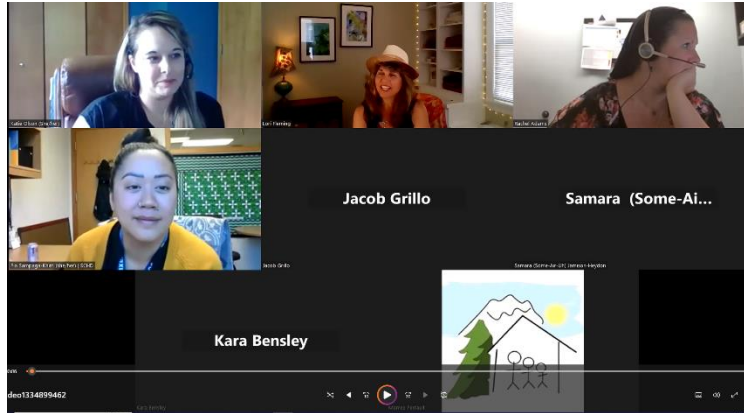


## ATTENDEES

Katie Olsen, Ideal Options; Rachel Adams, Monroe Human Services Coordinator; Pia Sampagha-Khim, SnoCo Health Dept; Jacob Grillo, Conquer; Samara Jamison-Heydon, SnoCo Health Dept; Kara Bensley, Providence Hospital; and Marree Perault, Darrington DPICC



Access the [Meeting Packet](#) and [MAC Framework that has been updated with input gathered from SHC Members](#) on how they perceive they could contribute to MAC's agenda. This updated MAC Framework was reviewed with MAC's David Fine on 7/31/2023.

Also please see links to the proposed No Cost Extension (NCE) [Cover letter](#), [Budget and Budget Narrative Worksheet](#), and [Work Plan](#) that are to be submitted to HRSA as soon as the new Grant # has been issued that moves the HRSA grant from the Health District to the Health Department.

## UPDATES

- Katie Olsen/Ideal Options: The ADA compliant Monroe Clinic on East Main Street is FINALLY set to launch on September 5<sup>th</sup>, 2023. Awaiting community response to help inform the launch effort.
- Rachel Adams: The National Night Out Against Crime is coming up.
- Jacob Grillo: Notes Conquer is a small small business trying to run a big operation. They have Psychiatry, MAT, Outpatient Treatment, and the Intensive Outpatient Treatment service is growing. They will be contracted through North Sound Behavioral Health Administrative Services Organization to be the Assisted Outpatient Treatment (AOP) provider for Snohomish County. Conquer will start taking referrals this Fall from the county to provide involuntary outpatient treatment for Substance Use Disorder (SUD) and mental health. Is interested to see how the "involuntary" approach works.
- Kara Bensley: Has transitioned from primarily being in an Assistant Professor role at Bastyr and is now a researcher at Providence. She hopes to keep her affiliation with Bastyr as a research investigator there.
- Marree Perault: Wrapping up last week of Summer Camp; also gearing up for National Night Out on 8/1/2023, which her agency hosts. Next her agency will be doing a mini Health

Wellness Fair and providing haircuts, backpacks, etc. Also, 7/21 is the Darrington Pharmacy's last day open for business – so DPICC will be saying farewell to Sheila has been an amazing asset to the community. Darrington Pharmacy is working with the ?TAP program through Homage? to get prescriptions from Arlington 3 times a day. Appreciate how Homage has really stepped up.

Then, re: Montana Institute: It was an excellent conference. Life Changing for Fritzy Aguillon, the Darrington student who went, as well as Maree and Wyone. All were inspired to come back and make changes in the Darrington Community using this training on how to create a positive social norms Prevention Campaign, using their local data to inform the substance of the campaign.

- Pia Sampaga-Khim: Awaiting feedback on NCE documents. Also, the RFP for the transportation pilot is not yet finalized, but will go out to bid as soon as it is finalized. Also are working to support at least 1.5 FTE of a counselor for Darrington.
- LF intends to connect separately with Jacob Grillo @ Conquer and also Rachel Adams to learn more about what is going on in both those corners of our shared landscape.

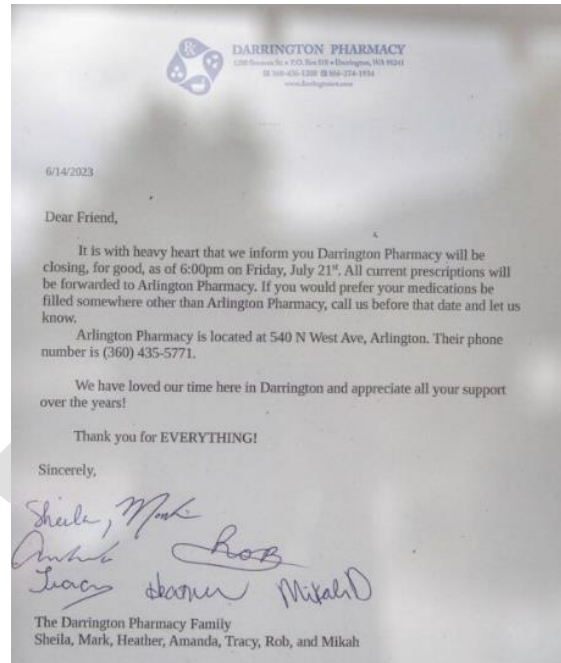
#### NO COST EXTENSION UPDATE

See links to the proposed No Cost Extension (NCE) application, including the [Cover letter](#), [Budget and Budget Narrative Worksheet](#), and [Work Plan](#) that are to be submitted to HRSA as soon as the new Grant # has been issued that moves the HRSA grant from the Health District to the Health Department. Expect the new Notice of Award (NoA) shortly, then will upload these linked documents into HRSA's Electronic Handbook (EHB). HRSA has reviewed the documents, and we expect quick approval once the new Grant # has been issued.

Lori also noted the potential of bringing a community facilitator around Stigma, Tedra Cobb, to come do sessions in both our Rural Census Tracts. Pia/Samara/Lori met Tedra and watched her innovative approach to the conversation while at the HRSA conference in DC this month.

#### MAC GROUP EFFORT –DISTINCTION BETWEEN MAC AND PUBLIC HEALTH

- Pia explained there is a distinction between Public Health and the Dept of Emergency Management's – they are not one and the same. The Department of Emergency Management created the MAC group in response to a directive from County Executive David



Somers declaring the Opioid Epidemic an emergency. The MAC group has overseers for strategic execution including policy level folks, David Somers, Dennis Worsham, Public Health Director, Dr. James Lewis, the Health Officer, and the Human Services Director, ?Mary Jane Brell Vujovic?. The MAC group originally consisted of county public health, public works, human services, law enforcement and first responders. The latest iteration includes community-based organizations and cities, city officials who want to be involved.

- It needs to be clear that the Snohomish HRSA Consortium (SHC) is a Public Health Initiative strategy, FUNDED BY HRSA, – and is not included in the MAC group’s goals. Whereas, the MAC group does have strategies FUNDED BY OPIOID SETTLEMENT FUNDS, that are owned by the County Executive, by Health and Human Services and also by the Dept of Public Health.
- It was noted there might be an opportunity for the Snohomish HRSA Consortium to be FUNDED BY OPIOID SETTLEMENT FUNDS, once the HRSA grant’s performance period is completed. In this scenario, THE SHC would represent a “rural” SUD/Mental Health (Behavioral Health) perspective at the MAC table and execute ?evidence-based Public Health strategies? in the self-identified rural areas of the county.
- Some of the MAC group’s Health Department (SHC) strategies include partnering with school districts to pilot evidenced-based curriculum into the schools; working with Law enforcement/EMS for Narcan distribution/leave-behind.
- Some of the Mac Groups Health and Human Services (HHS) strategies include doing a mobile treatment. Worth exploring if the transportation pilot the SHC is working to do could be partnered with the HHS mobile treatment?
- Generally MAC group works to bring agencies out of silo-mode and into one discussion space.
- AKey element for the MAC group is the **shared data** – Snohomish County is hiring an epidemiologist that will work specifically with the MAC group and their strategies – to collect data that shows efficacy
- Public Health wants to ensure that the MAC goals were driven from a Public Health perspective. Note that the MAC group has a county-executive driven agenda and the goals we’ll review today are a result of those discussions. Also worth noting, is the MAC group strategic planning phase needs to be completed in March 2023. However contracts and evaluation may be longer term and ongoing.

#### DISCUSSION RE: MAC GROUP EFFORT

- The county’s mobile OTP – implies methadone treatment. Question for MAC Group: How is HHS moving forward so quickly on that piece (word is they’ve already identified a partner?) when the wait to get an RFP for the SHC’s mild-in-comparison transportation pilot is going on a year now with no RFP as yet?)

- Lori suggested the SHC needs to have a representative from HHS – all agreed. Pia suggested Nate Marty (he and Sarah L are both epidemiologists and are on the MAC group’s data committee) or, someone from Nate’s department.
- Katie Olsen notes Ideal Options tried to do mobile in Idaho, and it was tough. Currently have a nice vehicle sitting in Idaho.

#### SHC MEMBERS REVIEW MAC GROUP SHORT TERM STRATEGIC GOALS AND DISCUSSION OF HOW WE MIGHT CONTRIBUTE.

- Please see this link where the [MAC Framework has been updated with input gathered from SHC Members](#) at this meeting.
- Generally SHC members wanted to follow best “language” practices when articulating all efforts they would be involved in to reduce current and future problematic substance use (opioid and in addition to opioid.)
- As representatives of rural areas, we’d want to make sure our school districts have a voice at the MAC group table. (Do we have someone from Sultan at the SHC table.)
- Concern that in any hotspot analysis the impact of drug misuse, damage in communities or overdose could be missed in our rural areas. Even a few overdoses in a rural area is very damaging to small communities.
- SHC has clarity that we want to communicate in a clear and positive manner, rather than from scare tactics. Want to make sure the messaging is clear – and also advocate for data collection in rural areas.
- SHC would like someone from the MAC Data sub-committee come to talk to this table about what they are collecting – and why.
- SHC would like to know how much funding MAC group is allocating to the short term, mid and long term objectives. What is the approval process for that? ([Link to SnoCo’s 22 Feb 2023 Policy Brief on Utilization of Opioid Settlement Funds](#))

#### NEXT MEETING

- Tentatively set for September 21st @ 11a? Depends on if Lori’s Contract is completed.
- Who do we need to add to this table – even from self-identified rural areas that are not necessarily in the HRSA-identified Rural Census Tracts.