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# SnoCo HRSA Consortium Meeting

August 22, 2024, 11am

Snohomish County's HRSA Consortium (SHC) is funded by  
HRSA's RCORP-Implementation Grant through August 2024



# 08/22/24 Agenda: SnoCo HRSA Consortium Meeting

- Introductions
  - Please put your name and affiliation in the chat box.
- Final Report on RCORP-I Grant Initiatives
- Next Steps for the Consortium
  - Abi Sauer and Juliet D'Allesandro, SCHED
- SHC Members: Wins, Needs, Insights, & Events
- Items of Potential Interest
  - News from the 8/21 CDMH Advisory Board Meeting
    - Financial; Public Safety Sales Tax Initiative
  - Overview of Washington State's Health Hub Model

- [SHC's Resource Page](#)  
Includes links  
relevant to the work  
we've done together

# Initiative: Reduce Stigma in Rural Communities

## Event Dates:

**June 26-27, 2024**

## Facilitator:

**Tedra Cobb**, through the HRSA-funded UR Medicine Recovery Center of Excellence

## Purpose:

**To engage the SHC and the wider community in critical conversations and training to address SUD stigma.**

## Links:

[Campaign to Reduce Stigma - Overview](#)

[Recovery of Excellence – Stigma Webpage](#)

[Learn more about Tedra's work here.](#)

## Initiative Overview

Launched the Community Conversation on Stigma initiative with two free events, June 26 in Darrington and June 27 in Monroe, focused on reversing substance use disorder stigma. Those who attended at least one event were then invited to a facilitator training on June 27 in Everett.

## Impact

Over 40 community members participated, leading to increased awareness and momentum for ongoing funding.

## Success

These conversations were expansive in the best ways and over 25 Naloxone kits distributed to community members across these events. Future goals include an intentional approach to continue and expand these community conversations throughout rural Snohomish County communities.

Explore [this link](#) for a debrief on this initiative. See slides 3-14

# Initiative: Expanding Naloxone Access in Rural Communities

## It cannot be emphasized enough...

The success of any of these rural initiatives is truly dependent on the collaboration of many contributors and stakeholders, within various community organizations and county departments, including the County's leadership, Health Department, Health and Human Services, the County's Comms Team, Sound Pathways, Ideal Options, The Everett Herald, and the list goes on....!

## Initiative Overview

Enhanced naloxone availability in Darrington and the Sky Valley Corridor through community engagement.

## Impact

Naloxone distribution reached remote areas via schools, libraries, and food banks.

## Success

We have addressed critical gaps in rural opioid overdose prevention as required by our grant. Over the past six months, we've distributed more than 40 Naloxone kits to community members in the Darrington and Monroe to Index corridor. We've also we've deepened our relationship with the Darrington community's stakeholders and are excited the Darrington School District will host Naloxone training during their 2024-25 staff orientation. Additionally, we are in discussions to install an emergency Naloxone box in Darrington's pharmacy-deserted areas.

# Initiative: Strengthening Mental Health Support in Rural Schools

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## Initiative Overview

Focused on expanding mental health services in the Darrington School District.

## Impact

Hired a student mental health specialist for 2022-2024, providing crucial support to students.

## Success

Supported prevention and recovery by addressing mental health needs in the rural Darrington school district by securing funding for 1.5 FTE school counselors for 2023-2024 school year, and 1.0 FTE for the 2024-2025 school year. Future goals include an intentional approach to strategize the funding to secure and expand addressing mental health needs for future years and in additional rural school districts.

# Initiative: Overcoming Transportation Barriers in Rural Areas

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## Initiative Overview

Implemented a transportation pilot to connect Sky Valley residents to essential services with a subcontractor, [Courage to Change](#).

## Impact

Provided over 100 rides in the last 6 weeks, improving access to healthcare, recovery, and social services.

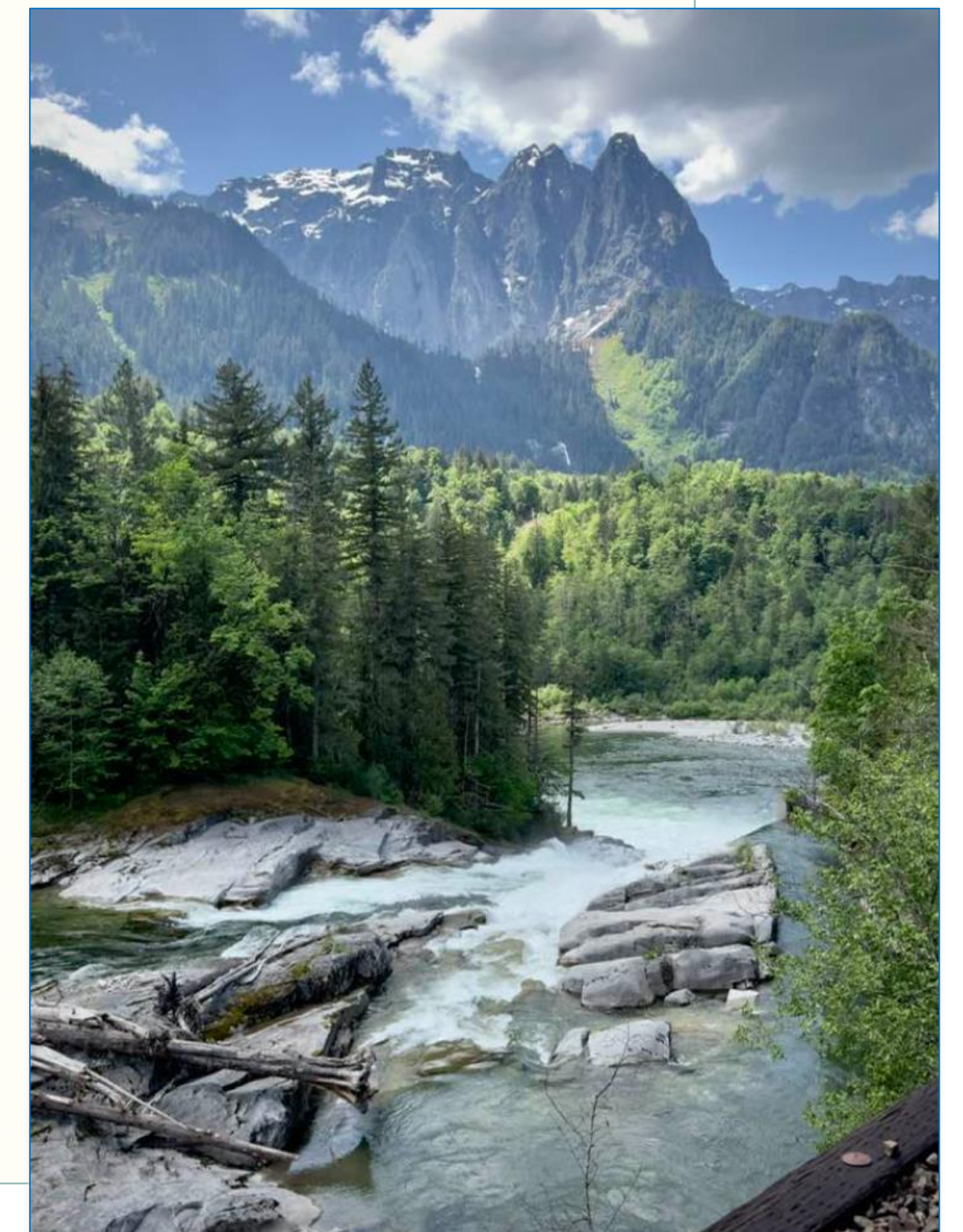
## Success

Established service connections from frontier rural areas to in-county services and supported treatment and recovery efforts by overcoming transportation barriers. The team is now working to establish a pathway for this program's sustainability.

# Consortium's Next Steps

## Discussion

- Meeting Cadence Going Forward?
- Funding Pursuits for SHC's Work
- Other questions?



# News from the CDMH Advisory Board

- Stay Informed. PSST funds impact public safety and health in our region. Success in larger cities affects surrounding rural areas.
- Advocate for Rural Needs Highlight unique challenges: limited services, longer response times. Ensure rural communities are considered in future funding.
- Collaborate & Participate. Attend county meetings, submit public comments. Work with representatives to push for equitable resource allocation.
- Prepare for Future Opportunities. Be proactive in advocating for rural-specific programs.

Stay engaged to ensure our communities benefit from available resources.

- [Info: 2019-29 Revenue Expenditures w/o Capital](#)
- [Info: 2021-2023 Expenditure Summary](#)
- [Public Safety Sales Tax \(PSST\) Overview](#)
- [PSST Press Release](#)
- See [Intro to CDMH at this link on slides 3-9](#)



# Introducing the Health Engagement Hub

A Comprehensive Approach to Addiction Treatment

The “TLDR” version:

Washington State’s answer to make access to services easier, more streamlined, client-centered and to help to remove the barriers to access services that people deserve. Projected to remove some of the stigma and meet people where they are at.

[Check out this Washington State Standard article that provides an overview of the Health Engagement Hub model.](#)

## Share Your Wins, Needs, Insights, and Events



- Snohomish Candlelight Vigil & Resource Fair on Thursday, 8/29

Join us for our 8th Annual Snohomish County International Overdose Awareness Day Event with Candlelight Vigil & Resource Fair

# A NIGHT TO REMEMBER. A TIME TO ACT.

Snohomish County Plaza • 3000 Rockefeller Ave  
**THURS AUG 29**  
5pm Resource Fair • 6:15pm Candle Lighting • 6:30pm Program

Immediate transportation to detox will be available

Bring a photo of a loved one who lost their battle

To have a booth please email  
SHD-Opioids@snoco.org  
by 8/22

*Join us to learn about advocating for change, defeating stigmas, and holding onto hope.*

# Thank you all!



It's been awesome working with everyone at this table and I'm wishing everyone here the best!!

# Acronym Sheet

**AHEC** – Area Health Education Center

**AOT** – Assisted Outpatient Treatment

**CHC** – Community Health Center of Snohomish County

**CPC** – Certified Peer Counselor

**DPICC** – Darrington Prevention and Intervention Community Coalition

**DES** – Darrington Elementary School

**DHS** – Darrington High School

**DMS** – Darrington Middle School

**DSD** – Darrington School District

**EBP** – Evidence-Based Program

**EHM RC** – Evergreen Health Monroe Recovery Center

**ISD** – Index School District

**IO** – Ideal Option

**IOP** – Intensive Outpatient Program

**LST** – Botvin Life Skills Training

**MCC** – Monroe Community Coalition

**MCO** – Managed Care Organization

**MOUD** – Medications for Opioid Use Disorder

**MRC** – Medical Reserve Corps

**PAX** – PAX Good Behavior Game (prevention curriculum)

**P/I** – Prevention & Intervention Specialist

**PMG** – Providence Medical Group

**SBIRT** – Screening, Brief Intervention and Referral to Treatment model

**SCSO** – Snohomish County Sheriff's Office

**SPSSP** – Sound Pathways Syringe Services Program

**SHD** – Snohomish Health District

**SMCHC** – Sea Mar Community Health Center

**SSIT** – Sauk-Suiattle Indian Tribe

**SPC** – Sultan Prevention Coalition

# 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

