

# Substance Use Prevention Team - Opioids

# Opioid Subsection of Substance Use Prevention Program

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Funding: CDMH



Funding: CDC  
Overdose to  
Action

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Funding:  
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Funding:  
HRSA

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Funding:  
Opioid  
Settlement Funds

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Abbreviations:

CDMH - Chemical Dependency Mental Health  
FPHS - Foundational Public Health Services  
HCS - Healthy Communities Specialist

# Community Partners

## Community Partners

- Ideal Option
- Opioid Multi - Agency Coordination Group (MAC group)
- Police Departments and First Responders
- Providence Regional Medical Center
- Sound Pathways Harm Reduction Center
- Swedish Edmonds
- Quinn Thomas – Marketing Communications Agency



# Community Partners

## HRSA Consortium

- City of Sultan
- Community Health Centers of Snohomish County
- Conquer
- Darrington Prevention and Intervention Community Coalition
- Darrington School District
- Evergreen Health Monroe
- Ideal Option
- Monroe Community Coalition
- Providence Medical Group
- Sea Mar Community Health Center – Monroe Behavioral Health Clinic
- Snohomish County Department of Emergency Management
- Snohomish County Sheriff's Office
- Snohomish County Health Department
- Sno-Isle Libraries
- Sultan School District
- Town of Darrington

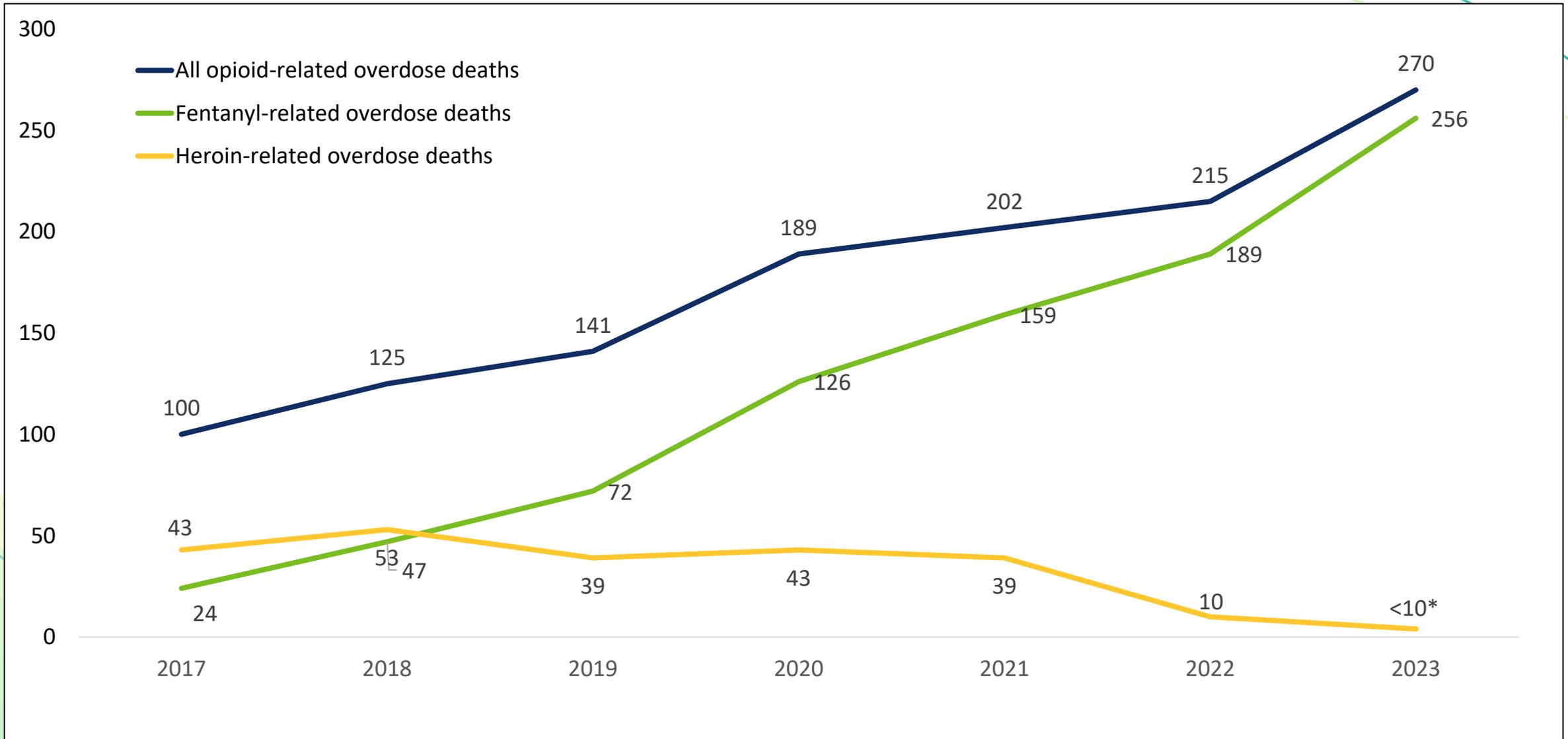
# Opioid Multi-Agency Coordination (MAC) Group

- Originally formed back in 2017
- Revamped post-COVID in 2023 with an Executive Directive
  - Substance Use Prevention Team leads the Prevention Workgroup
    - By the end of 2025, implement EMS-initiated buprenorphine treatment in EMS agencies in Snohomish County.
    - By the end of 2026, reduce the public's stigmatization of those suffering from Opioid Use Disorder/Addiction
    - By the end of 2027, work with providers and healthcare organizations to assess and adjust prescribing and pain management practices.

**SNOHOMISH OVERDOSE PREVENTION**

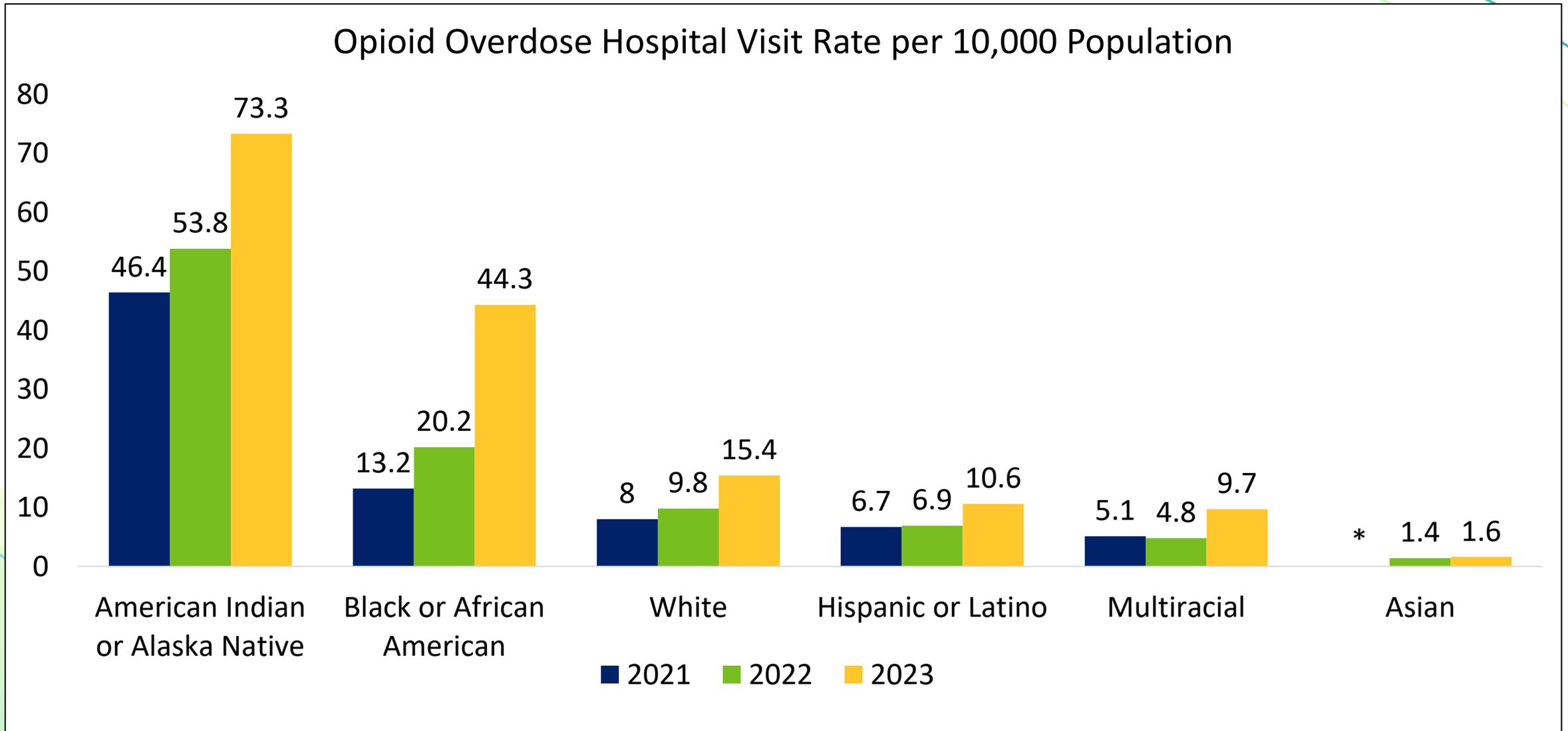
**A COMMUNITY COMING TOGETHER TO STOP  
SNOHOMISH COUNTY'S OPIOID EPIDEMIC**

# Overdose Deaths in Snohomish County



2023 data are preliminary and final counts may change; \*counts <10 have been suppressed.  
Data is available to the Health Department through a partnership with the Snohomish County Medical Examiner's Office.

# Overdose Hospitalizations in Snohomish County



\* Rates calculated from counts <10 have been suppressed. NHOPI are omitted from this figure entirely due to small counts. Data is available to the Health Department through a syndromic surveillance system called ESSENCE, which includes all hospital facilities in Snohomish County.

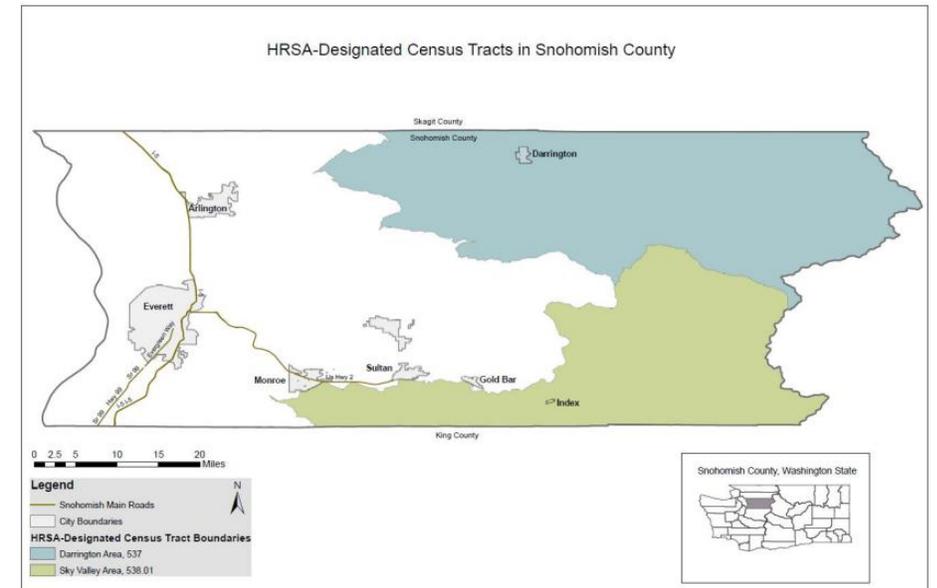
# Overdose Data to Action (OD2A) Program Goals

- Use data and community engagement to inform and tailor prevention strategies, with an emphasis on reaching groups disproportionately affected by the overdose epidemic, at highest risk of overdose, and those historically underserved by prevention programs.
- Develop and grow multisectoral partnerships to strengthen the local overdose response and to ensure that our strategies are culturally relevant.



# HRSA - Rural Opioid Overarching Goal

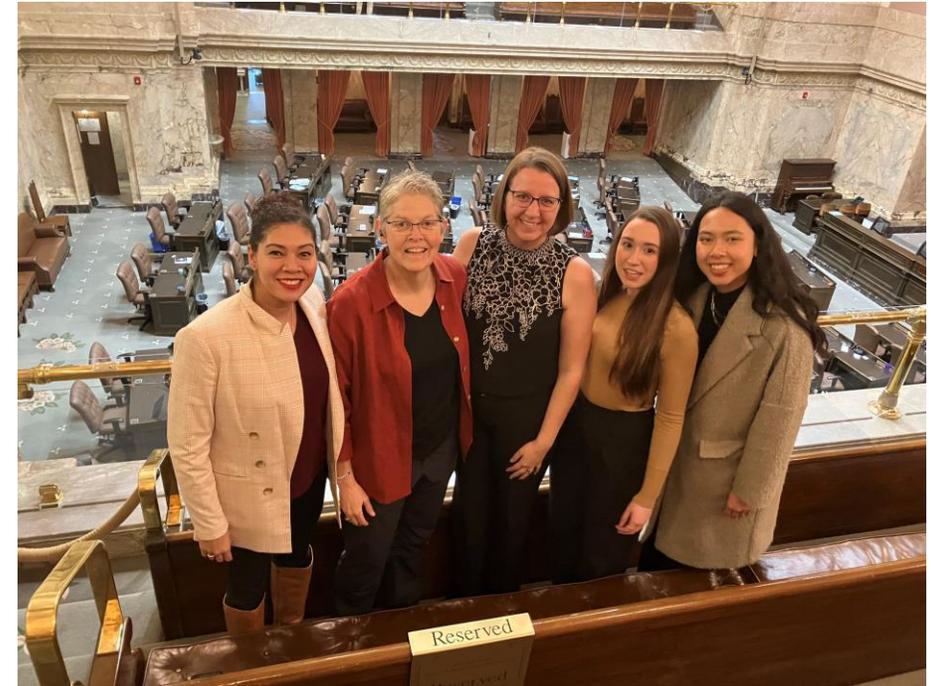
- To reduce the morbidity and mortality associated with substance use disorder (SUD), and opioid use disorder (OUD) in rural communities in Snohomish County.
- This is achieved through strengthening and expanding SUD/OUD prevention, treatment, and recovery services to enhance rural residents' ability to access treatment and move towards recovery.



# Overdose Fatality Review Goals

- Operating under RCW 70.05.210 with a person-centered approach; our goal is to create a multi-disciplinary team to review decedent's lives to prevent future overdoses.
- This is achieved by:
  - identifying patterns in drug overdose cases
  - improving data accuracy related to overdose deaths
  - enhancing service coordination
  - providing recommendations to policies and programs





# Impact - Story Share

- “The biggest impact [of the leave-behind program] I have seen and have had staff share with me is the feeling of empowerment families have when having a loved one who is suffering from opioid use disorder. Families who have to call 911 in duress without their own tools to assist in the rescue of their loved one is an incredibly traumatic moment. Having this option has allowed for people to feel as though they can actually help and save their loved one's life.”
- “Our first responders have felt largely helpless when responding to this overdose crisis in the past few years. The leave-behind program has the unintended fringe benefit of helping them feel like they are doing something (by leaving the Narcan) as opposed to nothing (just leaving the scene). I have no data to back this up, but anecdotally, crews have shared with me that it feels good to feel like part of the solution as opposed to helpless. Burnout is real in our field, and these calls really wear down on our providers. This is a small step in the right direction in combatting that.”

# Impact

- 500+ Naloxone distributed into the community
- 140+ people trained in overdose response
- 70+ Narcan leave-behind kits have been distributed by first responder partners
- Law enforcement partners - over 400 successful overdose reversals since Jan. 2022
- Community Needs Assessment
- Buprenorphine Initiation Workgroup
- Increased accessibility of data through data dashboard



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# Next Steps

- What are some upcoming projects?
  - Multicultural communication campaign
  - Peer support program
  - Drug testing
  - OFR first meeting – fall 2024
  - HRSA – Community conversations and train the trainer events



# Next Steps

- Where do you want your program to go?
  - Equity
  - Proactive vs. reactive
  - Continue outreach and education to organizations around Snohomish County
  - Polysubstance use
- Is there anything that your program needs to improve or become more successful?
  - More sustainable funding





## Questions?

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always working for a safer & healthier  
**SNOHOMISH COUNTY**