Whatcom County Council as the Health Board (Special)

COUNTY COURTHOUSE 311 Grand Avenue, Ste #105 Bellingham, WA 98225-4038 (360) 778-5010



Minutes - Draft Minutes

Tuesday, July 18, 2023 1 PM Civic Center Building Conference Room / Hybrid Meeting

SPECIAL JOINT HEALTH BOARD/PUBLIC HEALTH ADVISORY BOARD MEETING - HYBRID MEETING (PARTICIPATE IN-PERSON, SEE REMOTE JOIN INSTRUCTIONS AT www.whatcomcounty.us/joinvirtualcouncil, OR CALL 360.778.5010)

COUNCILMEMBERS

Barry Buchanan Tyler Byrd Todd Donovan Ben Elenbaas Carol Frazey Kaylee Galloway Kathy Kershner

CLERK OF THE COUNCIL

Dana Brown-Davis, C.M.C.

<u>Call To Order</u>

Health Board Chair Barry Buchanan called the meeting to order at 1:01 p.m. in a hybrid meeting.

Roll Call

- **Present:** 6 Barry Buchanan, Tyler Byrd, Todd Donovan, Ben Elenbaas, Carol Frazey, and Kaylee Galloway
- Absent: 1 Kathy Kershner

Also Present

The following members of the Public Health Advisory Board stated they were present (and were audible on the recording):

- Steve Bennett
- Teri Bryant
- Sterling Chick
- Chris Kobdish
- Emily O'Connor
- Greg Thompson
- Robin Phillips-Madson
- Madison Emry
- Adrienne Renz

Clerk's note: There were other people present who spoke at the meeting but were unnamed and not part of the roll calls.

Announcements

Public Comment

The following person spoke:

• Natalie Chavez

Hearing no one else, Buchanan closed the public comment.

Health Officer/Health Director Updates

Greg Thompson, Co-Health Officer, stated his update would be his presentation for the next agenda item.

<u>Opioids in Whatcom County</u> <u>Data Update</u> <u>Update on Settlement Funds</u> <u>MAC Group Structure</u> <u>All Hands Re-cap and Next Steps</u> <u>System challenges and opportunities</u> <u>Short Term Plan Recommendations and Resources</u>

The following people presented:

- Greg Thompson, Co-Health Officer
- Erika Lautenbach, Health and Community Services Director
- Joe Fuller, Health and Community Services
- Emily O'Connor, Public Health Advisory Board

Lautenbach introduced the presentation.

Data Update

Thompson gave an update on the opioid crisis and presented on the Whatcom overdose prevention website, overdose data and trends in Washington state and Whatcom County, and Naloxone distribution activities. He and Lautenbach answered how long the overdose prevention website has been up, how much traffic it is getting-- particularly for requests for Naloxone, and how to make the request form easier to find. Lautenbach stated they have just sent the regional Chambers one hundred kits that they can distribute to businesses that have specifically asked for Naloxone. It is a combination of individual requests and larger requests from organizations that are willing to be distribution sites. She stated they will make sure they have the request form in multiple places and more obvious.

Update on Settlement Funds

Joe Fuller, Health and Community Services, updated the Councilmembers on the opioid settlements (on file in the agenda packet). They are looking at over \$1.1 billion in settlement funds coming into the state and he spoke about the \$518 million distributors settlement, which is the first settlement of what they call "the big three," and the \$434 million Pharmacies and Manufacturers settlement. The distribution amounts for the \$518 million will be over the course of 18 years and the payouts for the \$434 million will be staggered in different time periods. Fifty percent will be a State share and fifty percent will be a local share. He then presented on opioid abatement strategies. Just under 100 services can be provided through these settlement funds and they are divided into three strategies: treatment, prevention and other. He spoke about the settlement distribution amounts on a local level for the first two settlements referenced above. They expect it to be over \$10 million and then there are four additional settlements that are pending.

Frazey asked who is choosing where the money will go for the opioid abatement strategies, whether they could start with addressing needs of pregnant/parenting women and their families (under treatment strategies) and preventing over-prescribing and ensuring appropriate prescribing and dispensing of opioids (under prevention strategies), and whether there is a place you can call if you think someone is over-prescribing.

Fuller spoke about the anticipated process for determining priorities and money and stated there will be a regional opioid development council for our five-county region, and local decision-making will be with the local governments. They should collaborate though with the other counties and the State.

The group discussed where someone can file complaints against providers (for over-prescribing), the timeline of distribution and what the ongoing annual amount might be, not having unreasonable expectations on what they can do with this money since the distributions will not be as large as they seem as they trickle down to counties and cities over a several-year period, whether the funds are limited to prescribed opioids or whether they can also be used for opioids in general and the Fentanyl issue that is in front of them now, and whether it is still true that alcohol and marijuana are entry drugs.

Lautenbach stated, to answer an earlier question, she heard back from communications staff that they have received 23 requests for Naloxone from both groups and individuals since the website went live.

Fuller shared a slide that showed that people who are addicted to alcohol, marijuana, cocaine, or prescription opioid painkillers are progressively more likely to be addicted to heroin. The primary drug of admission for youth is marijuana and for adults it is still alcohol.

Thompson stated we have had about 107,000 to 110,000 opioid deaths in the last couple of years, and the estimate is that alcohol contributes to about 140,000 deaths per year. They are tightly interrelated and it is all impactful.

Multi-Agency Coordination (MAC) Group Structure

Lautenbach spoke about letters (on file in the agenda packet) between the County Executive, City of Bellingham Mayor, and Health and Community Services regarding a request to convene a multi-agency coordination (MAC) group. The group would have the following goals:

- Goal 1 Prevent opioid and other drug misuse
- Goal 2 Identify and treat opioid misuse and stimulant use disorder
- Goal 3 Ensure and improve the health and wellness of people who use opioids and other drugs
- Goal 4 Use data and information to detect opioid misuse, monitor drug user health effects, analyze population health, and evaluate interventions
- Goal 5 Support individuals in recovery

She stated there are a lot of good systems they can work with. They are thinking of engaging with partners on what prevention activities might look like. They will be coming back with some requests and more information about funding for schools to do behavioral health and other supportive work. She spoke about thinking about how our providers and systems work together (or do not work together) to either create barriers for transitions and the continuum of care for people who have opioid misuse disorder, or contribute to the warm handoffs that help their success. They also want to think about transitions between systems (Emergency Department, jail, etc.) since that is the point they see the highest risk of overdose. They are first convening the MAC group next month and will meet monthly and they would love to have a Health Board member as a participant of that group and as a representative of this legislative body.

All Hands Summit Re-cap and Next Steps

Emily O'Connor, read from a summary of the summit (on file in the agenda packet).

The group discussed use of drugs among teens and helping them survive if they make a mistake, getting resources and Naloxone to parents and schools, feedback on attending the summit and leaving inspired and motivated to take action, and the fact that Whatcom County accounted for a quarter of the attendees of the summit across the state.

Amy Harley, Co-Health Officer, spoke about the need (coming from the perspective of a health provider and a systems member) for coordination of our systems of care. She stated it rings true in her clinical work as well. She gave examples of working with five of twelve newborns this weekend that had poly substance exposure. She stated individual providers and agencies are not prepared to care for the complexity of medical, psychosocial, and behavioral problems that are existing or coming their way without more coordination, wrap-around services, cross-agency work, and multi-disciplinary teams.

System Challenges and Opportunities

Lautenbach stated they have already been talking about system challenges so she went to the next topic.

Short Term Plan Recommendations and Resources Lautenbach reported on the following:

- They are participating in an adult community survey to get broad community participation and get a better understanding of what people's needs and challenges are in our community. They will send that survey out to Councilmembers as well.
- They are starting to think about their legislative agenda for next year and would like to make sure they are all partnering and thinking about how we can leverage State dollars to do some of this work.
- They have been receiving additional funding from Foundational Public Health Services for the last few years, and this year (which started July 1) included funding for a specific opioid misuse and prevention position.
- It would be great to have a conversation about the MAC representation.
- At the August 1 regular Health Board meeting they will talk about the Behavioral Health Fund reserves and present some options for the Health Board to consider with regard to both our justice related priorities from the implementation plan, but also a focus on prevention activities and behavioral health workforce support.

Discussion about what seems most important for the group to think about and pursue

Donovan suggested they find out how the MAC group is working in Snohomish County and asked how they would be involved in decisions about using the settlement funds.

Frazey spoke about coordinated care for people coming out of the jail and stated that would be a place (when people are in that transitional space) they could intervene and she would love to hear what is currently happening.

Lacey McCarley, Health and Community Services, spoke but was not in range to be audible.

Malora Christensen, Health and Community Services, stated re-entry

support is a big priority and the Health Department contracts with Lifeline Connections for both behavioral health services in the jail and re-entry services. They have expanded that contract for an additional three staff and there is also a planning group that meets every two weeks and works on the re-entry system. They prioritize people that they know are going to be discharged within 30 days but they do not have a lot of information from the court until it happens, so they often scramble quickly to give the person resources.

Frazey asked whether they are coordinating anything even for someone just spending a night in jail for DUI and Christensen stated the re-entry team prioritizes people who are most vulnerable and have behavioral health challenges, but she will check in to see what is being done for all people leaving the jail.

Lautenbach stated the Council approved funding for them to hire a behavioral health aide which is someone that will be able to drive people from the jail to places like the triage center, to services, a family member's home, or a pharmacy.

Buchanan asked and the group discussed how robust that position will be and whether it is just a one-time thing for a person that is getting out of jail or whether it continues if that person needs other transportation.

O'Connor spoke about the community health dashboard and data overlays and asked whether there is data to show who is exiting which institutions and what the correlations of risk factors are that they have. It is one thing to have re-entry case management staff, but if they do not actually have services to offer them, such as housing, then it makes that much less effective and impactful. We have to identify what the deficits are so we can prioritize them.

Christensen spoke about data work that is currently happening.

Thompson thanked them for bringing up the issues of transitions and jail re-entry and stated current and future data is challenging, but our past data really shows how important that is. Putting that treatment piece and the re-entry services in incarceration situations can reduce the drug overdose death rate by 85 percent.

Lautenbach stated Mike Hilley, Emergency Medical Services (EMS) Manager, is also trying to think about these systems when EMS is responding to an overdose episode. Bennett stated one thing to think about is trying to understand these funds and how much they are actually going to be. He wants to make sure they do not jump ahead of the State and put local money where the State will be putting funding for the same thing. It means we have to wait on some of the larger system things, but we can still identity some things in Whatcom County that a lot of this State funding will likely not be directly impacting, such as transitions. We should try to think about short-term interventions that we could do over the next few months while we are waiting for the State to clarify their plan for how they intend to use the money.

Galloway spoke about the importance of developing a coordinated State legislative agenda.

Lautenbach stated that the Administration has requested that they add the legislative agenda to the Public Health Advisory Board (PHAB) agenda in September and Frazey asked if it should be added to the Health Board meeting in August.

The group discussed getting Council direction to the PHAB, when they need to take action on appointing a Council representative to the MAC, and who is determining the composition of that group.

Lautenbach gave final thoughts.

Other Business

There was no other business.

Adjournment

The meeting adjourned at 2:20 p.m.

ATTEST:

WHATCOM COUNTY COUNCIL WHATCOM COUNTY, WA

Dana Brown-Davis, Council Clerk

Barry Buchanan, Health Board Chair

Kristi Felbinger, Minutes Transcription