

Summary and Status Report for activities funded by Opioid Settlement Funds created by the Vermont Department of Health and updated regularly
Last updated: April 16, 2024

ROUND ONE – FY 2024																																
Activity	Budget	Timeline and Status																														
Naloxone Distribution	\$1,980,000	<p>Community Distribution Update 4/15/24 Funding will be used to support current and new naloxone purchases as needed to implement all current and new community distribution initiatives. Community Distribution Data Reports: The Department publishes quarterly data briefs on naloxone distribution by Community partners and Administration of Naloxone by Emergency Medical Services.</p> <p>During 2023:</p> <ul style="list-style-type: none"> • 68,827 doses of naloxone were distributed by the health department to community partners. • Community naloxone was reported to reverse 152 overdoses <p>Naloxone Distribution by the Vermont Department of Health</p> <p>The following table contains data on naloxone-related kits and materials distributed to community partners by the Vermont Department of Health. This includes Narcan® kits provided to the OOPRP community naloxone distribution sites, harm reduction packs (HRP) given to distribution sites, and leave behind kits given to first responder agencies.</p> <table border="1"> <caption>Distribution of Naloxone Doses from the Vermont Department of Health – 2023 (Preliminary)</caption> <thead> <tr> <th></th> <th>Q1</th> <th>Q2</th> <th>Q3</th> <th>Q4</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Narcan® kit program: Number of doses distributed to community sites</td> <td>6,480</td> <td>9,398</td> <td>11,031</td> <td>8,258</td> <td>35,167</td> </tr> <tr> <td>Harm reduction packs: Number of doses distributed to HRP sites</td> <td>6,110</td> <td>9,866</td> <td>8,972</td> <td>5,594</td> <td>30,542</td> </tr> <tr> <td>Leave behind kits: Number of doses provided to first responder agencies (2 doses/kit)</td> <td>528</td> <td>498</td> <td>1,244</td> <td>848</td> <td>3,118</td> </tr> <tr> <td>Total doses of naloxone distributed by the Vermont Department of Health</td> <td>13,118</td> <td>19,762</td> <td>21,247</td> <td>14,700</td> <td>68,827</td> </tr> </tbody> </table> <p>In collaboration with the Agency of Education, VDH launched an initiative to ensure that all Vermont K-12 schools have access to opioid overdose prevention training and naloxone in the event of an opioid overdose in a school setting. To date 86 schools and districts have received kits.</p>		Q1	Q2	Q3	Q4	Total	Narcan® kit program: Number of doses distributed to community sites	6,480	9,398	11,031	8,258	35,167	Harm reduction packs: Number of doses distributed to HRP sites	6,110	9,866	8,972	5,594	30,542	Leave behind kits: Number of doses provided to first responder agencies (2 doses/kit)	528	498	1,244	848	3,118	Total doses of naloxone distributed by the Vermont Department of Health	13,118	19,762	21,247	14,700	68,827
	Q1	Q2	Q3	Q4	Total																											
Narcan® kit program: Number of doses distributed to community sites	6,480	9,398	11,031	8,258	35,167																											
Harm reduction packs: Number of doses distributed to HRP sites	6,110	9,866	8,972	5,594	30,542																											
Leave behind kits: Number of doses provided to first responder agencies (2 doses/kit)	528	498	1,244	848	3,118																											
Total doses of naloxone distributed by the Vermont Department of Health	13,118	19,762	21,247	14,700	68,827																											

ROUND ONE – FY 2024

Activity	Budget	Timeline and Status
		<p>Vending Machines A Request for Information (RFI) to identify what types of vending machines/distribution mechanisms are available for purchase was posted and closed on March 1 with 5 responses, which are currently under review. They will help inform options that may work in Vermont. The Request for Proposal draft is in the final states. A Request for Proposal for pilot sites will be posted on or before April 23rd. 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: <u>Assessment for Community Readiness for a Harm Reduction Vending Machine</u> 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. <u>Enhancing Harm Reduction Services in Health Departments</u> 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.</p> <p>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 650 requests received and processed as of 4/2/2024.</p> <p>Emergency Naloxone Boxes:</p> <ul style="list-style-type: none"> • 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
<p><u>Medication Dosing Units</u></p>	<p>\$2,000,000</p>	<p>Community based locations The satellite locations established pursuant to the Act are Addison County, eastern or southern Vermont, and Chittenden County. RFP Issued 11/29/23 Proposals are currently under review MDU will be a satellite dosing site from an existing Hub 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.</p>

ROUND ONE – FY 2024

Activity	Budget	Timeline and Status
		<p>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.</p> <p>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. Initial meeting occurred 3/1/24, next meeting 3/15/24. Next meeting scheduled with DOC/Wellpath, BAART and DSU 3/29/24 4/9/24--initial site visit scheduled for 5-6-24; site visit for DEA still in the works 4/16/24-the Wellpath team provided an updated MOU template with the team for review prior to the next meeting 4/26; security clearances in process for the site visit scheduled for 5/6.</p>
Outreach Positions	\$1,976,000	<p>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. 16 grant agreements are executed and the remaining grants are awaiting action by the provider.</p>
SSP Program Support - OD Prevention	\$400,000	<p>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.</p> <p>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.</p>
Contingency Management	\$840,000	<p>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. 12 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.</p>

ROUND ONE – FY 2024

Activity	Budget	Timeline and Status
		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.
Wound care telehealth	\$100,000	<p>UVMHC 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.</p> <p>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.</p> <p>An orientation meeting with referring entities will be held the week of 2/20. Project start date has continued to be pushed back as we are continuing to wait to get access to supplies that are being donated by UVMHC. Infectious Disease is working vigorously to get supplies in place.</p>
Fentanyl/Xylazine Test Strips	\$200,000	Contract is in place and the first order utilizing this contract and this funding has been placed and received by the distribution warehouse.
Drug Checking Machines	\$700,000	<p>Proposed amount is expected to be sufficient to fund at least four sites, potentially but not limited to, syringe service providers. Understood that this would need to proceed in tandem with the implementation of H.222 Section 12 – 18 V.S.A. §4240a – OVERDOSE PREVENTION; DRUG-CHECKING FOR CONTAMINANT DETECTION.</p> <p>This will be issued as an RFP</p> <ul style="list-style-type: none"> • RFP and Guidelines to be posted by April 23rd. • Guidelines are in the final review stages and will be posted by April 23rd.

(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.