Summary and Status Report for activities funded by Opioid Settlement Funds created by the Vermont Department of Health and updated regularly Last updated: July 22, 2024

ROUND ONE – FY 2024							
Activity	Budget	Timeline and Status					
Naloxone Distribution	\$1,980,000	Community Distribution					
		Note that in the 2024 Legisla	tive se	ssion	, fundi	ing for this	this initiative was moved from Opioid Abatement Special Fund to the Evidence Based
		Education Fund. Funding supports current and new naloxone purchases as needed to implement all current and new community distribution					
		initiatives.					
		Community Distribution	ion Dat	ta Rep	orts:	The Depar	partment publishes quarterly data briefs on naloxone distribution by Community
		<u>partners</u> and <u>Admini</u>	<u>stratio</u>	n of N	<u>laloxo</u>	ne by Eme	mergency Medical Services. Updated 5/2024 with Quarter 1 2024 data.
		• During 2023, 68,827	doses o	of nal	oxone	were dist	listributed by the health department to community partners.
		During Quarter 1 (January- N	1arch 2	2024):			
		, ,		•		buted by t	by the health department to community partners.
		Quarter 2 will be posted soon				•	
		Naloxone Distribution by the Vermont De	partment	of Heal	th		
		The following table contains data on naloxone-re partners by the Health Department. This include naloxone distribution sites, harm reduction pack kits given to first-responder agencies.	s Narcan®	kits pro	vided to th	he OOPRP commu	mmunity
		Distribution of Naloxone Doses from the Verm	ont Depart	ment of I	Health – 2	2024 (Preliminar	inary)
			Q1	Q2	Q3	Q4 Tota	Total
		Narcan® kit program: Number of doses distributed to community sites	7,420			7,4	7,420
		Harm reduction packs: Number of doses distributed to HRP sites	7,838			7,8	7,838
		Leave behind kits: Number of doses provided to first responder agencies (2 doses/kit)	984			9	984
		Total doses of naloxone distributed by the Vermont Department of Health	16,242			16,2	16,242
		In callabanest a 205 th A			_ _	VDIII-	and an initiative to an every that all Mannes at 1/ 42 and a label to a second of the
			•				unched an initiative to ensure that all Vermont K-12 schools have access to opioid
		overdose prevention training	g and n	аюхо	ne in t	tne event	nt of an opioid overdose in a school setting.

ROUND ONE – FY 2024		
Activity	Budget	Timeline and Status
		Vending Machines – Updated 7/22/2024
		A Request for Proposal for Community Public Health Vending Machines Initiative pilot sites was posted and closed June 17, 2024. A committee reviewed and scored proposals. The organizations have been notified and are currently finalizing agreements. Once agreements are finalized, they will be publicly announced.
		The distribution of the vending machines/distribution mechanisms will address geographic equity, areas of need, and areas of high burden.
		Resource documents to help prepare interested organizations interested in hosting a vending machine:
		Assessment for Community Readiness for a Harm Reduction Vending Machine (https://americanhealth.jhu.edu/news/new-toolkit-assesses-
		community-readiness-harm-reduction-vending-machine) to help agencies understand where their community sits on the continuum of readiness for vending machine implementation and identify next steps to strengthen their capacity to initiate a harm reduction vending machine program.
		Enhancing Harm Reduction Services in Health Departments (https://www.thenationalcouncil.org/resources/harm-reduction-vending-
		machines/) is an overview of the current landscape of HRVMs in the U.S., along with detailed considerations for health departments and community partners to use when planning and implementing HRVMs.
		Mail order/home delivery
		Active and open to the public on 10/16/2023.
		Vermonters can place orders through the Health Department's website at: https://survey.alchemer.com/s3/7566430/Free-Mailed-Narcan- Request-Form
		Over 800 requests received and processed as of 7/5/2024.
		Emergency Naloxone Boxes:
		The bid received for the Emergency Naloxone Box did not sufficiently meet the program's needs. VDH will work with BGS to edit the
		RFP and repost.
		RFP for community organizations to request emergency naloxone boxes has been posted: https://www.healthvermont.gov/alcohol-
		drugs/grants-contracts/requests-proposals-information-and-applications
Medication Dosing	\$2,000,000	Community based locations
<u>Units</u>		The satellite locations established pursuant to the Act are Addison County, eastern or southern Vermont, and Chittenden County.
		RFP Issued 11/29/23
		MDU will be a satellite dosing site from an existing Hub

ROUND ONE – FY 2024		
Activity	Budget	Timeline and Status
		Proposals reviewed and selections made
		However, in Act 22 of 2023, the General Assembly appropriated \$2,000,000 from the Opioid Abatement Special Fund to support the state's four specialized opioid treatment programs to expand the locations where services would be available to clients. Act 22 directed the funding to be divided equally among the four programs.
		In section C.112 of Act 113 of 2024, the General Assembly amended Act 22 to appropriate \$500,000 in funding specifically to Chittenden Clinic operated by Howard Human Services, one of the state's four specialized opioid treatment programs. The original \$2,000,000 appropriation is reduced to \$1,500,000, but the act as amended still directs that the reduced amount be divided among four programs, including Howard Human Services. We are awaiting clarification from the General Assembly as to their intent.
		Apparently successful vendors will need to submit a Letter of Intent to the Green Mountain Care Board for jurisdictional determination. Language in the FY24 Budget Adjustment Act exempts MDUs from the Green Mountain Care Board requirements. Sec. 79. 18 V.S.A. § 9435 is amended to read: 19 § 9435. g) With the approval of the Commissioner of Health, excluded from this subchapter is a facility in which the prescription, distribution, or administration of medication for opioid use disorder is a principal activity. 5/14/24-Notification has gone out to the apparently successful bidder(s) and negotiations have begun to develop grant(s) for this work. No further information will be available until such time as grant agreement(s) are executed. 7/23/24no update
		DOC-embedded
		MOU for DOC site is under development.
		DOC medical provider and BAART are conducting internal corporate review to identify questions/risks.
		Biweekly meetings scheduled with DOC/Wellpath, BAART and DSU.
		An additional site visit will need to be scheduled with the DEA. DEA provided preliminary approval for chain of custody plan as proposed.
		7/23/24-no updates
Outreach Positions	\$1,976,000	DSU PPs were sent an opt in letter. All providers have chosen to participate.
		15 preferred provider organizations have grant agreements executed.
		One grant needed to be amended and is in the process of being executed.
		The remaining grants are awaiting action by the provider.
		Upon executed grant, funds are available to providers to reimburse for expenses incurred.
		17 grant agreements are executed, and three remaining grants are awaiting action by the provider.

ROUND ONE – FY 2024		
Activity	Budget	Timeline and Status
		7/23/24No updates
SSP Program Support - OD Prevention	\$400,000	In grant negotiations with SSPs it was determined this funding would be best suited to be added into the SSPs "Core Services" grants rather than as a stand-alone agreement specific to the Overdose Outreach Program started under COVID Block Grant funding. This shift would allow further flexibility in how these funds could be used to support overdose prevention and linkage to substance use services for those not currently engaged.
		This decision was announced to all SSPs on 1/8/24. Grants have been fully executed and have a retroactive start date of 1/1/24.
Contingency Management	\$840,000	DSU PPs were sent an opt in letter. Initially, all providers chose to participate. However, subsequently, five organizations have elected not to participate largely because of capacity/administrative burden.
		13 of the 14 preferred providers electing to participate have executed grant agreements as of 1/24/24.
		Upon executed grant, funds will be available to providers to reimburse for expenses incurred.
		DSU is continuing to work to provide ongoing TA for implementation for DSU grantees. RFP was issued for statewide application for up to \$50,000. Grant negotiations are under way with apparently successful bidder.
		Four Preferred Providers grant agreements awaiting action by the provider and the agreement developed as a result of the statewide RFP is also awaiting action by the provider. 5/9/24TA resources have been identified and contracting is underway 5/14/24TA resources have begun scheduling time to meet with providers and contracting is underway. 6/25/24-TA meetings with providers continue
		7/23/24no updates
Wound care telehealth	\$100,000	UVMMC has signed the grant agreement. An Alchemer database has been created to track the work that is being done to monitor the impacts of the intervention.
		More than nine partners throughout the state will be referring to a team of five infectious disease practitioners to assess presenting wounds and develop a plan for treatment inclusive of the provision of wound care materials.
		An orientation meeting with referring entities was held on 5/15/24. Project start date was delayed due to access issues to supplies that are being donated by UVMMC. Supplies have been in place as of the start of May and the project commenced 5/20/24 among all four Syringe Service Providers and one drug and alcohol recovery provider in Burlington.

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Activity	Budget	Timeline and Status	
Fentanyl/Xylazine Test	\$200,000	Contract is in place and orders are being placed and filled as needed.	
<u>Strips</u>			
Drug Checking	\$700,000	AIDS Project of Southern Vermont, HIV/HCV Resource Center, Howard Center Safe Recovery, and VT CARES have all accepted the grant	
<u>Machines</u>		award. Grant negotiations have begun and the grant award will run from 9/1/24 and end on 8/31/26.	

^{(1) \$1,980,000.00} for the expansion of naloxone distribution efforts, including establishing harm reduction vending machines, home delivery and mail order options, and expanding the harm reduction pack and leave behind kit programs;

- (2)(A) \$2,000,000.00 divided equally between four opioid treatment programs to cover costs associated with partnering with other health care providers to expand satellite locations for the dosing of medications, including costs associated with the satellite locations' physical facilities, staff time at the satellite locations, and staff time at opioid treatment programs to prepare medications and coordinate with satellite locations; (B) the satellite locations established pursuant to this subdivision (2) shall be located in Addison County, eastern or southern Vermont, Chittenden County, and a facility operated by the Department of Corrections.
- (3)(A) \$1,976,000.00 to fund 26 outreach or case management staff positions within the preferred provider network for the provision of services that increase motivation of and engagement with individuals with substance use disorder in settings such as police barracks, shelters, social service organizations, and elsewhere in the community; (B) it the intent of the General Assembly that these positions shall be funded annually by the Opioid Abatement Special Fund unless and until the Special Fund does not have sufficient monies to fund this expenditure;
- (4) \$400,000.00 divided equally among the State's four syringe service providers to provide overdose prevention services and response education and resources that build trust between individuals with substance use disorder and Vermont's system of care;
- (5) \$840,000.00 to provide contingency management services to individuals with substance use disorder;
- (6) \$100,000.00 to implement a wound care telehealth consultation pilot program for the purpose of utilizing wound care experts to provide telehealth drop-in appointments to address syringe use by individuals with opioid use disorder;
- (7) \$200,000.00 to expand the distribution of fentanyl test strips and, if available, xylazine test strips;
- (8)(A) \$700,000.00 to the Department of Health's Division of Substance Use Programs to award one or more grants to an organization or organizations providing or preparing to implement drug-checking services with spectroscopy devices, including high-pressure mass spectrometer (HPMS) or Fourier-transform infrared spectroscopy device (FTIR), in a harm reduction setting; (B) the grants awarded pursuant to this subdivision (8) shall be based on an applicant's ability to provide publicly available drug-checking services.