BHDDH / EOHHS	Gov. Overdose TF, Tx Providers	<mark>2/10 (Bi-Monthly)</mark>	Member Navigation
Veterans	VETS / EOHHS	VA Administration	2/10 (Bi-Monthly)	Member Navigation

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# Phase II: February Launch At-A-Glance (Continued)

Population-Specific Outreach, Grassroots Campaigns, and New Cross-Sector Partnerships

Target Population	Lead / Support	Co-Convener	Target (Frequency)	Key Messages
Child Welfare Families	DCYF / EOHHS	Family Care Community Part.	2/10 (Bi-Monthly)	Member Navigation
Unemployed and Workers Comp	DLT / DBR, ORS	TBD	2/10 (Monthly)	Member Navigation
Employers	COMMERCE / DBR	Chambers of Commerce, SBA	2/10 (Monthly)	Member Navigation
Public Transportation Riders	RIPTA / DOT	Paid Media Partners	2/10 (Ongoing)	Member Navigation
Families/School-Aged Children	RIDE / Child. Cabinet	Associations / School Comm.	2/10 (Monthly)	Member Navigation
Subsidized Housing Residents	HOUSING / EOHHS	Local Housing Authorities	2/10 (Monthly)	Member Navigation
Indigenous Rhode Islanders	EOHHS / RIDOH	RI Indian Council	2/10 (Bi-Monthly)	Member Navigation
Food Assistance Beneficiaries	DHS / EOHHS	RI Food Bank	2/10 (Ongoing)	Member Navigation
Home Visiting Clients	RIDOH / EOHHS	Participating Providers	2/10 (Bi-Monthly)	Member Navigation
Individuals with Functional Needs	RIDOH / RIEMA	Commissions, Local EMA	2/10 (Monthly)	Member Navigation



#### **Moving Forward Together**

Please share messaging from EOHHS, DHS and HSRI: Facebook – RIEOHHS, RhodelslandDHS or HealthSourceRI Twitter - @RIEOHHS, @RIHumanServices, or @ HealthSourceRI



#### Next Opioid Settlement Advisory Committee Meeting: February 2023

DATE:	Thursday, February 23rd
TIME:	1:00 - 3:00
LOCATION:	RI EOHHS Virks Building, 1 <sup>st</sup> Floor Training Room, 3 West Road, Cranston RI, 02920
MEETING GOALS:	<ul> <li>Update on State Fiscal Year 2023 &amp; 2024 Funding Procurement Status</li> <li>Subject Matter Presentations: TBD</li> <li>Funding Spotlight: TBD</li> </ul>



### **Public Comment**



## **THANK YOU**

#### **Opioid Settlement Advisory Committee Chairperson:**

Carrie Bridges Feliz, MPH Vice President, Community Health and Equity Lifespan 335R Prairie Avenue, Suite 2B | Providence, RI 02905 Phone: 401-444-8009 cbridgesfeliz@lifespan.org







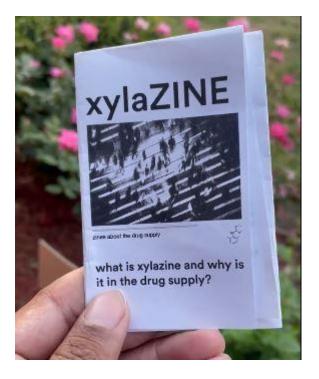
#### **Xylazine:** Information Now Available on PreventOverdoseRI.org

Information about xylazine, a veterinary tranquilizer that is showing up in the local drug supply, is now available on PreventOverdoseRI.org (PORI)'s <u>Learn About Xylazine</u> webpage.

**Xylazine is** <u>not</u> approved for human use. It can cause a deep and long-lasting sedation that can lead to injuries related to poor circulation and breathing problems, especially if used with other sedating drugs. While naloxone should be administered and a call placed to 9-1-1 in the event of an apparent overdose, special attention should be given to ensure that the person is breathing even if they remain unconscious. Long-term use of xylazine can lead to physical dependence and withdrawal symptoms, including irritability, anxiety, or low mood.

**Xylazine use has also been associated with severe skin and soft tissue wounds and ulcers that can lead to infection**. PORI's new webpage also offers information about <u>wound care</u> and local <u>healthcare facilities specializing in wound care treatment</u>.

In addition to the new webpage, <u>testRI</u> researchers, who work in a partnership with Brown University School of Public Health, Brown Emergency Medicine, community harm reduction organizations, and RIDOH, have developed a printed resource to provide information about xylazine. This eight-page booklet (known as a "Zine") spells out what xylazine is, where it is showing up in the drug supply, and more. You can download a printable xylaZINE <u>here</u> and <u>watch this video tutorial</u> to learn how to fold the zine.





#### **Statewide Behavioral Health Public Awareness Campaigns**

#### Small Amount/Fentanyl Risks (Phase 3)

Phase 3 has officially relaunched and includes paid ads for Connected TV (e.g., video streaming services via Hulu, Roku), bus shelters (within/near overdose hot spots), and new media tactics: SMS/MMS text messaging will work *in synchronization with* a targeted direct mail campaign is going to be requesting review and final approval by EOHHS and the Governor's Office; messages will be enabled within specific ZIP codes based on RIDOH's overdose hot spot data in alignment with Rhode Island Overdose Action Area Response (ROAAR) Public Health Alerts; YouTube video pre-roll advertisements; and Statewide movie theater trailers for R-rated movies.

#### Substance-Exposed Newborns (Phase 3)

Last week, RIDOH received a PO to start working with RDW Group to develop and launch Phase 3 of the "Pregnant? Using? We Can Help." campaign for pregnant people, mothers, and substance-exposed newborns. The campaign is funded by State Opioid Response (SOR) and SOR Block Grant funding, with the latter funding source specifically requiring content related to alcohol and marijuana use.

#### NEW: Polysubstance Use and Accidental Youth Poisonings

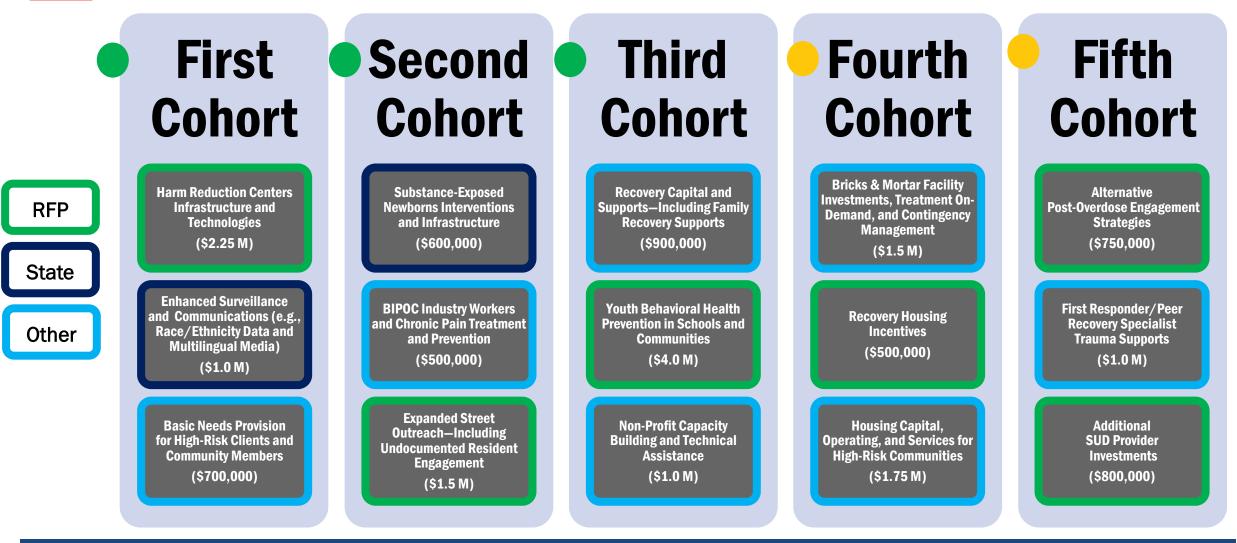
The statewide BH Conversation Team is currently developing public awareness campaigns on the topics of polysubstance use and accidental youth poisonings with local marketing vendor, RDW Group. These campaigns are being project managed by Ashley O'Shea of EOHHS; RIDOH is acting as a technical advisor. The polysubstance use campaign will start with paid digital media placements using <u>CDC's national campaign</u> and will direct people to PreventOverdoseRI.org. In addition, the polysubstance use and youth accidental poisoning campaigns will develop localized messaging based on substantial input from key informant interviews with community members/subject matter experts before proceeding with the development of messaging/creative and media planning.

#### Three Words Can Make a Difference (Phase 2)

The interagency, statewide Behavioral Health (BH) Conversation Team has relaunched the 2021 *Three Words Can Make A Difference* public awareness campaign. This campaign was originally developed in response to data findings from the BHDDH Public Attitudes survey, which showed 91% of Rhode Islanders believe that a person should not feel ashamed to get help, and that the majority of Rhode Islanders know or have known someone who has struggled with a behavioral health condition- but do not know how to help. The campaign encourages audiences to visit <u>BHLink.org</u> to learn how you can support someone in need. Phase 2 includes poster distribution throughout local colleges and universities. You can access the campaign toolkit <u>here</u>.



#### **State Fiscal Year 2023 Recommendations Update**



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#### **Opioid Settlement Advisory Committee: State Fiscal Year 2023 Funding Recommendations**

\$18.75M Allocated below + \$1.25M for Governance = \$20M Total

	\$3.45M, 17%	\$4.5M, 23%	\$2.8M, 14%	\$2.0M, 10%	\$6.0M, 30%
	Social Determinants	Harm Reduction	Treatment	Recovery	Prevention
Evidence-Based Activity	First Responder/Peer Recovery Specialist Trauma Supports (\$1.0 M)	Expanded Street Outreach–Including Undocumented Resident Engagement (\$1.5 M)	BIPOC Industry Workers and Chronic Pain Treatment and Prevention (\$500,000)	Recovery Capital and Supports—Including Family Recovery Supports (\$900,000)	Enhanced Surveillance and Communications (e.g., Race/Ethnicity Data and Multilingual Media) (\$1.0 M)
ldentified Funding Need	Basic Needs Provision for High-Risk Clients and Community Members (\$700,000)	Harm Reduction Centers Infrastructure and Technologies (\$2.25 M)	Bricks & Mortar Facility Investments, Treatment On- Demand, and Contingency Management (\$1.5 M)	Substance-Exposed Newborns Interventions and Infrastructure (\$600,000)	Youth Behavioral Health Prevention in Schools and Communities (\$4.0 M)
Requires Additional Coordination	Housing Capital, Operating, and Services for High-Risk Communities (\$1.75 M)	Alternative Post-Overdose Engagement Strategies (\$750,000)	Additional SUD Provider Investments (\$800,000)	Recovery Housing Incentives (\$500,000)	Non-Profit Capacity Building and Technical Assistance (\$1.0 M)
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#### SFY 2024 Funding Recommendations: Accepted by Secretary Novais

Gold = Treatment Red = Program Administration Light Grey = Prevention Dark Grey = Recovery

Light Blue = Harm Reduction Dark Blue = Social Determinants of Health

FY 24 NEW PROJECTS		FY 23/24 SUSTAINABILITY		FY 24 RESPONSE/ADMIN	
\$2,600,000 (25%)		\$6,070,000 (59%)		\$1,600,000 (16%)	
SUD Residential and Workforce Support*	\$600,000	Housing and Recovery Housing/Supports	\$2,620,000	Emergency Response	\$500,000
BIPOC Youth Development	\$800,000	Youth Prevention Programming	\$1,150,000	Program Administration	\$600,000
Drop-In Center for Drug User Health*	\$150,000	Harm Reduction Center and Treatment Capacity	\$1,250,000	Project Evaluation	\$500,000
Naloxone Distribution Infrastructure*	\$500,000	Expanded Street Outreach	\$1,050,000		
Undocumented and Uninsured MAT Coverage*	\$550,000				



## **Guiding Principles for Decision-Making**

To guide decisions for use of these funds, the Committee agreed to:

Spend money to save lives.	It may be tempting to use the dollars to fill holes in existing budgets rather than expand needed programs, but the Committee should use the funds to add to rather than replace existing spending.		
Use evidence to guide spending.	At this point in the overdose epidemic, researchers, clinicians, and community partners have built a substantial body of evidence demonstrating what works and what does not. States and localities should use this information to make funding decisions.		
Invest in youth prevention.	Support children, youth, and families by making long-term investments in effective programs and strategies for community change.		
Focus on racial equity.	This process should be guided by public health leaders with the active engagement of people and families with lived experience, clinicians, as well as other		
Develop a fair and transparent process for funding recommendations.	This process should be guided by public health leaders with the active engagement of people and families with lived experience, clinicians, as well as other key groups.		
Consider future sustainability in all recommendations.	Although there may be some on-time funding recommendations, the Committee should consider the financial sustainability of all investments and try to plan for investments that can be sustained long-term.		

\*The first five items are paraphrased and summarized from the Johns Hopkins' "The Principles To Guide Jurisdictions In The Use Of Funds From The Opioid Litigation, We Encourage The Adoption Of Five Guiding Principles".

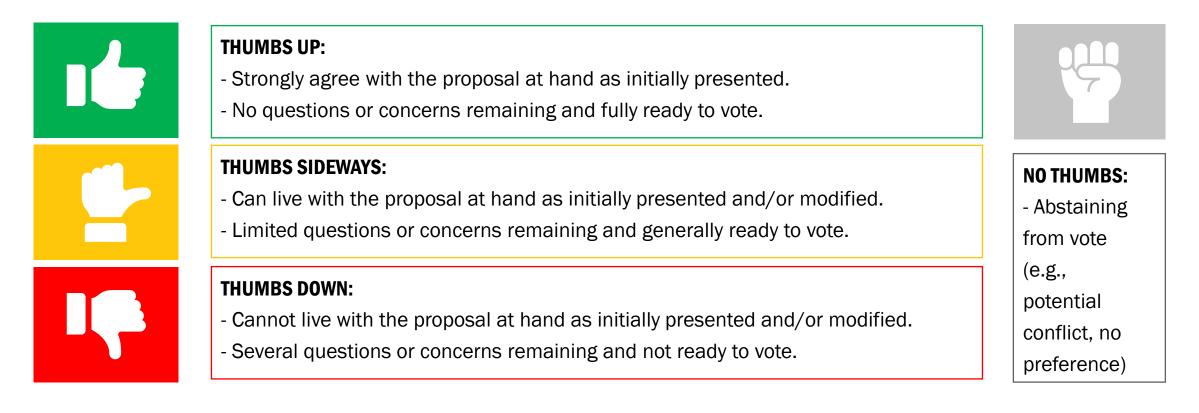




# **Reminder: Consensus-Building Approach**

#### The Opioid Settlement Advisory Committee will be using a Modified Consensus-Building Approach.

Recommendations will be reviewed, discussion will be held, and intermittent polls for consensus using the cards shown will be taken. Once modified consensus is achieved, a motion for a vote will be requested, as will a second.





# **Topics Planned for Future Meetings**

#### NOVEMBER

#### DECEMBER

#### 2023

- Housing (with the Office of Housing & Community Development)
- II. Peer Recovery Council

- I. Municipal Partnerships
- II. The Center of Biomedical Research Excellence (COBRE) on Opioids and Overdose
- I. Public Engagement Strategy
- II. Evaluation
- III. Strategic Pillars:
  - I. Prevention: Adult & Children
  - II. Rescue
  - III. Harm Reduction
  - IV. Treatment
  - V. Recovery
  - VI. Social Determinants of Health



