

## State Opioid Response III (SOR III) Grant

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### Overview

The HCA's Division of Behavioral Health and Recovery (DBHR) will lead efforts to continue the services implemented through the State Targeted Response (STR) and Washington State Opioid Response I and II (SOR I and II) grants. DBHR will address the state's opioid epidemic by implementing the Washington State Opioid and Overdose Response Plan with funds from the SOR III grant. DBHR has developed prevention, treatment, and recovery support strategies/objectives to:

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

### SOR III prevention projects

#### Community Prevention and Wellness Initiative (CPWI)

CPWI provides substance use disorder (SUD) prevention services and strategies through local coalitions in high-need communities. The SOR II grant funds 42 coalitions to deliver prevention programs and strategies to reduce underage use of opioid, stimulant, alcohol, marijuana, tobacco, and other drugs. This model uses a data-informed, community-level decision making process to determine root social and emotional causes that predict problem behaviors and prevent SUD.

#### Community-based Organization (CBO) Enhancement Grants

DBHR funds high-need grantees to provide direct prevention services to address opioid use disorder (OUD) through evidence-based programming.

Services include implementing direct service, youth and parenting program(s), the implementation of the statewide Starts with One opioid prevention campaign and participating in National Drug Take-Back Days twice a year.

#### Public education campaign

The Starts with One Campaign ([www.getthefactorsrx.com](http://www.getthefactorsrx.com)) is focused on opioid prevention messaging for young adults, parents, and older adults. The purpose of the campaign is designed to educate Washingtonians about the dangers of prescription drug misuse and abuse, increase awareness about safe storage and disposal, and increase awareness about how to respond to an opioid overdose.

#### Prescriber Education, Training, and Workforce Development Enhancements

DBHR funds the Region 10 Opioid Summit in collaboration with Idaho, Alaska, and Oregon. The SOR III grant also helps fund the Annual Prevention Summit, Spring Youth Forum, and consultation and training to internal and external Prevention Professionals and Staff for health equity in prevention services.

#### Student Assistant Professionals (SAP)

Each CPWI site receives a full-time SAP who provides school-based prevention and intervention services.

#### Fellowship Program

DBHR contracts with Washington State University to manage and co-develop the Washington State Fellowship Program. The 10-month Fellowship Program goals are to increase the prevention workforce for Washington State by providing Fellows with prevention system experience at both the state and community level and build capacity with high-needs communities to implement opioid and other drug prevention services.

#### Excellence in Prevention (EIP) Registry

DBHR is improving the functionality of the EIP registry, which provides detailed information on evidence-based SUD prevention programs and strategies, including those shown to be effective at

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reducing youth opioid, prescription drug, or stimulant use and/or associated risk factors. This may include research and development of evidence-based programs (EBP) for young adults.

## SOR III data projects

### Community prevention evaluation

Contract with WA State University (WSU) to develop and disseminate community and state level reports for ongoing CPWI evaluation.

### SUD prevention and MH promotion online reporting system

Support the development and maintenance of an online reporting system to track local data on prevention services, feeding into the overall evaluation of community prevention services.

### Research & Data Analysis Division

Contract with Department of Social Health and Service's Research and Data Analysis division (DSHS-RDA) for a project evaluator and a programmer analyst to evaluate data and coordinate grant-required data collection (data requirements under the Government Performance and Results Act-GPRA), ongoing contract monitoring, and program evaluation.

## SOR III treatment projects

### Opioid Treatment Networks

Opioid Treatment Networks (OTNs) are second-generation Hub & Spoke treatment networks serving individuals with OUD and/or stimulant use disorder. The thirteen OTNs are positioned to provide medications for opioid use disorder (MOUD) in non-traditional treatment settings. OTNs were selected through a competitive solicitation process, and include jails, emergency departments, syringe exchanges, and a homeless shelter. OTNs have increased the availability of MOUD across the state. Many OTNs are in counties not currently being served by the federal- and state-funded Hubs & Spokes.

### OTN TA/Training

DBHR has contracted with the University of Washington (UW) Addictions, Drug and Alcohol Institute (ADAI) to provide technical assistance and

training to support OTN staff through clinical skill-building training and other sessions regarding sustainability.

### OTN TA/Training

DBHR has contracted with WSU to provide on-going training and technical assistance for sites providing contingency management for stimulant use disorder.

### OTN tobacco cessation

DBHR has contracted with DOH to provide tobacco cessation services which includes Nicotine Replacement Therapy for individuals with opioid and tobacco use disorders.

### Grants to Tribal Communities

Funding to Tribes and Urban Indian Health Programs to address unmet needs of previous state opioid tribal requests. Services include prevention, treatment, and recovery support services activities. Funding also paid for the development and management of a Tribal Opioid Epidemic Response Workgroup.

### OUD Treatment Decision Re-entry Services & COORP

- Project #1: The Treatment Decision Model (TDM) project includes funding for MOUD inside correctional facilities.
- Project #2: Care for Opioid Offenders Released from Prison (COORP) and Work Release (WR) will utilize reentry SUD professionals to conduct expanded SUD assessments and facilitate treatment decision-making for incarcerated individuals identified as opioid users at reentry. Contracting is performance based with the goal of increasing warm hand-off referrals to OUD service providers and ensuring treatment retention.

### OTN Hub & Spoke

OTN Hub & Spoke treatment networks serve individuals with OUD and/or stimulant use disorder. Hubs are regional centers serving a defined geographical area that support spokes. Hubs will be responsible for ensuring at least two of the three Federal Drug Administration (FDA) approved MOUD are available. Spokes (five per

hub) are facilities that provide behavioral health treatment and/or primary healthcare services, wrap around services, and additional service referrals to individuals referred by the hub.

## Tribal Treatment

This project creates and distributes media campaigns for tribes to build awareness related to MOUD treatment options for Native Americans. The goal of the project is to work collaboratively with recognized tribal governments to engage in MOUD services. Media campaigns under SOR III will also include fentanyl awareness messaging.

## SOR III recovery support services projects

TA/training for recovery support services will be provided to client, peers, and staff at:

- Catholic Community Services in Burlington
- Everett Recovery Café
- Peer Washington
- Comprehensive Healthcare in Walla Walla
- Okanogan Behavioral Healthcare
- Spokane Recovery Café
- Vancouver Recovery Café

## Client-directed Recovery Support and Peer Services

Direct recovery support services are contracted with the seven agencies listed above. Services are person-directed and include peer services, recovery coaching, and recovery planning. Additional services (employment support, housing support, mentoring, dental care not covered by Medicaid, medical care not covered by Medicaid, basic needs, education support, transportation, and other supportive services) are based on individual needs and requests for support. Every individual will have access to mutual support groups that are specific to OUD and trained peers. Each site has a connection with an MOUD provider in the community.

## Peer PathFinder Project

The Peer PathFinder Project builds on the already established DBHR Projects for Assistance in Transition from Homelessness (PATH) program to provide SUD peer recovery support in emergency rooms and homeless encampments. The project

links individuals to treatment options to include MOUD.

Peer Pathfinder SUD Peers determine eligibility and assist in navigating and accessing services to address barriers to independence and recovery. These services address housing, financial resources, transportation, habilitation and rehabilitation services, and prevocational and vocational services. For SOR II, there were 1,733 unduplicated clients, 1,838 screenings, 3,159 referrals, 1,841 enrollments, and 1,733 eligible clients.

## SOR III eligibility requirements

Key populations of focus for prevention communities and schools with elevated substance use risk scores. Risk scores include opioid prevalence, opioid prescribers, and tribal communities.

Key population of focus for treatment include Individuals with OUD and stimulant use disorder. This grant also requires screening, testing, referral, and/or treatment for viral hepatitis and HIV services. Priority populations include intravenous drug users and pregnant persons.

Primary focus for Recovery Support Services are individuals with a history of overdose, or opioid or stimulant misuse.

## Authority

Federal Substance Abuse Mental Health Services Administration, Catalog of Federal Domestic Assistance (CFDA) number is 93.788.

## Budget

SOR III total grant amount is \$27,480,888. Total amount for program development: \$24,732,799

- Prevention: \$4,946,560
- Treatment: \$14,839,680
- Recovery Support Services: \$4,946,560

## Numbers served

**Prevention:** In Year One of the SOR II Grant, 1,936 participants were served through evidence-based programs, coalition activities, and trainings with SOR II through the CPWI Program, with another 185,434 served through environmental/information dissemination strategies and over 23 million people

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were reached through our Starts with One campaign. We served 35,414 students through school-based prevention and intervention services. We served another 923 program participants through evidence-based programs with our community-based organization (CBO) grants. Through the TelePain program 1,392 primary care providers attended case consultations.

**Treatment:** In year one and two of the SOR II Grant- the OTN Hub & Spoke project served 5,997 unduplicated individuals and 6,533 MOUD induction events; 1,844 had stimulant use disorder and of those, 833 received treatment within the Hub & Spoke network and 706 were referred for treatment (others were either not asked or declined services/referral). Within the OTN project, there were 6,660 unduplicated individuals and 8,505 induction events; 3,556 had stimulant use disorder and of those, 272 received treatment within the OTN and 2,512 were referred for treatment. There are two Washington State Department of Corrections (DOC)- contracted projects. The first project, the COORP and WR program, recorded 2,492 unduplicated individuals and screening events, 756 started MOUD. There were 2,591 screenings, 1,452 referrals, and 1,787 enrollments. The second DOC project, Re-Entry Post Release, recorded 12,6174 screening events, with 2,510 individuals served, and, of those, 1,305 opted for a referral for MOUD treatment.

**Recovery Support Services:** In SOR II, of the individuals screened, 1,506 individuals were enrolled in recovery services. Each enrolled person received individualized support services and mutual support groups specific to, and in support of, their recovery plan and goals. Peer support was provided to all 1,506 individuals. Two of the seven recovery support services sites have waiting lists. In the two years of SOR II of the Peer Pathfinders program, 1,838 clients were screened and 1,733 were eligible for services.

## Oversight

### Internal

Division of Behavioral Health and Recovery

### External

Substance Abuse and Mental Health Services Administration/Center for Substance Abuse Prevention

### For more information

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