



BHC Overview

Presented to

The Community, February 21, 2024

Jefferson County's Behavioral Health Consortium (BHC) is supported by \$1.3 M funding HRSA Grants through August 2024, and ongoing Jefferson County Opioid Abatement Council (OAC) funding through 2038.



BHC Overview

BHC



The BHC is focused on collaboratively developing and funding a collective seamless behavioral health system that allows our community members to navigate smoothly to needed services.

We have grown from 4 voting members in 2018, to 14 voting members in 2024.

The BHC and its work is supported by funding from HRSA’s RCORP-Implementation Grant through August 2024 and Jefferson County’s Opioid Abatement Council funding that continues through 2038.





BHC History





2018 – 2021 Reporting Structure

County BOCC | Jefferson Healthcare | JC Public Health | City of Port Townsend

CHIP

John Nowak / Lori Fleming

CHA Execution – CHIP Development & Execution

Eliminate Youth Suicide
Promote Positive Mental Health

CHIP Workgroup
Youth Age Band

Improve Residents' Determinants of Health - Housing
Improve service gaps for Medical & BH Care

CHIP Workgroup
Working Age

Assess & address gaps to the
support of County Seniors maintaining
highest functional level possible

CHIP Workgroup
Older Age

Behavioral Health Consortium (BHC)

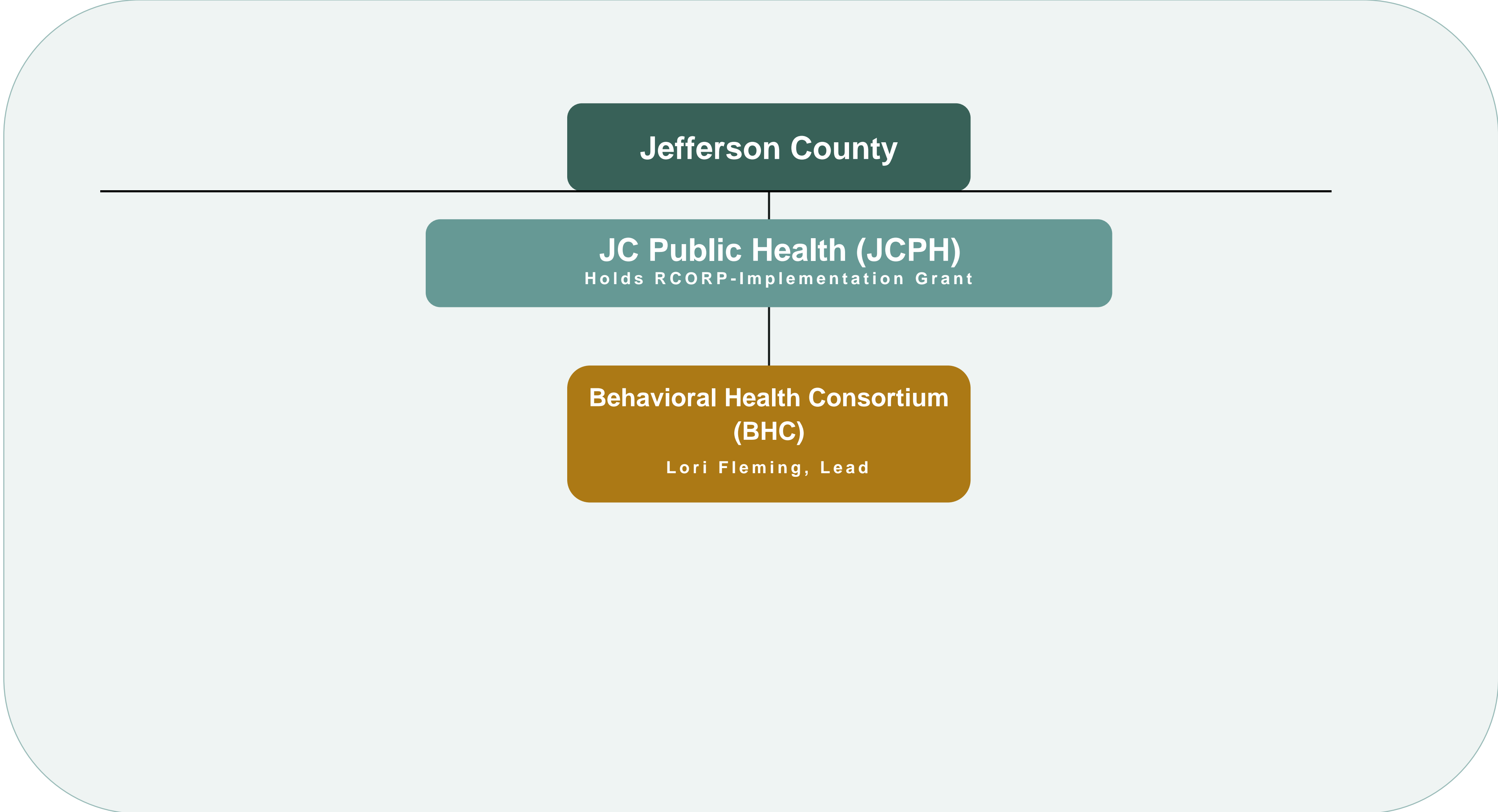
Funded by HRSA RCORP-Implementation Grant

- South County Harm Reduction Effort
- Pre Hospital BH Summit – led by Dr. Carlbom
- Data Collection, Analysis, Action Development
- Communications Campaign – Stigma, HR, BHC
- Provider / Prescriber Integration
- Coordination across Navigator Resources
- Friendly Faces - Care Coordination



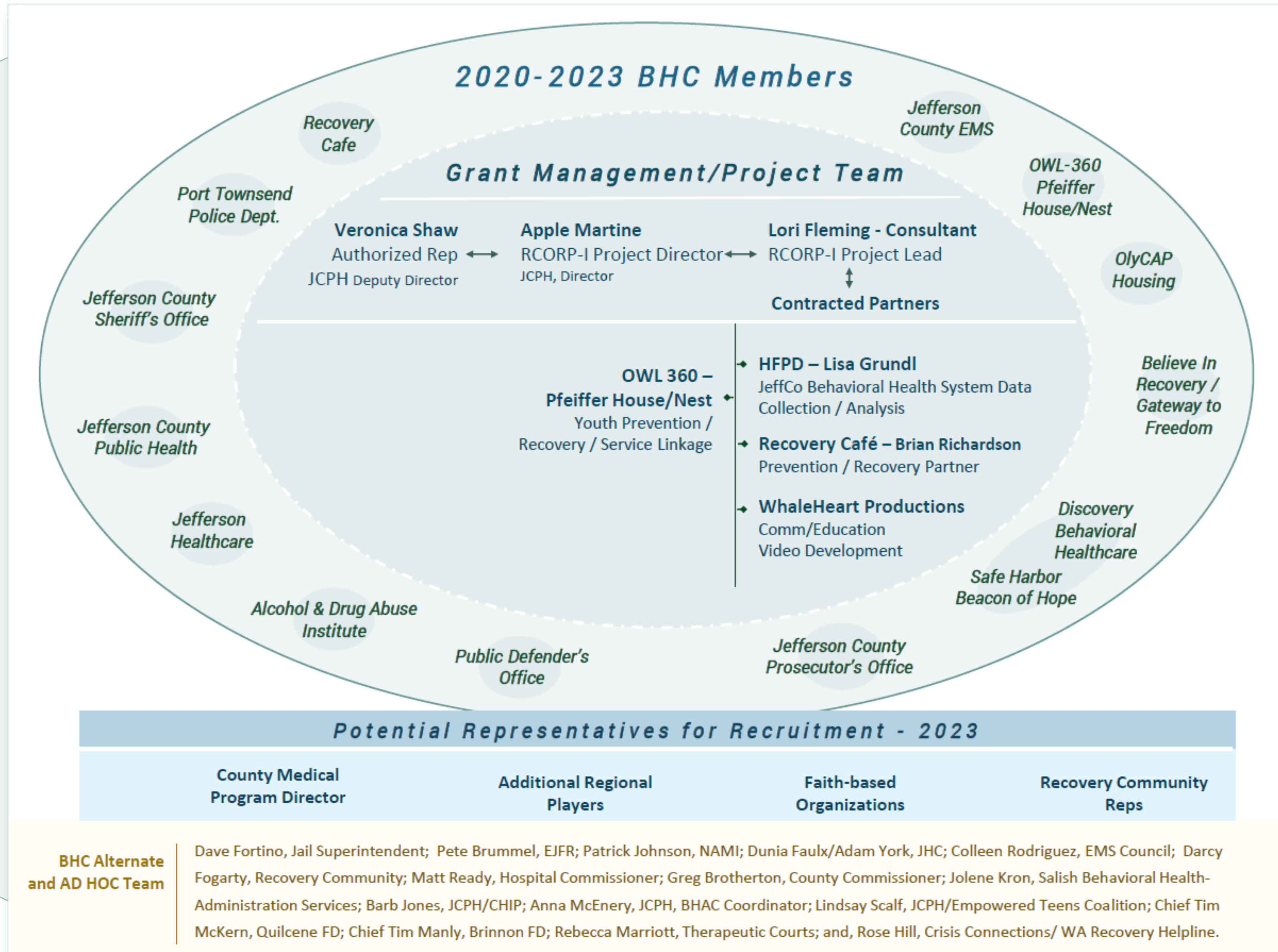


Reporting Structure as of 11/2022





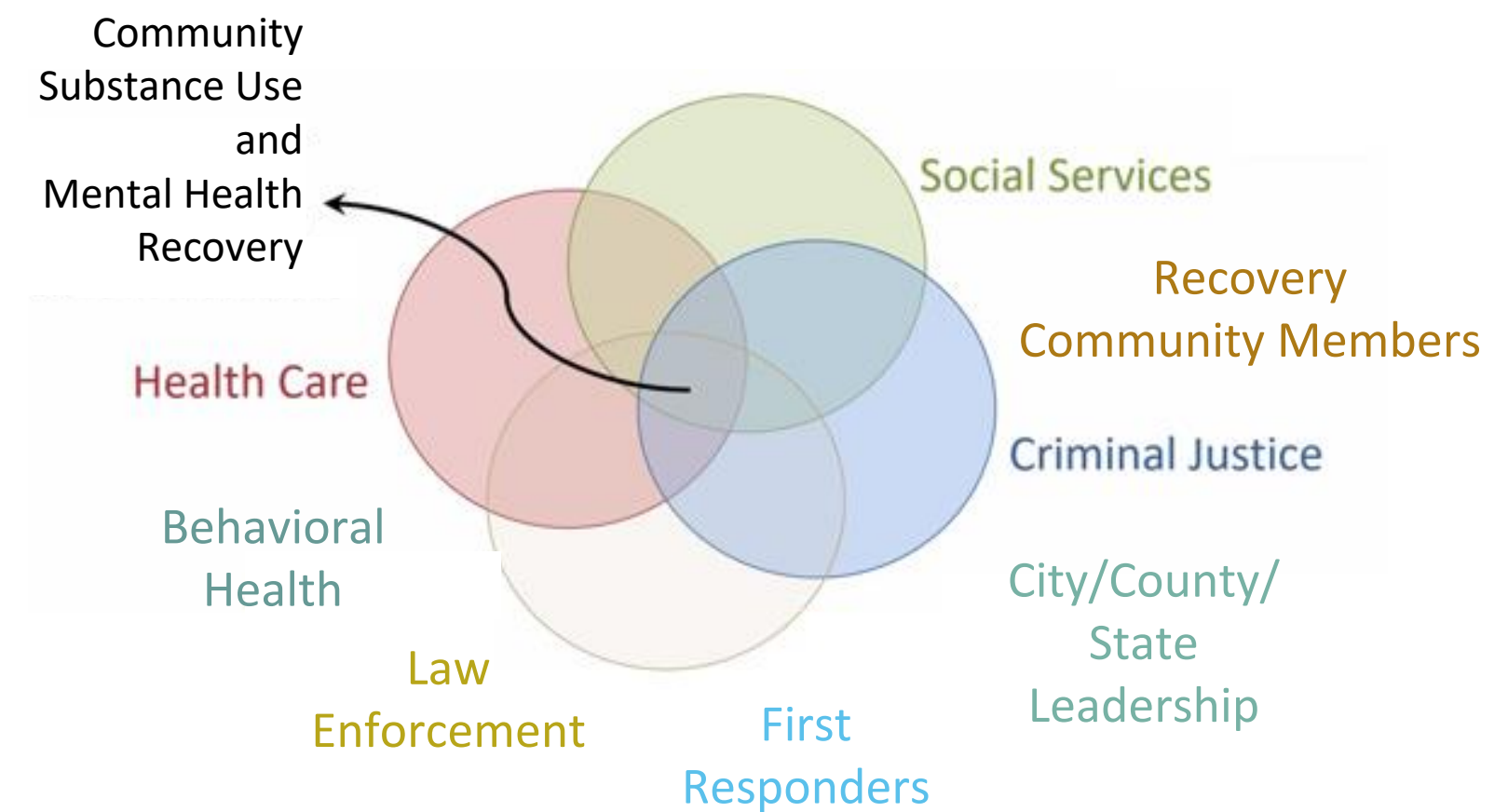
Overview: Behavioral Health Consortium (BHC)





BHC Uses a Systems Approach For Results

How to Improve Jefferson County's Behavioral Health Recovery Rates?



Systems Mindset

Recognition that a trend over time is the result of a system. Every system is perfectly designed to get the results it gets.

Systems Thinking

The skill of discerning the system that drives given results

Barriers to Systems Thinking

- Limits to cognitive capacity
- Limits to information access
- Cognitive bias
 - Selective Memory
 - Confirmation Bias
 - Short-term thinking
 - Overgeneralizing

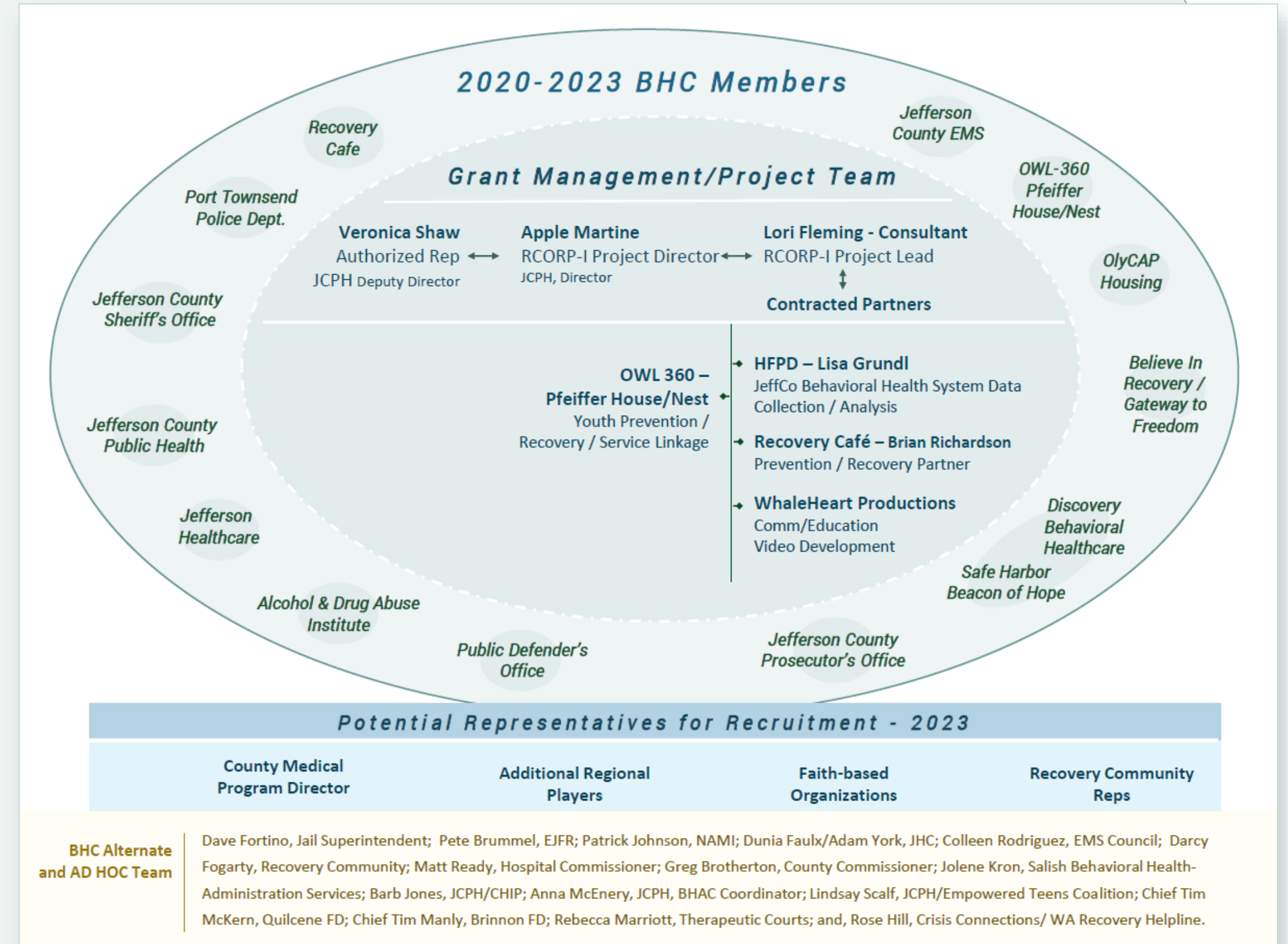




Overview: Behavioral Health Consortium (BHC)

CHIP: Procured \$1.3M in Planning and Implementation Grants to address 2016 CHIP Mental Health and SUD Priority

- **A Table:** Where Behavioral health-relevant agencies and representatives develop awareness of each other's roles and priorities; develop and execute collaborative, coordinated strategies toward the collective's goal of improved access to local behavioral health services and eliminating substance overdose deaths. Additionally, supports a monthly South County Harm Reduction Table.
- **Data Subgroup:** Interagency leaders cooperatively share data at six-month intervals for collective analysis and interpretation; develop/update collective baseline and insight to the opportunities and impacts of our local level's behavioral health crisis need and actions.





Overview: Behavioral Health Consortium (BHC)

Procured \$1.3M in Planning and Implementation Grants to address 2016 Plan's Mental Health and SUD Priority

- Strategic Action:** Facilitates cross-sector strategic planning, execution, tracking, and plan updates
 The BHC has threaded continuity throughout leadership transitions; participated in ICG Panel; and led the two Housing Taskforce RFP Panels in 2021.
- Program Funding:** Grant funds support the BHC's overhead costs, specific prevention, treatment, and recovery programs, and service wraparounds for Jefferson County residents through August 2023.

08/31/21 - Q4 Update: Jefferson County of (BHC) RCORP-I - Treatment Work Plan - Grant # GA1RH39564

TASK NAME	START	END	TEAM MEMBER	Yr 1 Q1	Yr 1 Q2	Yr 1 Q3	Yr 1 Q4	Yr 2 Q1	Yr 2 Q2	Yr 2 Q3	Yr 2 Q4	Yr 3 Q1	Yr 3 Q2	Yr 3 Q3	Yr 3 Q4
				YEAR 1 - 2020 - 2021				YEAR 2 2021 - 2022				Year 3 2022 - 2023			
Treatment															
Reduce treatment barriers treatment by supporting integrated treatment and recovery, including integration with behavioral health, criminal justice system, dentistry, and social services. Use approaches that minimize stigma/other barriers to care - Cont'd	Q1 2021	On-going													
g. Contribute to funding a Recovery Café Advocate role, ⇒ Work with individual to leverage Café as an intercept point to connect and integrate Recovery Café clients into wraparound social, medical and behavioral health-related services, ⇒ explore engaging providers to do bio-psych assessment services in a private room at the Café.	Q1 2021	On-going	Recovery Café, BHC, Grant Team					Work with leaders to determine role	Position staffed	Develop Comm Plan					Long term plan in place
Y1Q4:Update:Trmt4g. - Some successes we've had this Quarter: Remaining open despite ever-changing COVID rules and restrictions. Increased our weekly Recovery Circles to 6. Hired a Kitchen Lead staff person. We also just recently started a partnership with Bayside Housing by having one of their Case Managers on-site at Recovery Café every other week to assist Members with housing applications.															
Activity Metrics: By 2022 decrease the number of Behavioral Health patients being seen by EMS and Law Enforcement by 10%, By 2025 reduced rates of incarceration for those with behavioral health issues by 10%, By 2025 reduced use of hospital ED for those with behavioral health needs by 10%.	On-going	On-going	Grant Team	On-going					On-going						On-going

EJFR CARES Program	\$46,000.00	\$0.00	\$0.00	\$0.00	\$46,000.00	Funding for 2 months of newly established CARES Program
Whaleheart Productions	\$11,865.00	\$0.00	\$0.00	\$0.00	\$11,865.00	Original Budget \$11,865 Approved 2/2023 Harm Reduction & Naloxone Education Video
Total Contractual	\$398,326.68	\$33,335.78	\$81,813.83	\$67,386.26	\$281,407.85	\$47,684.37

*Note: OWL360 underspent \$16,196.88 in Y2				Remaining Funds to be Budgeted	
Hence Indirect underspt	\$	5,390.32		Total Remaining	\$73,278.36
Revised Direct to be Budgeted		\$32,694.44		Direct to be budgeted	\$48,891.32
Revised Indirect		\$18,996.72		Indirect Costs	\$24,387.04



Overview: Behavioral Health Consortium (BHC)

CHIP: Procured \$1.3M in Planning and Implementation Grants to address 2016 Plan's Mental Health and SUD Priority

- **Workflow:** Provides and facilitates a quarterly Behavioral Health Summit, led by Dr. David Carlbom, Jefferson County's Medical Program Director, where county-wide EMS, Law Enforcement, Hospital Emergency Department and service provider representatives work through new workflow patterns in response to legislative changes (HB1310).
- One goal is a ratified Frontline Team Guide, outlining a collective approach to improve response to resident mental health and substance use disorder needs within the current legal frameworks.

Last Revised:	February, 2021	REVIEW:	
APPROVED:		Dr. David Carlbom, Medical Program Director	
APPROVED:		Laurie Tinker, E. Jefferson EMS Council Chair	

Purpose

To establish and ensure a consistent response to behavioral health emergencies throughout E. Jefferson County, emphasizing patient, provider, and community safety, while ensuring dignity for individuals experiencing behavioral challenges from mental health disorders or substance use disorders.

Individuals Impacted

- EMS Response Personnel
- E. Jefferson County Law Enforcement
- Behavioral Health Providers
- Receiving Medical Facilities

Policy

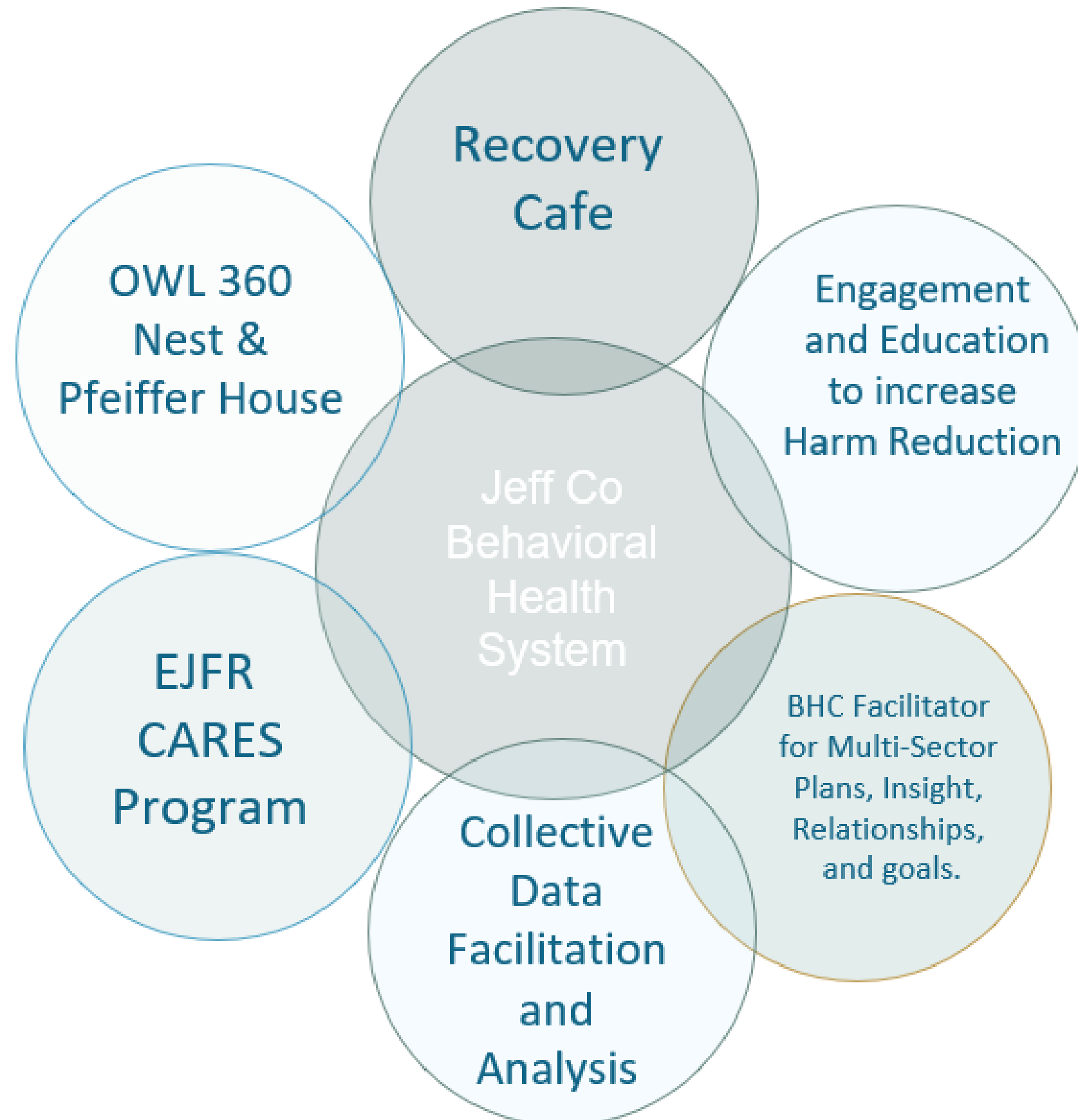
E. Jefferson County EMS providers will safely and appropriately assist patients experiencing behavioral health crises within their scope and training level. This assistance includes collaborating with Behavioral Health professionals and Law Enforcement to provide on-scene assessment, interventions, triage, transport to appropriate facilities, and specialized follow-up care where available.

This policy is not intended for use in the wilderness setting where resources are unavailable.

This policy is not intended to replace individual agency response policies and procedures but to provide guidance to member agencies and field providers.



BHC's Monetary Support Toward a Seamless BH System



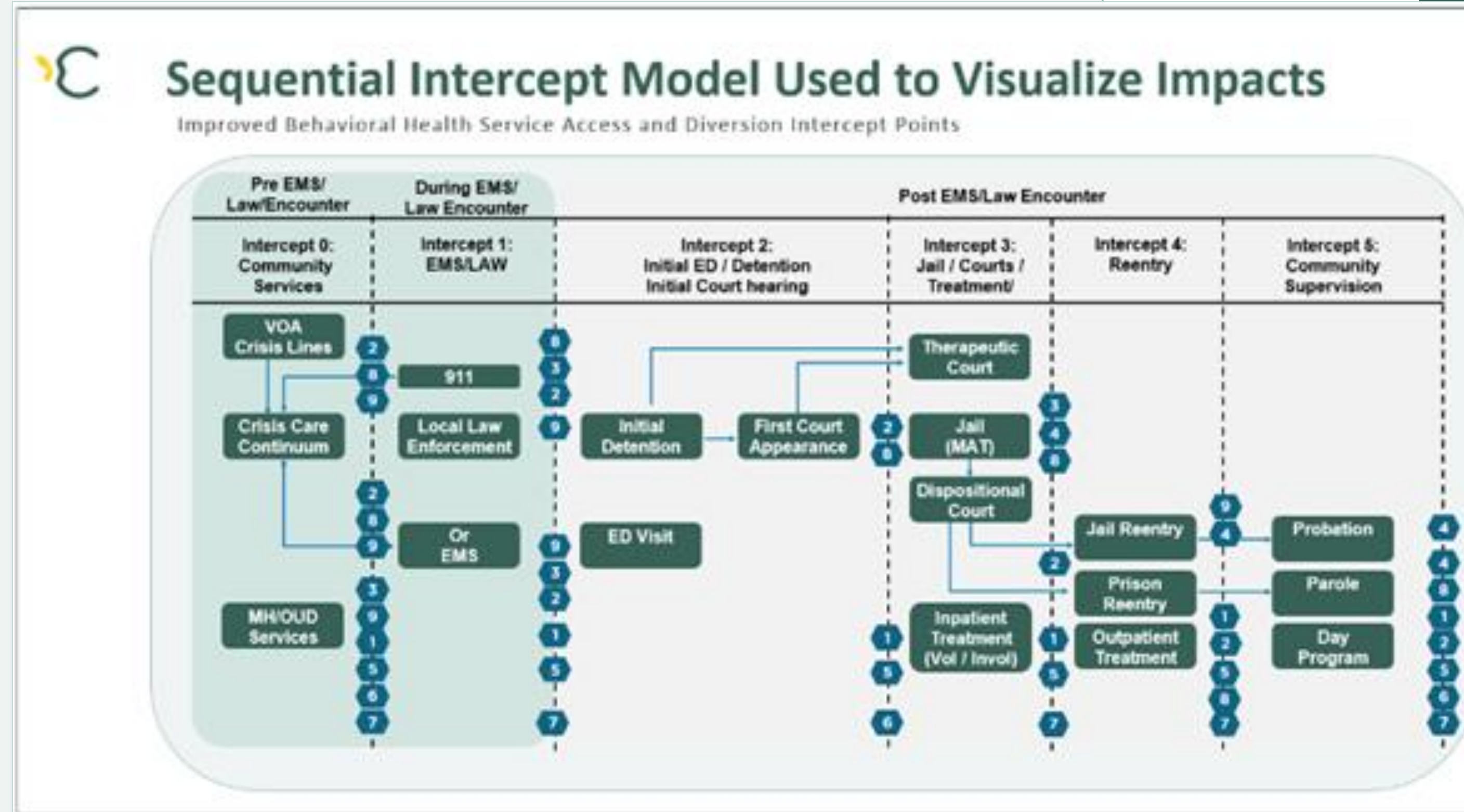
PROGRAM	FUNDED 09/01/2020 - 08/2023
RECOVERY CAFÉ / DOVE HOUSE	\$180,076.72
OWL 360 - PFEIFFER HOUSE / NEST	\$127,000.00
HFPD - DATA ANALYSIS & STRATEGY	\$ 33,940.00
ANYA CALLAHAN COMM/EDUCATION/ENGAGEMENT	\$ 20,445.00
COMMUNICATIONS WEBSITE TECH/GRAPHICS	\$ 14,463.00
EJFR CARES PROGRAM	\$ 46,000.00
SOUTH COUNTY HARM REDUCTION & ADDITIONAL COUNTY EMERGENCY NALOXONE BOXES/SUPPLIES	\$ 25,000.00
WHALEHEART PRODUCTIONS	\$ 11,865.00
TOTAL PROGRAM ALLOCATIONS TO DATE	\$458,789.72





BHC Projects Update - August 2023

- ✓ 1. Increase Integration of Behavioral Health Therapy Provider and MAT Prescription
- ✓ 2. Gather/Analyze collective Data to provide baseline and feedback to measures implemented
- ✓ 3. Develop/maintain [online](#)/printed Resource Directory
- ✓ 4. Improve Jail-to-Community service connection
- ✓ 5. Fund Recovery Café for peer network development and recovery/prevention environment
- ✓ 6. Fund OWL360 for Youth Housing/Recovery/Prevention environment
- ✓ 7. Extend Harm Reduction Program Services into South County
- ✓ 8. Execute communication/education/integration efforts to address regional stigma
- ✓ 9. Coordinate and optimize navigator and care coordination services
- ✓ 10. Initiate collective case management for high utilizers of law/Hospital/EMS services





BHC's Sustainability Overview

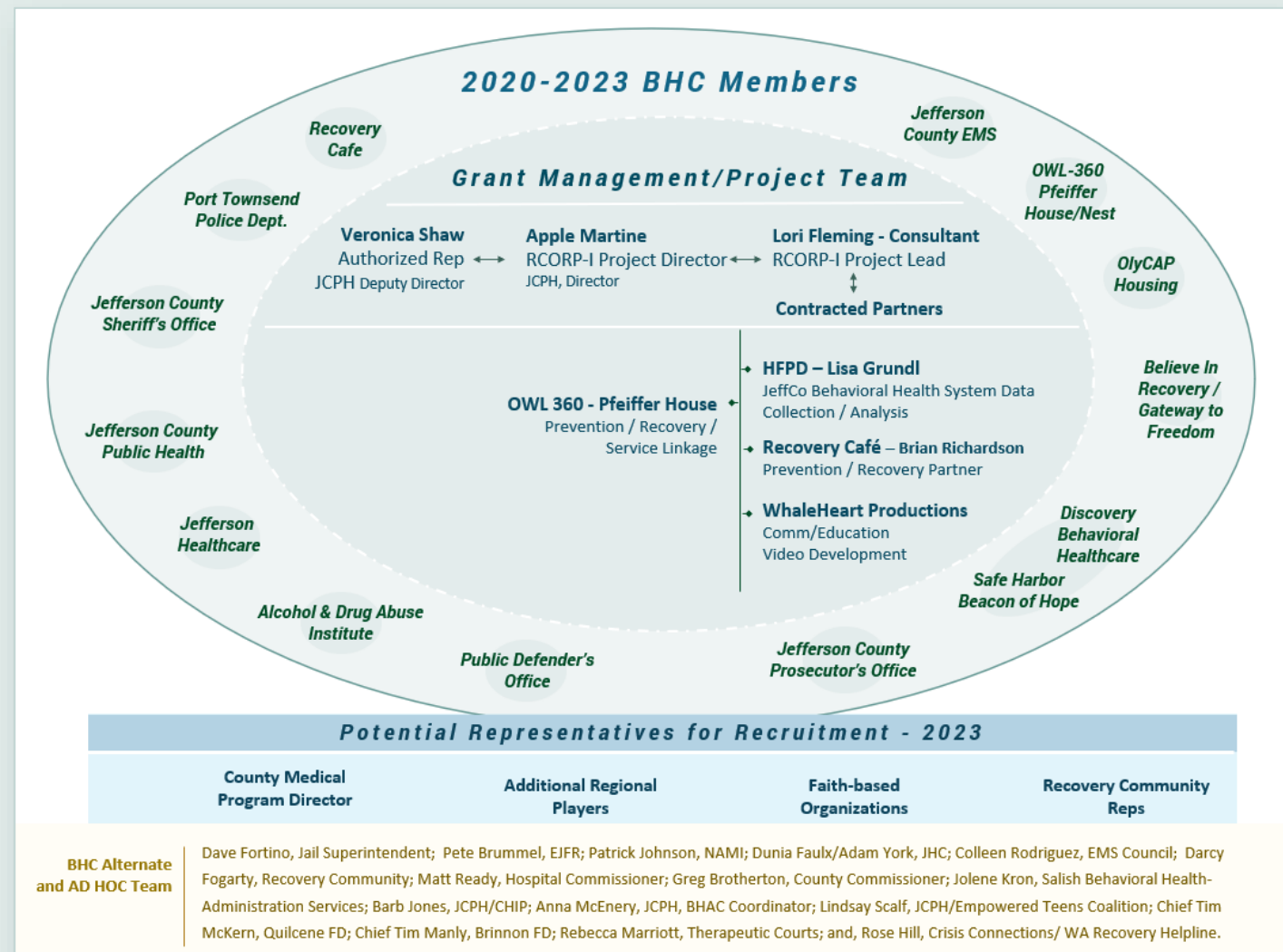
- RCORP-Implementation grant's 12-month No Cost Extension (NCE) has been approved through August, 2024. Note: The NCE does not provide additional funding from HRSA, yet it allows the BHC to complete unfinished projects and report final outcomes after the projects are completed
- The BoCC hosted a workshop with key players and ultimately approved a portion of the Opioid Settlement funds in the amount of ~\$50k/year to be allocated to DBH for 16 years. DBH will act as a pass-through to retain support services for the BHC table to function in a "Leadership, Planning and Coordination" role for Jefferson County's prevention, treatment, and recovery response to the opioid challenge.
- We will continue to work to identify and pursue grant funding on behalf of the BHC to support the collective planning and implementation of collaboratively prioritized action to improve the county's behavioral health system.





Transition: Opioid Settlement Funding for BHC Table

The BHC has received a No Cost Extension to continue project work through August 2024, and will receive Opioid Settlement Funding for the foreseeable future to support continued leadership, planning, and coordination of BHC members toward the collaborative development and fund of a collective seamless behavioral health system that allows our community members to navigate smoothly to needed services





BHC Sustainability – HRSA RCORP-I Grant NCE



NCE Work Plan

While this extension does not provide additional funding, it ensures:

- OWL 360 has one more guaranteed year to use the newly-purchased-with-grant-funds Youth Transportation vehicle
- The BHC completes work in South County and thoughtfully evolves the SCHR table to the next phase
- Data snafus get squared away and we get another opportunity for trend data analysis and insight generation before we provide HRSA with reports covering final outcomes for their investment.

This Work Plan is provided in support of this application for 12 Month No Cost Extension (NCE) to cover September 1, 2023 through August 31, 2024
Grantee: Jefferson, County of, Award #: GA1RH39564

Updated Work Plan for Snohomish County Health Department RCORP-I Grant NCE

Activity	Status	Revised Completion Date
Utilize newly purchased Youth Transport Vehicle for the NCE period for as long as possible before HRSA potentially asks for relinquishment of the vehicle.	In Progress	08/31/2024
Restore data integrity to the July '22-May '23 Law Enforcement data, and then HFPD, our data contractor, will complete their funded contract using accurate data to analyze, conduct trend analysis, and generate insights with and across our Behavioral Health Consortium (BHC) Membership. Continue data collection, analysis and insight generation at 6-month intervals during the NCE period.	In Progress	08/31/2024
Execute expanded community engagement effort before installing multiple smaller Naloxone boxes in various parts of the county.	In Progress	08/31/2024
Complete Grant Reporting requirements as the above activities are completed.	In Progress	08/31/2024





Transition: Next Steps With the the BHC's SCHR Table?



ENTER Holly Gumm and Scott Waller, from WSU, to facilitate a Ripple Effects Mapping Session!

- On August 22 @ 1pm the SCHR group will discuss:
 - What do you see as the purpose for the SCHR?
 - Please share about a conversation you have had about SCHR with people who are not part of the SCHR group?
 - What value has participating with SCHR brought to you professionally and/or personally? What would you like the SCHR group to look like and do going forward?
 - What events or developments could strengthen what SCHR does?
- The process is facilitated by Scott Waller, using the Appreciative Inquiry method, with Holly Gumm mapping the discussion.
- Post meeting Holly/Scott will re-listen to the discussion recording, develop a final Ripple Effects Map (visual) and provide a written final report narrating the process, the appreciative inquiry questions used, topics highlighted, insights gained, and possible recommendations that set a baseline so we can...
- We will revisit after a year has passed – to characterize the impact of the SCHR table, the Emergency Naloxone Box project, etc.





Transition: Next Steps With the BHC's Data Subgroup?



Restore Data Integrity from June 2022 to present

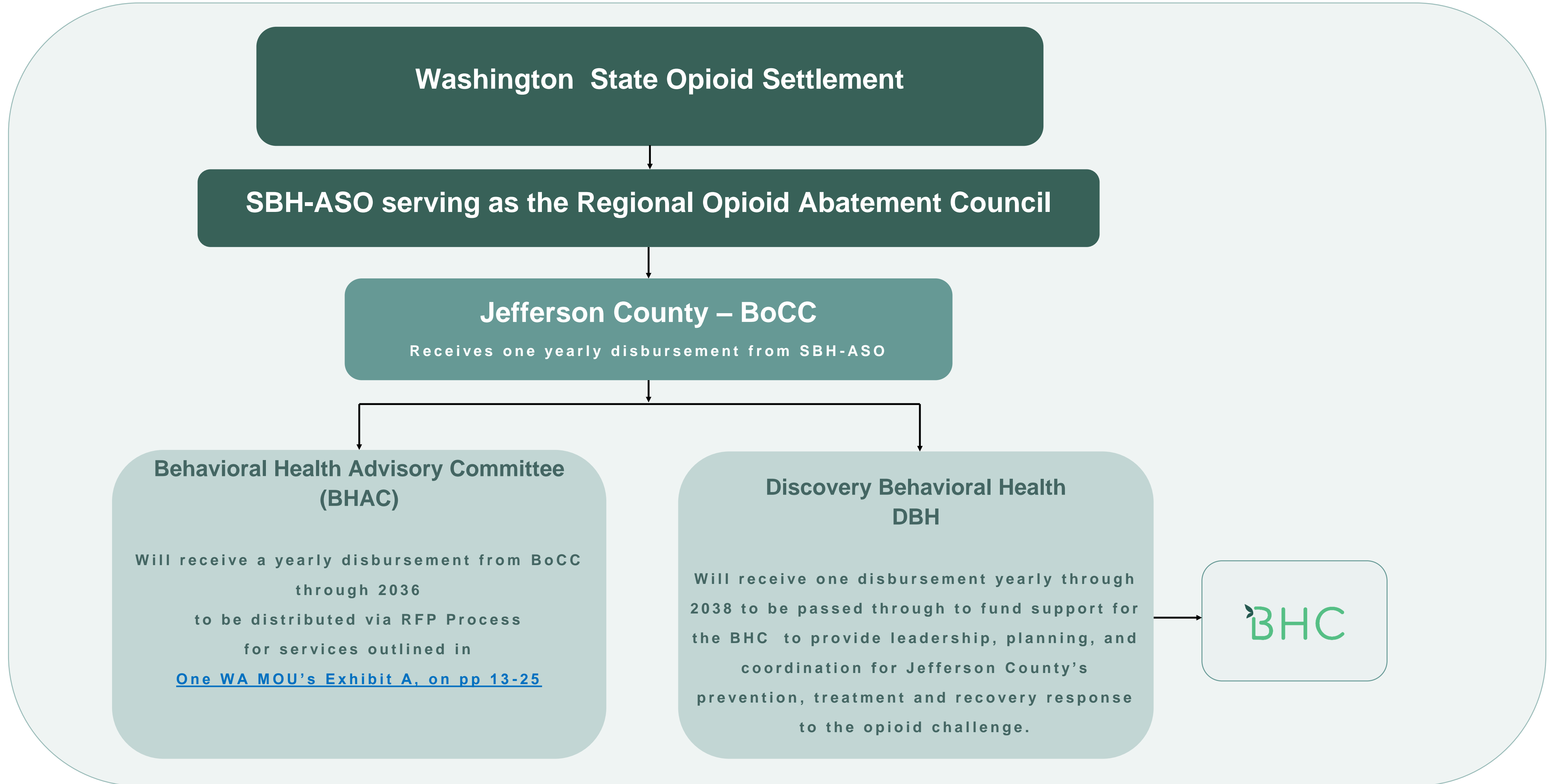
Determine next steps on BHC data collection, analysis, and insight generation

- Will send out Doodle poll to subgroup members and potential new members to set a timeslot for our next meeting. (Offering time slots for choosing one on either October 16th, 17th, 19th, or 20th.) Agenda will include:
 - Sharing of updates/next steps on data integrity restoration process
 - What do you see as the purpose for the Data subgroup?
 - Share about a conversation you have had about Data with people who are not part of the Data group?
 - What value has participating with Data brought to you professionally and/or personally?
 - What would you like the data subgroup to look like and do going forward?
 - What events or developments could strengthen what data subgroup does?
- Lori will generate next steps for this subgroup based on the October 2023 meeting
- We will revisit after a year has passed – to characterize the impact of the Data subgroup





Pathway for Opioid Settlement Funds Coming into Jefferson County





Current Opioid Settlement Funds

APPENDIX A
OPIOID SETTLEMENTS ESTIMATED ANNUAL PAYMENTS
JEFFERSON COUNTY, WASHINGTON

ESTIMATED ABATEMENT PAYMENTS*							
Payment Year	Distributor	Janssen	WalMart**	Allergan	Teva	CVS	Walgreens
2022	\$70,766.72						
2023	\$36,262.38		\$71,485.24	\$13,265.27	\$11,989.61	\$14,744.11	\$28,716.20
2024	\$45,387.50		\$27,013.38	\$13,265.27	\$11,989.61	\$11,754.75	
2025	\$45,387.50		\$28,043.55	\$14,145.35	\$11,989.61	\$23,490.87	\$11,417.98
2026	\$45,387.50		\$1,030.17	\$15,606.21	\$11,989.61	\$23,490.87	\$11,417.98
2027	\$45,387.50		\$1,030.17	\$15,606.21	\$12,257.83	\$26,964.61	\$11,417.98
2028	\$60,295.72		\$1,030.17	\$15,606.21	\$14,105.43	\$27,636.32	\$11,417.98
2029	\$62,801.38			\$15,606.21	\$14,105.43	\$26,255.60	\$11,729.39
2030	\$62,801.38				\$14,105.43	\$24,874.88	\$20,350.85
2031	\$52,790.90				\$14,105.43	\$24,852.97	\$20,350.85
2032	\$52,790.90				\$14,105.43	\$24,852.97	\$20,350.85
2033	\$52,790.90				\$14,105.43		\$20,350.85
2034	\$52,790.90				\$14,105.43		\$20,350.85
2035	\$52,790.90				\$14,105.43		\$20,350.85
2036	\$52,790.90						\$40,701.69
2037	\$52,790.90						
2038	\$52,790.90						
Totals:	\$896,804.78		\$129,632.68	\$103,100.73	\$173,059.71	\$228,917.95	\$248,924.30

* Local Government allocation of LG Share (50%) of Washington State Base and maximum Incentive Abatement Payments less estimated Government Fee Fund withholding.

**Worst case maximum payment scenario. WalMart payments may be completed in as few as 3 years.

Opioid Settlement funds to be disbursed (less 10% for Opioid Abatement Council costs*) from BoCC over 16 years as a pass through from DBH to BHC for to provide leadership, planning and coordination for Jefferson County's prevention, treatment and recovery response to the opioid challenge; and to search for and pursue additional collective funding for collaboratively defined priorities.

Opioid Settlement funds to be disbursed (less 10% for Opioid Abatement Council costs*) from the BoCC to the BHAC over 14 years to be distributed via an RFP process for services outlined in One WA MOU's Appendix A. Additional pharmaceutical settlement fund amounts will likely be added to the funds shown to date.

*The 10% of funds amount will be held until the costs associated with administration of these funds is clear. If there are remaining funds, those will also be distributed to the BoCC and on to the BHAC and to DBH-for-BHC.

Resources

[WA State's 2021-22 Opioid and Overdose Response Plan](#)

[WA DOH Overdose Prevention, Recognition and Response web page](#)

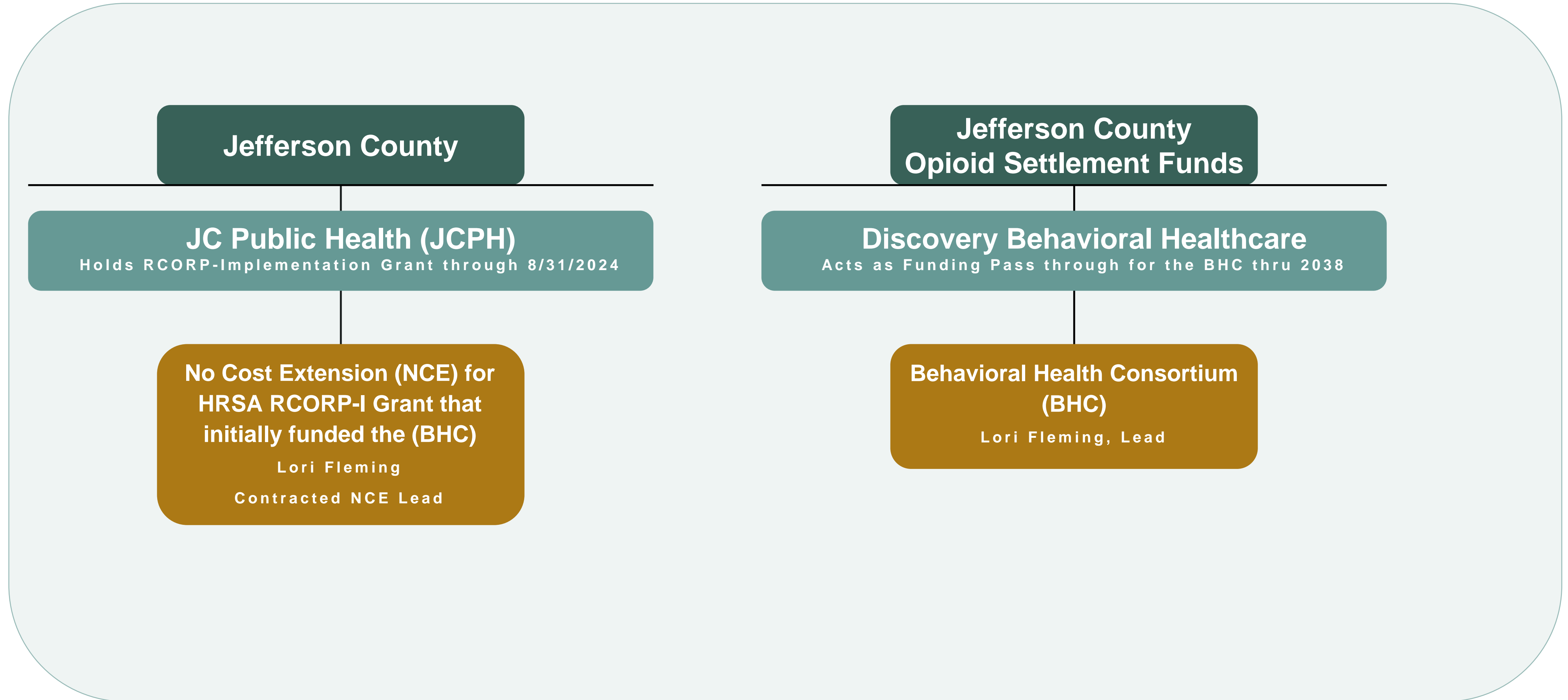


BHC – What Happens Now and Next?





Dual Reporting Structures as of 09/2023





Updates: OAC Funding & Next Steps

Build Organizational Infrastructure

- **Conduct Strategic Planning** to inform 2024 actions
- **Establish and Formalize BHC Phase 2** with MOU that includes governance, bylaws, meeting attendance requirements, and any relevant Data Sharing Agreements
- **Review BHC Members and Recruit** where needed
- **Develop and institute an MOU that structures the BHC/BHAC linkages**
- **Build website**

Advance BHC Initiatives

- **Provide leadership, planning, and coordination** for Jefferson County's prevention, treatment and recovery response to the opioid challenge
- **Pursue funding** to identify and plan interventions that advance the enhancement of patient care coordination across the care continuum: from pre-hospital care to post-acute discharge. (RHNDP-P App submitted 1/2024)
- **Execute Community Conversations** effort throughout Jefferson County

Payment Year	Distributor	
2022	\$70,766.72	✓
2023	\$36,262.38	✓
2024	\$45,387.50	
2025	\$45,387.50	
2026	\$45,387.50	
2027	\$45,387.50	
2028	\$60,295.72	
2029	\$62,801.38	
2030	\$62,801.38	
2031	\$52,790.90	
2032	\$52,790.90	
2033	\$52,790.90	
2034	\$52,790.90	
2035	\$52,790.90	
2036	\$52,790.90	
2037	\$52,790.90	
2038	\$52,790.90	
Totals:	\$896,804.78	

\$96,326.19 was transmitted to DBH for “2022-2023 Opioid Settlement”. This funding will support BHC Administration and Initiatives through 9/2024.



Opportunity to Build on Respective Strengths



BHAC

- Distributes 1/10th of 1% funding to the County's behavioral health service providers and programs.
- Hosts dashboard and collects data specific to BHAC-funded service providers and the services they provide with awarded funds, such as: Raw number of individuals served by the program; Basic client demographics; Number of individuals referred to: mental health services; substance use services; housing or social services; medical services; diverted from emergency services
- Will now additionally distribute Opioid Settlement funds focused to: Treat opioid use disorder; Support people in treatment and recovery; Provide connections to care; Address the needs of criminal justice involved persons; Address the needs of pregnant and/or parenting individuals and families; Prevent over-prescribing and ensure appropriate use of opioids; Prevent misuse of opioids; Prevent overdose deaths and other harms; and to first responders

BHC

- A focused collective effort to support the development of a seamless behavioral health system that allows our community members to navigate smoothly to needed services. The BHC includes County agencies (i.e. hospital, public health, law enforcement, EMS, Public Defense, and Prosecutor's office) and local service organizations who collaboratively assess behavioral health landscape, set priorities, and pursue then provide collective funding.
- Works with HFPD, data analysis consultants, to analyze pre-hospital and HRSA-PIMS-data from across BHC members, including law enforcement, hospital, EMS, and member service providers.
- Will step into a leadership, planning, and coordination role for Jefferson County's prevention, treatment, and recovery response to the opioid challenge.
- Will continue to identify and pursue grant funding on behalf of the BHC to support the collective planning and implementation of collaboratively prioritized actions to improve the county's behavioral health system



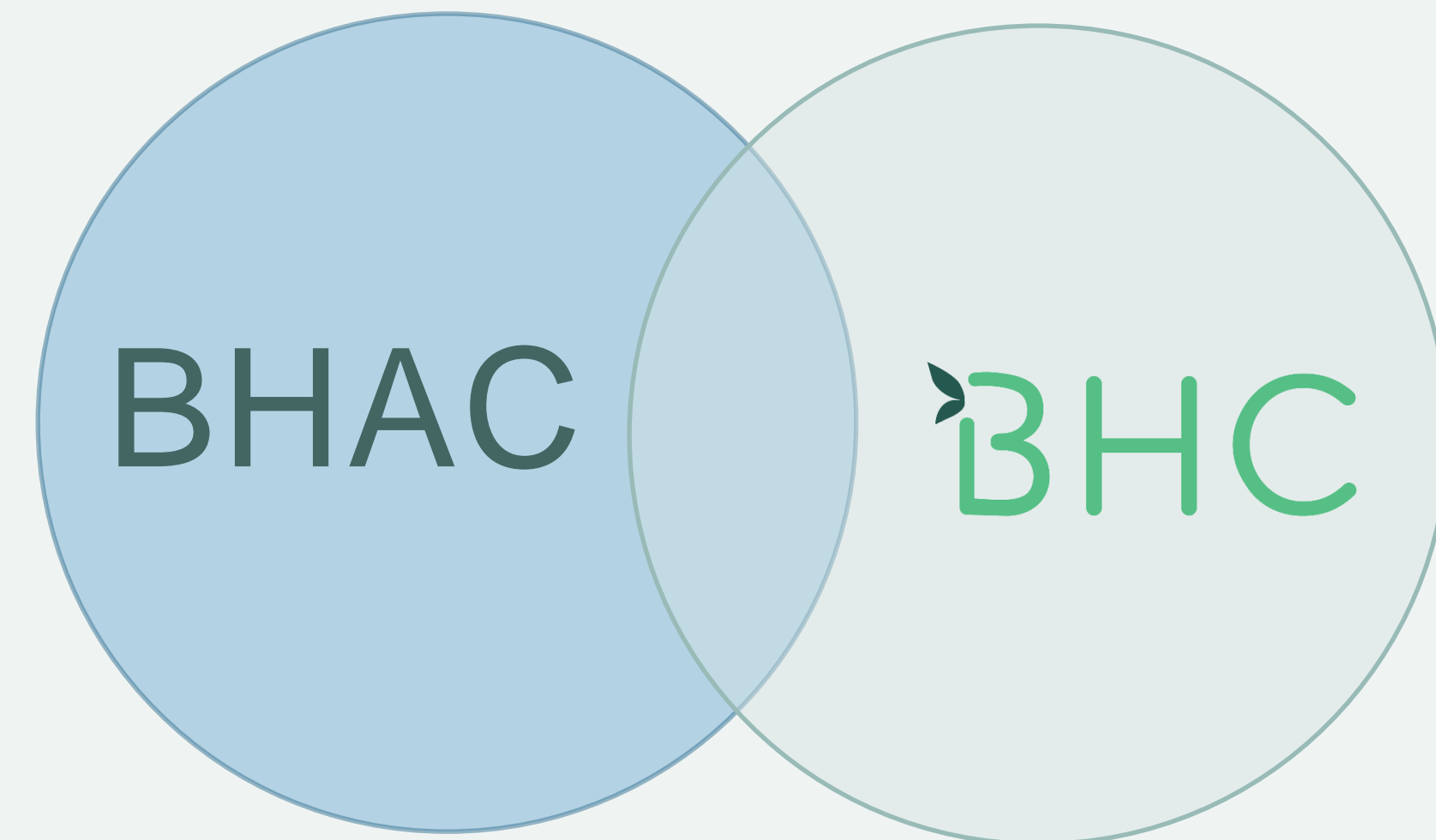


Moving Forward



An MOU will be developed to explicitly define the intentional ways the BHAC and BHC will be linked going forward, including:

- Bring BHAC on as a BHC member to facilitate knowledge and insight exchanges to optimize BHAC administration of funds supporting Jefferson County's behavioral health services.
- Maximize the impact of the BHAC and BHC's data collection efforts to generate collaborative analysis and insight generation to support priority-setting and follow-on action.





Jefferson County Patient Care Continuum Consortium (JCPCCC)

RHNDP-P Grant Funding Application Submitted January 2024

Proposed Outputs

- CHA Report focused on NTP's, MVPs, and D2Ds
- Interventions Report
- Strategic and Sustainability Plans

Proposed Outcomes

- Streamlined patient throughput and reduced unnecessary hospital visits
- Improved coordination and access for targeted patient groups
- Strategic framework for long-term improvements in rural healthcare.



Submitted by Jefferson Healthcare, on behalf of the Jefferson County Patient Care Continuum Consortium (JCPCCC), including Jefferson Healthcare, Discovery Behavioral Health Care, East County Medical Council, and Jefferson County Public Health.

This funding proposal aims to support the JCPCCC to create Strategic and Sustainability Plans focused on improving patient care coordination through data-based decision-making.

The planning effort proposed targets three specific groups:

- pre-hospital, non-transport patients,
- frequent emergency room visitors, and
- patients facing discharge challenges

Performance Period

July 2024 - June 2025

Budget

Personnel

\$64,238 for project direction and facilitation.

Travel, Supplies, and Other

\$5,000 for necessary operational expenses.

Contractual Services

\$26,000 for expert advisory, data analysis, and legal compliance.

Indirect Costs \$4,761.90

Total: \$99,999.90.





Update: Naloxone Box Installation – Other Locations?

The first 11 public access naloxone boxes are/will be placed:

1. Outside Believe In Recovery Offices
2. Recovery Café (up outside 24-hour access)
3. Port Townsend Library (inside by AED at checkout desk)
4. Port Hadlock Library
(Installed inside, at back of the library by the DVDs/Media, access during library open hours)
5. Quilcene Fire Station (up outside the front door 24-hour access)
6. Brinnon Fire Station (up outside the front door 24-hour access)
7. Quilcene community center (should be up any day)
8. Brinnon community center (should be up any day)
9. Tri Area community center (should be up any day)
10. Haines St. park and ride, transit station in PT. (Not up yet. Date TBD)
11. Four Corners transit station in Pt. Hadlock. (Not up yet. Date TBD)

Help us identify where additional boxes could be installed!

Ideas: DSHS, Water Street public restrooms, fairgrounds, boatyard, skatepark, Mountain View building





Update: JCPH's Harm Reduction Program

Jefferson County Public Health Harm Reduction / Syringe Exchange Program

Anonymous and confidential walk-in syringe exchange services.

615 Sheridan Street in Port Townsend

Services include:

Free sterile syringes in exchange for used syringes, secondary exchange, safer injecting supplies, glass pipes, naloxone, hygiene supplies, and healthcare referrals. Human immunodeficiency virus (HIV) and hepatitis testing is available by appointment.

Walk-in Hours:

M 2-4p, W 11a-1p, F 2-4p

New Mobile Service Coming to South County

- JCPH harm reduction services plans to expanding mobile presence to Port Hadlock, Quilcene, and Brinnon.
- Possible rotating mobile schedule in Port Hadlock and Brinnon, and planning weekly presence in Quilcene at the JCPH clinic space

Ways BHC Members Can Engage?

Help spread the word about our expanding services, brainstorm service locations and suggest/collaborate on outreach events as we set them up.

Naloxone Trainings

Given: Brinnon Community Center Senior Leadership Meeting, Quilcene Community Center, The Nest, Jefferson Teen Center, Olympic Educational Service District, Port Townsend School District, Quilcene School Board, OlyCap, Dove House, Jefferson County Library, Port Townsend Library, The Port of Port Townsend, Centrum, Jefferson County Courts, Jefferson County Board of Health, WA Department of Health, Port Townsend Farmers Market, Thing Music Festival, Med Takeback,

Scheduled: Tri Area Community Center 2/22 3pm, Port Townsend Library 4/18 5pm





Update: JCPH to use RiVive in Naloxone Packets

Why the Change?

DOH, who supplies JCPH with naloxone is switching to RiVive because it is available at a lower price point.

How is RiVive different from Naloxone?

RiVive is a lower dose naloxone spray than Narcan, but still effective at reversing an opioid overdose. RiVive is 3mg where the generic naloxone we currently get from DOH and Narcan are 4mg

Research Says?

Research has found that often times the increased amount of naloxone administered exceeded what was actually needed to reverse an opioid overdose. More research has emerged that knowledge of and access to naloxone were stronger factors in overdose survival than the amount of naloxone a person received during an opioid overdose emergency. Higher doses of naloxone increase the risk of precipitate or acute withdrawal in people who have overdoses. While not deadly, the rapid onset of withdrawal symptoms can include vomiting, diarrhea, sweating, nausea, and muscle aches, with some suggesting that fear of these effects may discourage some from administering naloxone at all.

The screenshot shows the RiVive website with a dark blue background and a hexagonal pattern. At the top left is the Harm Reduction Therapeutics logo. The main heading is "RiVive™ is FDA Approved". Below this is a central box titled "5 Key Steps In Case of an Overdose" with "ENGLISH" and "SPANISH" buttons. To the right is an image of the RiVive product box and a hand holding the spray. Text on the page includes: "FDA has approved over-the-counter RiVive™ (naloxone HCl nasal spray 3 mg) for the emergency treatment of opioid overdose." and "This critical milestone advances the pursuit of HRT's mission to prevent opioid overdose deaths by making free of charge or low-cost over-the-counter naloxone available to everyone across the United States." It also states: "HRT anticipates RiVive™ will be available by early 2024 primarily to U.S. harm reduction organizations and state governments for costs lower than other opioid antagonist nasal sprays." A small disclaimer at the bottom right reads: "No company, entity, or individual will profit from sales of RiVive™." The product description states: "RiVive™ (naloxone HCl nasal spray 3 mg) is a novel over-the-counter intranasal formulation of naloxone (3.0 mg) delivered as an atomized spray (0.1 ml) that can save lives. It uses an easy-to-use standard unit dose system for single administration for the emergency treatment of opioid overdose without a prescription. RiVive™ produces a 3-fold higher systemic exposure with comparable early absorption to the reference naloxone product, as well as robust Human Factors Validation work demonstrating that laypeople are able to administer RiVive™ in a simulated emergency overdose situation."

[Learn more about RiVive](#)



Update: Yellow Card – New Print Run

CRISIS – 911	
SUICIDE & CRISIS Lifeline –988	
NAT'L SUICIDE PREVENTION LIFELINE	988 Call Chat Text
SALISH REGIONAL CRISIS LINE	888-910-0416
TRANS LIFELINE	877-565-8860
LGBTQ SUICIDE HOTLINE	866-488-7386 Text: 678678
VETERANS CRISIS LINE	888-777-4443
NATIVE AND STRONG LIFELINE	866-491-1683
NEVER USE ALONE HOTLINE	800-484-3731 NeverUseAlone.com
DOVE HOUSE DV/SA	360-385-5291
WA RECOVERY HELPLINE	866-789-1511
PORT TOWNSEND POLICE	360-385-2322
JEFFERSON COUNTY SHERIFF	360-385-3831
JEFFERSON HEALTHCARE ER	360-385-2200x4221
CHILD PROTECTIVE SERVICES	866-363-4276
ADULT PROTECTIVE SERVICES	877-734-6277
DEPT HEALTH & SOCIAL SVCS	877-501-2233
HOUSING	
BAYSIDE	360-385-4637
COAST SHELTER	360-796-0420
OLYCAP	360-385-2571
OLYMPIC NEIGHBORS	360-344-2190
PENINSULA HOUSING	360-379-2565
NAT'L HOMELESS VETERANS	877-424-3838
TRANSPORTATION	
DUNGENESS BUS LINES	360-417-0700
ECHHO	360-379-3246
JEFF TRANSIT/DIAL-A-RIDE	360-385-4777
PARATRANSIT SERVICES	360-377-7007 800-756-5438
PENINSULA TAXI	360-385-1872
MENTAL HEALTH	
DISCOVERY BEHAVIORAL HEALTHCARE	360-385-0321
NAMI JEFF CO	360-385-1716

SUBSTANCE USE	
AA HOTLINE	360-385-0266
BELIEVE IN RECOVERY	360-385-1258
NARCOTICS ANONYMOUS	360-215-2616
HARM REDUCTION/SYRINGE EXCH	360-390-8405 615 Sheridan St, PT Mon 2pm-4pm / Wed 11am-1pm / Fri 2pm-4pm
REAL PROGRAM	360-302-6730
RECOVERY CAFE JEFF CO	360-385-5292
DBH SUD SERVICES	360-385-3866
OLYMPIC PENINSULA HEALTH (MAT)	360-912-5777
FOOD	
BRINNON FOOD BANK	360-701-0483 151 Corey Street, Brinnon / Tues 10am – 1pm
PT FOOD BANK	1925 Blaine St, PT Sat 11:30am – 2pm (65+) / Wed 10am – 3pm
TRI-AREA FOOD BANK	360-385-9462 760 Chimacum Rd, Hadlock / Wed 10am – 1pm
QUILCENE FOOD BANK	360-765-0904 294952 Hwy 101, Quilcene / Wed 11am – 2pm
JUST SOUP	Tues 11:30am – 1:30pm St Paul's Episcopal, 1020 Jefferson St, PT
LITTLE FREE PANTRY	1045 10th St, PT
RECOVERY CAFÉ HOT MEALS	360-385-5292 939 Kearney St, PT / Tues-Fri 12-2pm
OLYCAP FOOD TRUCK	Thursdays Mill Road 10-12p / Rhody Drive 1-3p
PHYSICAL HEALTH	
Jeff Co Public Health Clinic	360-385-9400 Text 360-774-0187 615 Sheridan St, PT M-F 9a-4:30p
FINANCIAL ASSIST	
ST VINCENT DE PAUL	360-379-1325
LEGAL	
JEFF ASSOC COUNSEL	360-385-5613
JEFF CO IMMIGRANT RIGHTS	844-724-3737
JEFF CO IMMIGRANT RIGHTS ADVOCATES (JCIRA)	Spanish/English Text or Call 360-232-6070
NW JUSTICE PROJECT	888-201-1014 M-F / 9:15am – 12:15pm
UPDATED FEBRUARY 2024	

We'll have a stock of 1,000 Yellow Cards by mid-February.

Please email Lori with the quantity you need to distribute through your channels, and Lori/Anyia will arrange delivery.





Update: Recruiting Business and Community Leaders to SCHR

BHC

Strengthen Jefferson County : A Call to Business and Community Leaders

Join Our Collaborative Effort for Community Well-being

The South County Harm Reduction (SCHR) Table, facilitated by the Jefferson County Behavioral Health Consortium (BHC), is a table of diverse stakeholders—spanning health institutions, mental health services, local hospitals, therapeutic courts, substance use counseling, emergency services, and law enforcement—united with a singular mission: to enhance the health and safety of our communities.

For three years, relevant BHC Members have been meeting monthly with key figures from South County, including school superintendents from Brinnon and Quilcene, EMS representatives, and the Sheriff. Our aim? To forge a safer, healthier future for our communities through dedicated efforts in harm reduction.

What is Harm Reduction?

Harm reduction (HR) is the SCHR table's guiding principle. We are implementing strategies to minimize health and social risks, embracing a range of safe practices from wearing seat belts and bike helmets to broader public health initiatives like ensuring Naloxone, a life-saving medication that can reverse opioid overdose, is available throughout South County. Harm reduction is about saving lives, curbing the spread of illness, and supporting those in need.

Partnership for Progress

Our achievements are a testament to what we can accomplish together:

- **Empowered Teens Coalition** In collaboration with Jefferson County Public Health (JCPH), we've fostered strong partnerships with local schools, nurturing a generation that's informed, resilient, and empowered.

The South County Harm Reduction Table has drafted a recruitment flyer content which will be finalized in the coming weeks.

Send your edits/insights on [this draft](#) to Lori.

[1/23/2024 SCHR Mtg Notes](#)



Update: BH Summit's Provider Crisis Resource List

Behavioral Health Crisis: [Salish Regional Crisis Line 1-888-910-0416](tel:18889100416)

Discovery Behavioral Healthcare DCR & MCOT

Programs below are not crisis programs.

Outreach Team Name	Days Available	Hours	Primary Referral Source	Phone
DBH REAL Team	M-Sun	24h / day	Any	360-302-6730
JCPH Syringe Exchange Program	M, W, F	M 2-4p, W 11a-1p, F 2-4	Any	615 Sheridan St
JCPH School Based Health	M-F	9-5	Any	380-390-8560 Call or text
Sheriff's Office Navigator	M-F	8-5	LE, EMS	JeffCom Non-emergency: 380-344-9779
EJFR CARES	M-Fri	8-4	EMS, LE	FireCARES@ejfr.org If urgent: JeffCom Non-emergency: 360-344-9779
Quilcene Fire CARES	M-Sun	24h / day	EMS	360-531-1495
JCPH Clinics	See below		Any	
JHC Clinics	See below		Any	

Behavioral Health Care

Physical Health Care

Discovery Behavioral Healthcare R.E.A.L Program

Our Mission: To improve the lives of the people we serve through Recovery, Empowerment, Advocacy, and Linkage, while promoting dignity, health, and self-sufficiency.

The R.E.A.L. Program provides community-based support to individuals in need and is:

- Is driven by harm reduction, trauma-informed, culturally inclusive principles.
- Is staffed by individuals with lived experience.
- Is voluntary.
- Is participant-driven, meeting people where they are.
- Is not time limited.
- Does not discriminate based on use status.

Priority Populations: Individuals with substance use or co-occurring needs, frequent contact with law enforcement or first responders, or who have had challenges accessing services under traditional service model.

How to Reach Us: 24 hours a day, 365 days a year: 360-302-6730. If no answer, leave a message.

Jefferson County Public Health Harm Reduction/Syringe Exchange Program

Anonymous and confidential walk-in syringe exchange services.

Jefferson County Public Health clinic at 615 Sheridan Street in Port Townsend

Services include free sterile syringes in exchange for used syringes, secondary exchange, safer injecting supplies, glass pipes, naloxone, hygiene supplies, and healthcare referrals. Human immunodeficiency virus (HIV) and hepatitis testing is available by appointment.

Walk-in Hours: M 2-4p, W 11a-1p, F 2-4p

Jefferson County Public Health Community Clinics

Services include annual exams & preventative health, birth control and family planning, STI testing & treatment, and sports physicals.

Port Townsend Clinic

615 Sheridan Street, Port Townsend
M 1p-4p, W 9a-4p, F 9a-4p
360-385-9400

Quilcene Clinic

294843 US-101, Quilcene (Medical Building behind Post Office on Rogers Street)
W 11a-12p, expanded W hours in summer
360-385-9400

Jefferson County Public Health School Based Health Centers

Jefferson County Public Health operates three School Based Health Centers (SBHC) in partnership with Jefferson Healthcare and the School Districts. SBHCs are clinics on the school campuses at Port Townsend High School (since 2008), Chimacum Jr/Sr High School (since 2008) and Quilcene School (since 2021). Comprehensive medical and mental health services are provided by licensed health care providers in confidential setting during school hours.

SBHCs provide access to health services to increase health equity and to reduce health-related barriers to academic and social success.

How to Reach Us: Call or Text: 360-390-8560 or call 360-385-9400 (messages are monitored M-F 9am-5pm)

Next steps content-gathering from LEADS/BIR/Outreach, then will print/distribute to providers.



BHC-Relevant Meetings from 11/09 – 2/7/2024

- 11/09 – BHC Meeting ([Packet](#), [Video](#), [Notes](#))
- 11/13 – OCH Board Meeting ([Packet & Minutes](#))
- 11/14 – State SSP Chat
- 11/14 – BHAC Meeting
- 11/17 – SCHR Meeting ([Packet](#), [Video](#), [Notes](#))
- 11/20 – BHC Data Workgroup
([Packet](#), [Data Update](#), [Video](#), [Padlet](#), [Notes](#))
- 12/05 – JeffCo EMS Council – [RHNDPP Pres](#)
- 12/08 – SBH-ASO Executive Board ([See pp 259-278](#))
- 12/21 – JeffCo Board of Health ([Video/Agenda](#))
- 01/04 – Monthly RCORP-I Grant Check-in ([Mtg Notes](#))
- 01/05 – SBH-ASO Advisory Board ([Packet](#))
- 01/08 – OCH Board Meeting ([Packet & Minutes](#))
- 01/09 – BHAC Meeting
- 01/10 – OCH Board Meeting ([Packet & Minutes](#))
- 01/17 – Clallam Resilience Explores JeffCo Needs
- 01/18 – JeffCo Board of Health ([Mtg Video/Agenda](#) and [OUD Response Notes](#))
- 01/23 – SCHR Meeting ([Notes](#))
- 01/24 – PT Library Staff & City Manager Naloxone Training
- 01/24 – BH Summit ([Crisis Response Graphic Draft Mtg Notes](#))
- 01/25 – Ground Pounders Meeting ([draft Notes](#))
- 01/29 – Community Conversations Planning ([Notes](#))
- 01/30 – Navigating Misinformation Webinar - ([Slides](#))
- 02/01 – Brinnon Seniors Group – Naloxone Training





Big Hairy Audacious Goals for a BHC/BHAC Retreat

- **Foster Mutual Understanding:** Establish a clear understanding of the roles, challenges, and perspectives of both the Behavioral Health Consortium (BHC) and the Behavioral Health Advisory Committee (BHAC).
- **Educate/Calibrate on JeffCo Opioid Crisis and Funding Sourcing:** Give overview information about the opioid crisis's impact in Jefferson County and the specifics of the opioid settlement funding.
- **Encourage Collaborative Relationships:** Create an environment that encourages open dialogue and relationship-building between members of BHC and BHAC.
- **Develop basic Tenets of BHAC-BHAC Linkage MOU:**
- **Develop Joint Strategic Initiatives:** Facilitate the brainstorming and initial drafting of collaborative project(s) or initiative(s) that both groups can agree upon and work together on.
- **Formulate Actionable Plans:** Guide participants towards developing actionable plans for addressing the opioid crisis, considering the unique contributions and limitations of each group.
- **Commit to Follow-Up and Implementation:** Ensure that the retreat concludes with a commitment to specific next steps, follow-up meetings, and a process for implementing the planned initiatives.





Acronym Sheet

BH – Behavioral Health

BHAC – Behavioral Health Advisory Committee

BHC – Behavioral Health Consortium

BoCC – Board of County Commissioners

CAP – Communication Action Plan

CARES – Community Assistance Referral & Education Service

DBH – Discovery Behavioral Health

DCR – Designated Crisis Responder

DUI – Driving Under the Influence

ED – Emergency Department

EJFR – East Jefferson Fire Rescue

EMS – Emergency Medical Services

JCPH – Jefferson County Public Health

JeffCo – Jefferson County

JHC – Jefferson Healthcare

JCSO – Jefferson County Sheriff's Office

HFPD – Health Facilities Planning & Development Consultants

HRSA – Health Resources and Services Administration

ITA – Involuntary Treatment Assessment

MAT – Medically Assisted Treatment

MH – Mental Health

MOUD – Medications for Opioid Use Disorder

NAMI – National Alliance of Mental Illness

OAC – Opioid Abatement Council (SBH-ASO)

OUD – Opioid Use Disorder

PTPD – Port Townsend Police Department

PWUD – People Who Use Drugs

RHNDP-P1 – Rural Health Network Development Program – Planning (HRSA Grant Awarded 2018-2019)

RCORP-P2 – Rural Community Opioid Response Program – Planning (HRSA Grant Awarded 2019-2020)

RCORP-I – Rural Community Opioid Response Program – Implementation (HRSA Grant Awarded 2020-2023 w/ 1 year No Cost Extension thru 8/2024)

R.E.A.L. – Recovery, Empowerment, Advocacy, Linkage

SBH-ASO – Salish Behavioral Health – Administrative Services Organization

SSP – Syringe Service Exchange

SUD – Substance Use Disorder

TBH – To Be Hired

VOA – Volunteers of America – Crisis Line (1-888-910-0416)

Vol - Voluntary

Invol – Involuntary



BHC – Slides of Interest





Overview of the BHC's HRSA RCORP-Implementation Grant

F O C U S

Improve access to behavioral health services throughout Jefferson County

Prevention

Treatment

Recovery

Jefferson County's

Behavioral Health Consortium Members

Alcohol & Drug Abuse Institute

Believe In Recovery/Gateway to Freedom

Discovery Behavioral Healthcare / Safe Harbor

East Jefferson Fire Rescue

Jefferson County EMS Council

Jefferson County Prosecutor's Office

Jefferson County Public Health

Jefferson County Public Defender's Office

Jefferson County Sheriff's Office / Jail

Jefferson Healthcare

OlyCAP

OWL360 – Pfeiffer House/Nest

Port Townsend Police Department

Recovery Cafe

Ad Hoc and Alternate Members: Dave Fortino, Jail Superintendent; Pete Brummel, EJFR; Patrick Johnson, NAMI; Dunia Faulx/Adam York, JHC; Colleen Rodriguez, EMS Council; Darcy Fogarty, Recovery Community; Matt Ready, Hospital Commissioner; Greg Brotherton, County Commissioner; Jolene Kron, Salish Behavioral Health-Administration Services; Barb Jones, JCPH/CHIP; Anna McEnery, JCPH, BHAC Coordinator; Lindsay Scalf, JCPH/Empowered Teens Coalition; Chief Tim McKern, Quilcene FD; Chief Tim Manly, Brinnon FD; Rebecca Marriott, Therapeutic Courts; and, Rose Hill, Crisis Connections/ WA Recovery Helpline.



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Required Core Grant Activities



Prevention

- P.1** Linguistic / Cultural Efforts to Reduce Stigma
- P.2** Increase Naloxone Access and Training
- P.3** Support Drug Take Back Programs
- P.4** Support School and Community Prevention Programs
- P.5** Improve ID/Screening for SUD/OD; provide referrals to providers, harm reduction, early intervention, treatment, and support

Treatment

- T.1** Screen/Provide/Refer Patients with infectious implications
- T.2** Recruit/Train/Mentor interdisciplinary teams of SUD/OD Clinical and Service Providers
- T.3** Increase # of providers and social service professionals who treat/identify SUD/OD through professional development and recruiting incentives
- T.4** Reduce Treatment Barriers
- T.5** Improve ID/Screening for SUD/OD; provide referrals to providers, harm reduction, early intervention, treatment, and support
- T.6** Train Providers and Admin staff to optimize reimbursement for treatment through proper coding/billing across insurances to ensure service provider sustainability
- T.7** Enable individuals, family and caregivers to find, access and navigate treatment for SUD/OD as well as home and community based services and social supports

Recovery

- P.1** Train Providers and Admin staff to optimize reimbursement for treatment through proper coding/billing across insurances to ensure service provider sustainability
- P.2** Enable individuals, family and caregivers to find, access and navigate treatment for SUD/OD as well as home and community-based services and social supports
- P.3** Support development of recovery communities, recovery coaches, and recovery community organizations to expand the availability of and access to recovery support services





November '22 BHC Meeting's Feedback Themes



See the full [feedback](#) gathered at our November 2022 BHC Meeting.

BHC Members see an opportunity to:

- Clarify “What am I offering here?”
- Expand focus on prevention possibilities
- Increase care coordination and sustainable systems for hand-offs between agencies
- Supplement 911 Resources more effectively
- Provide better support for remote communities
- Give more updates between our Monthly Meetings
- Address where competition distracts us from productive partnership to desired results
- Ensure we follow through on all the improvements we've made and don't go backwards
- Assess commitment level to continue funding the BHC table, the programs it supports, collective data gathering, and member efforts toward a seamless behavioral health system that supports improvement of Jefferson County's Behavioral Health Recovery Rates.
- Based on assessment above, clarify a sustainability plan





November '22 BHC Meeting's Feedback Themes



See the full [feedback](#) gathered at our November '22 BHC Meeting.

BHC Members appreciate:

- **Cross sector collaboration, networking and problem-solving to addresses a key community challenge**
- **The Shared Language and respect that has been developed over time**
- **Continued expansion and understanding of roles and capabilities of various programs**
- **Increased engagement with our community around harm reduction and recovery**
- **Leadership / Facilitation toward improved mental health and substance use recovery rates in Jefferson County**

