



State of Wisconsin
Department of Health Services

Tony Evers, Governor
Kirsten L. Johnson, Secretary

September 30, 2024

The Honorable Howard L. Marklein, Senate Co-Chair
Joint Committee on Finance
Room 316 East
State Capitol
P.O. Box 7882
Madison, WI 53707

The Honorable Mark Born, Assembly Co-Chair
Joint Committee on Finance
Room 308 East
State Capitol
P.O. Box 8952
Madison, WI 53708

Dear Senator Marklein and Representative Born:

Below is the Fiscal Year 25 Quarter 1 (FY 25 Q1) report of expenditures from the opioid settlement dollars received through the National Prescription Opiate Litigation, Case No. MDL 2804 (NPOL).

A. Settlement Funds Received

All Settlement Funds Received	
2022 Total	\$ 30,704,645.33
2023 Total	\$ 7,988,983.36
March 2024	\$ 2,420,613.09
April 2024	\$ 23,129,138.06
June 2024	\$ 573,198.29
July 2024	\$ 10,449,273.93
TOTAL	\$ 75,265,852.06

B. Funding Amounts Awarded or Allocated

As of September 30, 2024, DHS has \$9,950,000 in funding opportunities open for application, \$10,700,000 in funding opportunities under review, and a cumulative total of \$40,241,291 in awards. This represents a total of \$60,891,291.

The table below summarizes the grant funding opportunities DHS currently has open for applications.

Open Funding Opportunities		
Category	Available Funding	Applications Due
TOTAL		
Substance Use Disorder Treatment Platform	\$1,200,000 over 4 years	10/2/2024
Tribal Nation Opioid Abatement Efforts	\$6,000,000	10/16/2024
Room & Board Costs for Medicaid Members with Opioid Use Disorder	\$2,750,000	11/1/2024

Funding Opportunities Under Review:

The table below summarizes the grant funding opportunities DHS currently has under review.

Funding Opportunities Under Review	
Category	Available Funding
TOTAL	\$ 10,700,000
FY 25 Capital Projects	\$ 7,700,000
FY 25 Law Enforcement Opioid Abatement Efforts	\$ 3,000,000

FY25 Capital Projects to Expand Prevention, Treatment, Harm Reduction, Recovery Services

Community-based providers offering prevention, treatment, harm reduction and recovery services for individuals with an opioid use disorder were invited to apply for funds to support capital projects expanding services in Wisconsin. Award funding for capital projects will support the expansion of prevention, harm reduction, treatment, and recovery services through construction of new facilities and to renovate existing facilities to improve services. At least \$2,310,000 of the funds are designated to support projects in counties with fewer than \$500,000 residents. Agencies awarded funding through similar request for applications issued in 2023 were eligible to apply if the funding is for a new project, not the project funded under the 2023 request for application.

The initial application period closed on September 6, 2024. Applications are currently under review. Awards will be shared in future quarterly reports.

FY 25 Law Enforcement Agencies Opioid Abatement Efforts

The “Opioid Abatement Efforts by Law Enforcement Agencies” Request for Applications provides DHS an opportunity to support law enforcement agencies through four strategies: medication-assisted treatment education and awareness training, community drug disposal efforts, treatment for persons with an opioid use disorder who are incarcerated, and pre-arrest or pre-arraignment deflection strategies for people with an opioid use disorder. At least \$1 million of the funds are designated for law enforcement agencies in counties or municipalities with 70,000 or fewer residents.

The initial application period closed on September 6, 2024. Applications are currently under review. Awards will be shared in future quarterly reports.

Awarded & Allocated Funds:

The following table summarizes the amount of funding DHS awarded by category of use during FY 25 Q1 and cumulatively.

Funding Awards & Allocations by Category			
Category	Previous Awards	FY 25 Q1	Cumulative Awards
TOTAL	\$ 35,641,291	\$ 4,600,000	\$ 40,241,291
Expand Narcan® Direct Program	\$ 4,481,674	\$ -	\$ 4,481,674
Establish Fentanyl Test Strips	\$ 1,059,617	\$ -	\$ 1,059,617
Capital Projects	\$ 10,000,000	\$ -	\$ 10,000,000
Funding for Tribal Nations	\$ 6,000,000	\$ -	\$ 6,000,000
Central Alert System	\$ -	\$ -	\$ -
K-12 Evidence-Based Prevention	\$ 250,000	\$ 1,000,000	\$ 1,250,000
Medication Assisted Treatment	\$ 4,000,000	\$ 1,500,000	\$ 5,500,000
Room & Board for Residential Treatment	\$ 5,000,000	\$ -	\$ 5,000,000
Law Enforcement Agencies	\$ 3,000,000	\$ -	\$ 3,000,000
Statewide Prevention	\$ 750,000	\$ 1,000,000	\$ 1,750,000
Hub and Spoke Pilot Program	\$ 500,000	\$ -	\$ 500,000
Substance Use Disorder Treatment Platform	\$ 300,000	\$ -	\$ 300,000
Surgical Collaborative of Wisconsin	\$ 300,000	\$ -	\$ 300,000
Community Based Prevention - AWY	\$ -	\$ 500,000	\$ 500,000
Medical College of Wisconsin - Periscope Project	\$ -	\$ 600,000	\$ 600,000

K-12 Prevention Program

DHS allocated \$1 million from the FY 25 settlement plan to the Wisconsin Department of Public Instruction (DPI) for grants related to K-12 evidence-based substance use prevention curriculums or programs. DHS was directed to allocate these funds for DPI to distribute to school districts, independent charter schools, tribal schools, and private choice schools to implement evidence-based substance use prevention programming. DPI released an opportunity for funding applications on September 9, 2024, with closure on October 16, 2024. Further details will be shared in future reports.

Medication Assisted Treatment

DHS allocated \$2 million in the FY 24 settlement plan and additional \$3 million in the FY 25 settlement plan for supporting medication assisted treatment for individuals with an opioid use disorder. At least 50% of the FY 25 allocation is required to be awarded to non-governmental agencies. DHS has completed the Interagency Agreement with the Wisconsin Department of Corrections (DOC), allocating \$3.5 million (\$2 million from FY 24 and \$1.5 million from FY 25), to provide these services. Through this initiative, DOC will increase access to MAT to individuals receiving treatment and services at identified Residential Services Programs (RSP) throughout the state. The identified RSPs support the continuation of medications for opioid use disorder for those with an active prescription. Also, at intake, RSP treatment staff will screen clients for opioid treatment needs and refer clients to MAT services if they are interested in receiving MAT services as part of their treatment plan. DOC will also contract with Opioid Treatment Programs to provide mobile MAT services to clients under the supervision of the Division of Community Corrections in underserved areas of the state. This mobile service removes transportation as a barrier to accessing care. These units will administer and dispense medications for opioid use treatment, collect samples for urine screening, dispense take-home medications, and provide medical and psychosocial assessments and counseling, when possible.

Grant to a Statewide Community-Based Organization

DHS allocated \$1 million to a community-based organization that serves after-school youth for the purpose of implementing and expanding opioid prevention programs. The organization must use local law enforcement partnerships in its effort to reduce opioid abuse. DHS awarded \$1 million to the Boys and Girls Club Fox Valley, which represents a network of Boys and Girls Clubs that serve more than 70 communities across the state. This funding will support after-school programming for youth focused on providing them information and skills to make healthy decisions through the SMART Moves Program, a program developed by the Boys and Girls Club of America. Further details will be shared in future reports.

Community-Based Prevention – Competitive Grant Program

DHS will be providing grants to anti-drug coalitions, nonprofit agencies, and faith-based organizations to support prevention programs. Agencies could use the funds to support the following activities: drug prevention, evidence-informed prevention, stigma reduction, training in evidence-informed implementation, community-based education or intervention services, programs and curricula to address mental health needs of young people and any other activities permissible under the settlement agreement. DHS allocated \$500,000 to regional centers of the Alliance for Wisconsin Youth for the prevention activities. The contracting process for this initiative has begun and further details will be shared in future reports.

Medical College of Wisconsin – Periscope Project

DHS allocated \$600,000 to support the Medical College of Wisconsin’s Periscope Project. The contracting process for this initiative has begun and further details will be shared in future reports.

C. Funding Expenditures

As of September 11, 2024, a total of \$13,203,939 in expenditures have been recorded for programs supported with settlement funds; this includes \$11,074,686 in reported previous expenditures (\$1,278,863 in additional expenditures posted to FY 24 Q4 after the last report was submitted) and \$2,129,253 of expenditures in FY 25 Q1.

Under the state’s accounting and contracting systems, in most circumstances, a grantee must report expenditures to the state under its contract. The state then makes payments to the grantee based on those reported expenses within required timeframes. In some circumstances, a grantee will not report expenditures to the state until the end of the project, requesting a single payment from the state. Once the state makes the payments, expenditures are recorded in the state accounting system for the contract.

The fact that a grant may have been approved or awarded does not necessarily mean funds have been expended. DHS does not pre-pay for services supported by these grants. Recipients first incur costs, then submit qualifying expenses to DHS for reimbursement according to the contracted agreement. The terms and conditions of the release of the funds are provided in the signed and executed contracts between DHS and grant awardees. The short timeframe in which DHS has been able to create, open, and award new funding opportunities for partners impacts the ability for those partners to have begun using their awarded funds and invoicing DHS for reimbursement, as many of them have a pending application, just received a notice of award, or are engaged in contract negotiations.

Expenditures by Category			
Category	Previously Expended	FY 25 Q1 Expenditures	Cumulative Expenditures
TOTAL	\$ 11,074,686	\$ 2,129,253	\$ 13,203,939
Expand Narcan® Direct Program	\$ 3,702,735	\$ -	\$ 3,702,735
Distribute Fentanyl Test Strips	\$ 646,860	\$ 18,552	\$ 665,412
Capital Projects	\$ 1,062,539	\$ -	\$ 1,062,539
Funding for Tribal Nations	\$ 1,895,023	\$ 814,856	\$ 2,709,879
Central Alert System	\$ -	\$ -	\$ -
K-12 Evidence-Based Prevention	\$ 30,504	\$ -	\$ 30,504
Medication Assisted Treatment	\$ 1,007,729	\$ 604,117	\$ 1,611,846
Room and Board for Residential Treatment	\$ 1,630,920	\$ 292,946	\$ 1,923,866
Law Enforcement Agencies	\$ 32,441	\$ 222,052	\$ 254,493
Statewide Prevention	\$ 750,000	\$ -	\$ 750,000
Hub and Spoke Pilot Program	\$ 156,098	\$ 63,088	\$ 219,186
Substance Use Disorder Treatment Platform	\$ 159,837	\$ 113,642	\$ 273,479
Surgical Collaborative of Wisconsin	\$ -	\$ -	\$ -

D. Listing of Individual Recipients of Awarded Funds

Please see Section B for recipients of awarded funds.

E. Program Accomplishments or Other Relevant Metrics Resulting from Awarded Funds

In these quarterly documents, DHS will report on program accomplishments and other relevant metrics as funds are awarded and initiatives implemented. All information provided below reflects the reports received by DHS at the time of writing. DHS continues to work with grantees and any additional information provided will be shared with the Committee in future reports. The following is a summary of program accomplishments and other relevant metrics as of this quarter.

Expand Narcan® Direct Program

The Narcan® Direct Program (NDP) provides overdose reversal and life-saving medication to law enforcement agencies, county or municipal health departments, county human services departments, tribal health clinics, syringe access programs, recovery community organizations, and opioid treatment programs.

During the previous three months of reported data (June 2024 – August 2024), the NDP reports training 4,746 people in overdose prevention and Narcan® administration and distributing 16,670 Narcan® kits (total of 33,340 doses). NDP agencies reported over 1,243 successful overdose reversals. Due to data collection limitations, the number of successful overdose reversals is an underreported amount. NDP agencies also indicated training 146 first responders this quarter.

Establish and Fund Fentanyl Test Strip Program & Expand Narcan® Direct Program

During the previous three months of reported data (June 2024 – August 2024), the FTS Law Enforcement reports 3,000 fentanyl test strips (and 0 kits) ordered, distributing 2,697 strips (and 839 kits), and serving an estimated 422 individuals.

Other strategies to expand the Narcan® Direct Program and establish a fentanyl test strip program include the Public Health Vending Machines and the EMS Leave Behind Program.

Public Health Vending Machines (PHVMs) provide Wisconsin an innovative opportunity to protect and promote the health and safety of people who use drugs. Many Wisconsinites do not seek assistance or

services for their drug use due to a fear of being recognized, shamed, judged, and arrested. PHVMs, also referred to as harm reduction vending machines, act as a safe haven for people to obtain no-cost, stigma-free preventative health, and wellness services. They provide the opportunity for discrete, confidential access to harm reduction tools.

Awarded agencies are ordering and waiting on machine production, restocking, and monitoring vending machine use, and engaging the community to build support and combat stigma. Vital Strategies, Wisconsin's partner in the Bloomberg Overdose Prevention Initiative, is providing support to all agencies implementing PHVM in Wisconsin through the convening of a monthly community of practice. This venue provides agencies the ability to share resources, address successes and challenges, and network with other agencies. This program is supporting 17 operational PHVM across Wisconsin. To see the location of these and all the other PHVM operating in Wisconsin, visit <https://www.dhs.wisconsin.gov/opioids/safer-use.htm>. Over 13,000 individual supplies were distributed through PHVMs during this quarter.

Comments from the PHVM implementors reflect direct impact on their communities. Comments this quarter include, "We were advised by a [syringe service provider] client that one of their friends was overdosing and the people they were with accessed our machine to get Narcan and saved their life" and "[we noticed] higher use of fentanyl test strips after an overdose spike alert."

EMS Leave Behind Programs increase access to overdose prevention tools, including Narcan® and fentanyl test strip supplies, and is an essential component to reducing overdoses and overdose deaths in Wisconsin. EMS providers across the country and within Wisconsin have instituted public safety-based Leave Behind Programs. Leave Behind Programs allow EMS professionals to distribute, or "leave behind," overdose prevention tools and resources at the scene of care, or after transport to a hospital, with the patient and/or their social networks (family, friends, roommates, etc.). This model presents an innovative opportunity to expand access to life-saving tools for individuals at high risk for overdose and death.

Additionally, Wisconsin participated in a National Governors Association Learning Collaborative on Expanding the Role of EMS to Prevent Overdose. Wisconsin is using this opportunity to build a statewide support program for EMS agencies implementing a Leave Behind Program – developing training materials, a data collection process, and an evaluation plan. DHS anticipates that by providing the backbone support and essential infrastructure components, additional EMS agencies across Wisconsin will implement Leave Behind Programming.

Awarded agencies are actively distributing kits in their communities. Fifteen grantees report actively distributing supplies via 17 distinct agencies, and 7,500+ individual supplies distributed through EMS Leave Behind Programs during this quarter.

Comments from EMS agencies on the impact of these funds in their communities include, "[Leave-behind kits] have been utilized with [naloxone being administered prior to EMS arrival]," and one agency reports the impact of the kits on efforts to reduce stigma around harm reduction materials. For the second quarter in a row, several grantees report overdose incidents to be down in their jurisdiction in recent months.

Capital Projects

Community-based providers offering prevention, harm reduction, treatment, and recovery services for individuals with an opioid use disorder were invited to apply for funds to support capital projects expanding services in Wisconsin. DHS awarded part of this funding for a capital project that supports the expansion of bed capacity for the treatment of pregnant and post-partum women in a family-centered

treatment environment and at least \$3 million of these funds were awarded to support projects in counties with fewer than 500,000 residents.

Arbor Place (Dunn County)

Throughout the second half of year one of the grant project, Arbor Place had meet regularly with Royal Construction and Wendell Architectural firm to begin the process of space planning and building design. The treatment unit for women and their children has been taking shape, moving from words on paper to a solid design, based on what we know to be needed spaces and useful space design.

During the second quarter of the grant project, Arbor Place, Inc. leadership actively worked with Royal Construction, Inc. (construction management firm), Wendel Company (architectural firm), and various building experts (HVAC, Electrical, Plumbing, etc.) to finalize the new building design. On June 4, 2024, the final page turn meeting was held to do one last final review of all building plan elements. Permits have been applied for and the bidding process for all subcontracted work has begun.

A groundbreaking ceremony was held at the site on June 13, 2024. It was well attended by approximately 100 persons, with a robust panel of speakers sharing about the importance of the project.

Lighthouse Recovery Community Center, Inc. (Manitowoc County)

In May, renovations continued for the capital project at 721 Park St Manitowoc. One bathroom was gutted and refitted, and another ADA bathroom was constructed. Appliances were delivered and installed, hard-wood floors were refinished, windows were installed, and painting was completed. There was a 2-day delay after asbestos was discovered in the basement, the DNR was notified, and the asbestos was abated. Occupancy was received from the City of Manitowoc 6/27/24. Then the huge job of ‘outfitting’ the house began. Beds, nightstands, living room furniture, tot beds, pack ‘n plays, curtains, children’s furniture, etc. were purchased, unpacked and in many cases assembled. Ribbon Cutting at “The Port – a place of safe arrival” was held on Tuesday, 7/30/24. Finally, on 7/31/24 additional grant funding was received from the West Foundation to assist with the added cost of the sprinkler system. First residents were anticipated to move in on August 12, 2024.

Meta House (Milwaukee County)

Meta House will be closing on the purchase of the subject property using funds from private fundraising efforts to fund the purchase. Shortly thereafter, Meta House will close on the financing needed for construction. Meta House has secured almost all the permits and approvals needed to begin construction and hopes to commence full site work before the end of September. A ceremonial groundbreaking event was held on August 12, 2024. Contemplating an 18-month construction schedule, Meta House anticipates relocating services to its new campus in early 2026.

Funding for Tribal Nations

DHS is supporting federally recognized Tribal Nations in providing a spectrum of strategies across the continuum of care to address their unique conditions; provide programs and activities with minimal demands or barriers for participants, while building upon the strengths of local tribal culture, tradition, and practices; and provide high quality, effective, equitable, understandable, and respectful prevention, harm reduction, treatment, and recovery efforts and services that are responsive to diverse cultural health belief and practices, preferred languages, health literacy, and other communication needs.

Bad River Band of Lake Superior Chippewa - The Bad River Band of Lake Superior Chippewa has been able to prioritize evidence-based drug treatment, prevention and harm reduction through programming supported by the Tribal Nations Opioid Abatement Grant. Several positions have been supported through this grant, including a MAT Nurse/Coordinator and the Drug User Infectious Disease Prevention Specialist. Both positions have daily interactions with tribal members at high risk of death from opioid overdose. Additionally, this program provided several months of funding to staff the Tribe's warming shelter, which stabilized many tribal members at high risk of dying from overdose by offering housing and critical services (i.e., peer support, referrals to services, nutrition support). Travel funds from the Tribal Nation Opioid Abatement Grant were allocated towards a youth incentive trip in June 2024, to acknowledge members of the Bad River Youth Team who play bagidaa'awewin (lacrosse), the sacred medicine game, which is a culturally based youth drug prevention strategy. In addition, these funds supported the Youth Graduation Ceremony & Star Quilt/Eagle Feather Presentation, which offers culturally centered incentives and acknowledgment to Bad River youth who pursue their education and graduate from high school.

Forest County Potawatomi - Positions at Transitional Living have remained open. Interviews have been held on multiple occasions however, the Tribe has been unsuccessful in the recruitment of new staff. Through strategic scheduling and the assistance of Recovery Coaches, the staff have been ensuring that there is always someone in the house with the clients.

In-house groups have continued during this period. These include an All-recovery meeting and life skills. The house also facilitates a weekly Wellbriety meeting which is aimed at providing the client the opportunity to run meetings themselves. The clients also regularly attend local NA meetings during the week. The goal is to have the clients participate in either a meeting or a pro-sober, pro-social activity every day during the week. There is still a desire to form an alumni group; however, staff shortages have prevented this from happening.

The department is considering starting a family group in the summer based on the Matrix training. This project is still in the early phase and the details are yet to be established. The Tribe will also be starting a relapse prevention group within the local jail. This once-a-week meeting will be to prepare individuals for the challenges they may experience after release.

Traditional Medicine is held two days a month. In this period, the healers were utilized at 31 different appointments. There was a need in the community to relocate the traditional healing sweat lodges. During this period, new lodges were erected in Carter, Wisconsin near the Tribal WeCare Building. Sweats are now held the Wednesday that the Traditional Healers are on site and 15-25 individuals participate.

Ho-Chunk Nation – The Tribal Nation's annual summer health fairs started in June with one in Baraboo and one in Wittenberg. In addition, behavioral health and peer recovery participated in several large cultural events during this time including Traditional Lodge, Area Meetings, and Pow-Wows. The MAT clients continue to increase with having a prescriber available all days of the week. The Tribal Nation has also been providing Sublocade® for an entire year with good results. The Tribal Nation is starting peer recovery groups in the Sauk County jail once a week to connect clients with services before they release.

Lac Courte Oreilles Band of Lake Superior Chippewa - The Lac Courte Oreilles Tribal Nation Opioid Abatement Efforts Program has made significant progress, addressing opioid addiction and related challenges in the community. Key goals include contacting 80% of individuals at intervention points, maintaining retention during staff transitions, raising awareness of opioid-related careers, and completing a feasibility study for a tribally owned detox and residential treatment center. To meet community needs, the Tribal Nation has focused on providing supportive environments for individuals transitioning from detox and residential treatment. Efforts have been focused on ensuring shelters are recognized as sober and supportive living environments, reducing the risk of opioid overdoses.

The Lead transitional coordinator, transitional coordinator and intervention specialist have worked primarily on intervention, detox, treatment, sober living, and transitional care. The House manager position has been left open until the director of the men's sober living home is hired and begins to hire their own staff. Once the Men's Sober Living Home director is hired, they will oversee staff training to prepare for the home's launch.

The men's shelter has undergone extensive renovations, creating a safer, more welcoming environment with improved accessibility. Significant improvements to the sober living home and cultural sweat lodge area, supported by other LCO Behavioral Health grants have been made.

The Tribal Nation has collaborated with the LCO Behavioral Health Center and other grants to host opioid awareness events, including a youth opioid prevention trip to Madeline Island, benefiting 30 participants. Other event collaborations have included Narcan® training, sobriety feasts, sobriety walks, peer support talking circles, and other cultural classes.

Through a Memorandum of Understanding with LCO Behavioral Health, the Tribal Nation has expanded detox, treatment, and sober living services. The Tribal Nation has partnered with Aspire Sober Living to assist in launching the Men's Sober Living Home, with policies and procedures currently under review by the LCO Legal Department.

Lac du Flambeau Band of Lake Superior Chippewa - During this project period the Tribal Nation used funds to send 5 individuals to sober living facilities after completing a residential treatment program. The individuals had up to 90 days paid at the facilities. The Tribal Nation used the funds to cover expenses for an out of state residential treatment center when the client's insurance would cover 80% of the treatment costs. The Tribal Nation used the funds to cover residential treatment for a client who did not have insurance coverage for residential treatment.

Menominee Indian Tribe of Wisconsin – During the reporting period the Tribal Nation was able to fund 10 treatment referrals (3 sober living, 7 residential treatment), purchase and dispense harm reduction supplies, purchase hygiene supplies and create hygiene kits, and purchase and distribute yard signs for community.

Oneida Nation- The Tribe had completed the Hazelden MOUD training, which was scheduled for June 25-26th and had 81 participants. including primary care providers, nurses, and staff at Behavioral Health. The Recovery Coach Academy training occurred June 24-28th and had 13 participants. The Tribe has been able to train the cultural advisors on tracking how many patients are utilizing services in the EMR. The kickoff for the Fentanyl is Everywhere Campaign occurred on 5/30/24. Kunhi-Yo "I'm Healthy" Overdose Awareness Conference is planned for 8/29/24.

Red Cliff Band of Lake Superior Chippewa - The Red Cliff Wrap Around Care Team is responsible for oversight and implementation of the opioid response efforts. The team consists of

Health Administration, Behavioral Health, Wrap Around Coordinator, Human/Family Service Administrator, Police Chief, Housing Service Manager and Judge. The team meets bi-weekly to discuss progress and plans.

A workgroup was convened to develop the Medication for Opioid Use Disorder (MOUD) clinic. The team consists of the physician, pharmacist, behavioral health director, peer specialist, behavioral health provider, associate judge, clinic manager and health director. The team met bi-weekly to review and develop policies and infrastructure for the MOUD program with wrap around services. The Marriage, Family Licensed Therapist was hired in October 2023. During the project period, a total of 49 clients were served with 457 visits.

Inpatient treatment for opioid use is not a service provided within the Red Cliff service system. A total of six (6) individuals received treatment through this funding. Funds also supported the hiring of a consultant to assist with updating the Tribe's Action Plan to address the opioid and other substance use crisis in the community. Community feedback was solicited via a three-day Gathering of Native Americans (GONA). This was facilitated by a trainer and covered the four pillars of belonging, connection, mastery, and generosity. The Tribal Action was approved by the Tribal Council in March 2024.

Sokaogon Chippewa Community- Through this funding, the Tribal Nation successfully implemented Narcan® vending machines. The need to restock them frequently highlights their effectiveness in saving lives. This funding has significantly contributed to advancing behavioral health and substance misuse services, ensuring quality care for patients from dedicated providers. The Opioid Abatement funding has been instrumental in allowing the Tribal Nation to rehire essential personnel in response to the turnover the Tribal Nation has experienced recently. This support has enabled the Tribal Nation to stabilize the workforce, which is critical for maintaining continuity and quality in services. As a result, the Tribal Nation has continued to see positive outcomes within the behavioral health department. By sustaining the funding and further investing in competitive salaries, the Tribal Nation has not only attracted qualified professionals but is also fostering an environment that enhances staff retention and morale. This, in turn, translates into improved care and support for clients, ultimately leading to better overall outcomes for those served.

St. Croix Chippewa Indians of Wisconsin - In the final months of the Opioid Abatement Grant, several efforts came to completion while other activities blossomed into sustainable efforts. Peer Support Specialists have been invested in by the St. Croix Tribe by retaining their services after the life of the grant has ended. They continue to work within the community with established clients and aiding new ones on their path to recovery. Client contacts continue to rise as Peer Support Specialists efforts expand. The Elder Advisory Board this grant established continues to meet and discuss topics related to helping the Opioid Abatement efforts and efforts for the St. Croix Tribal Health Clinic. This board has grown to be a useful tool to the Health & Human Services Department. Their contributions in helping create culturally appropriate approaches with the community has been immeasurable. The Elder Advisory Board continues to meet and assist the Clinic beyond the life of the grant.

Peer Support Specialists in the reporting period wrapped up their cultural events typical with the Spring Season and began to develop initiatives for the summer and fall seasons. Peer Support Specialists worked with Tribal Police and clients in efforts bridge the gap between them. They've also started working on plans for the late Summer and early Fall Season, which is typically Wild Rice Harvest season. Peer Support Specialists, in addition to their normal responsibilities, began working with clients on crafting the tools required for Wild Rice Harvest, Sage Collection, and

the importance of traditional foods. Many of Peer Support Clients have expressed their interest in getting back into their traditional ways with the goal of sustainable recovery from OUD. Treatment expenses from this grant went over the original allocation. Originally budgeted at \$105,300, actual expenses were at \$108,446.81. It is both fortunate and unfortunate this line item needed to be adjusted higher than originally intended. Fortunate in that Peer Support Specialists have been able to make connections and referrals to those who need help. Unfortunate in that the need is this great for those battling with OUD.

Stockbridge-Munsee Community Band of Mohican Indians - A vendor has been found to provide SUD focused training to the community. The training will be focused on ways to identify signs of drug use, the dangers of drug use, and how to help a family, friend, or employee with SUD. The training will also incorporate Narcan® and fentanyl test kit use.

Planning was conducted for the Tribes strategic plan related to SUD within the community. Discussions included the proposed use of a building for Transitional living to include a peer recovery coach and a possible sober living facility, as well as options to make medication reviews easier for staff and patients, as this is currently required for any controlled substance prescribed out of the SMHWC.

Efforts are being made on placing a public health vending machine at the C-Store (Little Star). The vending machine will have Narcan®, fentanyl test kits, first aid kits, gun locks, hygiene kits, and drug disposal bags. The machine is slated for delivery for late August. The Tribe planned the setup of this machine and posted to hire a part time position to keep the machine stocked. The Tribe started purchasing supplies for the vending machine and for distribution out of the SMHWC.

Central Alert System

The overdose alert system, or Wisconsin Suspected Overdose Alerts for Rapid Response (WiSOARR), is a secure web-based application currently in development at DHS. The system is currently in its last round of development before statewide launch. System developments to facilitate user onboarding are currently underway. The initial version of the system leverages two near-real time data sources – ambulance runs and emergency department visits – for suspected overdose surveillance and anomaly detection.

To date, three main features have undergone testing and review:

- Mapping and analytics dashboard: Users will be able to visualize approximate locations of overdose events based on filters selected. Basic summary analytics (e.g., overdose counts, demographic information, and time series visualizations) are also available.
- Customized alert configuration module: Users will be able to configure “alert profiles”, which allow the user to opt in to receive alerts for deviations above a designated threshold based on the number of overdoses captured via a specific data source, time window, and geographical area. A user may create, share, and subscribe to any number of alert profiles. Alerts are disseminated via email and visible within the web application.
- User account administration: User access will be provided via discrete user groups, managed locally. The application facilitates the creation of user groups by DHS administrators, assignment of local administrators to create accounts for staff, and maintenance of data use agreements.

Work has also been completed to prepare for integration of data from coroner/medical examiners and public safety partners. Coroners and medical examiners will be able to submit timely, preliminary information on fatal overdose incidents either by manual form submission in the application, or they may work with DHS staff to set up direct submissions to WiSOARR via API. Law enforcement officers may submit overdose incident information via a specialized form in Badger TraCS. Development of the

infrastructure necessary to integrate these two new data sources was completed ahead of schedule, and efforts to onboard submitting agencies will begin following the application's initial launch.

An inter-divisional communications team has also been convened to create, document, and implement a communications plan for the release and long-term support of WiSOARR. Materials include:

- A series of training modules and tutorials to aid users in using the system
- Spike response resources and support
- Communications to external partners upon system go-live

Critical security and outage response planning and documentation is in progress; this work ensures the protection of data architecture within the system and establishes risks, impacts, and response to potential system outages after go-live. Further progress has also been made to plan for and garner support for the long-term sustainability of WiSOARR; this will ensure the smooth launch and longevity of the application beyond its initial launch, currently planned for late 2024.

DHS uses braiding funding sources to support the development and implementation of WiSOARR. Funds continue to be drawn from American Rescue Plan Act (ARPA) funds and once expended, DHS will begin utilizing settlement funds to complete this project.

K-12 Evidence-Based Substance Use Prevention Curriculums or Programs

DHS had previously allocated \$250,000 to the Wisconsin Department of Public Instruction (DPI) for grants related to K-12 evidence-based substance use prevention curriculums or programs. Over the 2023-24 school year, DPI grantees utilized various measures for collecting data throughout implementation of the projects. Some of the reporting measures included quantitative data such as attendance, survey data, academic achievement, and office referrals to analyze program effectiveness. Qualitative data included meeting data, progress notes, participation logs, workgroup notes, verbal communication feedback, emails, and interviews. Brief descriptive summaries were also collected through success stories showcasing how this funding has impacted respective organizations.

DPI grantees did experience barriers to their projects such as lack of time, lack of staff, lack of support from the communities, leadership changes, students encountering challenging influences outside of the program, and technology (social media) providing students with unrealistic representations of healthy lifestyles. Lastly, socio-economic statuses of participants presented various challenges such as students coming from stressful home lives with limited resources which, in turn, impacted their health.

Many school districts report successes in implementing research-based opioid prevention programs and strategies to support new or existing substance use prevention programs specific to opioid prevention and unintentional fentanyl exposure. DPI reports that without this grant funding opportunity, districts would have had a difficult time implementing programming activities of this nature.

As discussed earlier in this report, FY 25 contracting has been completed. DPI will distribute allocated funds to school districts, independent charter schools, tribal schools, and private choice schools to implement evidence-based substance use prevention programming for the 2024-25 school year. DPI released an opportunity for funding applications on September 9, 2024, with closure on October 16, 2024. Grantee selections and program metrics will be shared in future reports.

Medication-Assisted Treatment

Wisconsin Society of Addiction Medicine (WISAM)

This pilot project is intended to develop telemedicine for Wisconsinites to provide access and induction of buprenorphine products with the use of peer support and recovery coaching. They are working to develop a warm handoff to the WISAM Hotline from the State Opioid Response

(SOR) funded Addiction Recovery Helpline and to community providers within Wisconsin. WISAM is developing processes with the Addiction Recovery Helpline.

WISAM continues to work on project management with Apricity, a peer recovery coach organization based in Neenah which serves northeast Wisconsin and is expanding to all regions of Wisconsin. Apricity staff have met with the Addiction Recovery Helpline to evaluate the database and to train on data entry. WISAM has engaged with Wisconsin Association for Free and Charitable Clinics (WAFCC) representatives and continues to evaluate their role in the hotline development. WAFCC is the state Association of Free and Charitable Clinics and operates in all regions of Wisconsin. WISAM is also working on developing a buprenorphine directory which will be utilized by hotline staff, and available publicly as appropriate through the Addiction Recovery Helpline online directory.

Milwaukee Health Systems (Eau Claire), Milwaukee Health Systems (Appleton), Quality Addiction Management (Beloit), and Addiction Medical Solutions (Janesville)

Agencies are developing mobile Opioid Treatment Program (OTP) units to provide all three forms of FDA approved medications for opioid use disorder, clinical services, and peer support and recovery coach services. These units will also provide overdose prevention and harm reduction supplies including naloxone, fentanyl test strips, and referrals to community services to address the needs of the whole person.

Milwaukee Health Systems (Eau Claire)

The mobile OTP unit has been completed with delivery scheduled for late September 2024. A storage facility has been secured for the mobile OTP. Staff have completed multiple outreach events and public awareness events in Barron County and Chippewa County. A state certification survey is scheduled for 10/14/24. The target service area remains as the Black River Falls and the surrounding communities.

Milwaukee Health Systems (Appleton)

The mobile OTP unit has been completed and delivered. A storage facility has been secured for the mobile OTP. A one-year lease has been obtained and executed for the anticipated dispensing location. Staff have completed multiple outreach events and public awareness events in the community. State certification was completed on 8/19/24 and they are currently awaiting DEA certification. The target service area remains Shawano and the surrounding communities.

Quality Addiction Management (Beloit)

The mobile OTP unit has been completed and delivered. A one-year lease has been obtained and executed for the anticipated dispensing location. Staff have completed outreach events and public awareness events in Walworth County and Rock County. State certification is scheduled for October 2024. The target service area remains Delevan and the surrounding communities.

Addiction Medical Solutions (Janesville)

Contracting has been finalized and construction of the physical mobile unit remains in progress with anticipated completion and delivery in October 2024. State certification will be scheduled upon delivery of the mobile unit. The target service area remains Rock County.

Wisconsin Department of Corrections

Through this initiative, DOC will increase access to MAT to individuals receiving treatment and services at identified Residential Services Programs (RSP) throughout the state. The identified RSPs support the continuation of medications for opioid use disorder for those with an active prescription. Also, at intake, RSP treatment staff will screen clients for opioid treatment needs and refer clients to MAT services, if they are interested in receiving MAT services as part of their treatment plan. DOC will also contract with Opioid Treatment Programs to provide mobile MAT services to clients under the supervision of the Division of Community Corrections in underserved areas of the state. This mobile service removes transportation as a barrier to accessing care. These units will administer and dispense medications for opioid use treatment, collect samples for urine screening, dispense take-home medications, and provide medical and psychosocial assessments and counseling, when possible.

During this reporting period, DOC staff met to discuss implementation strategies and communications with contracted vendors who will be providing services. DOC staff are working with identified RSPs to develop a projected number of participants as well as reporting procedures to capture the number of individuals screened, assessed, and referred to MOUD services. Two of the identified RSPs, Meta House and Bethany Recovery Center, have a projected number of 40 individuals who will be screened and assessed for OUD per three-month reporting period (or 160 per year). Additionally, DOC is contracting with community opioid treatment programs (OTPs) to provide mobile MAT services to clients. AMS, one of the contracted mobile MAT service vendors, has projected the number of individuals served per year as 50 – 100. Once the second contracted mobile MAT service vendor's (CMS) certification process is completed, these projections will be updated to include those participants.

Room and Board Costs for Residential Substance Use Disorder Treatment

Wisconsin Medicaid has offered a residential substance use disorder treatment benefit since February 2021. It provides treatment for youth and adults to promote recovery from substance use disorder and reduce the incidence and duration of institutional care Medicaid members might otherwise need. Federal law prohibits Medicaid from reimbursing for the costs of room and board. Covering the costs of room and board is a barrier to residential substance use disorder treatment for many Medicaid members. To make this benefit more accessible, DHS solicited applications from Tribal Nations and counties for funding to cover the room and board costs for individuals with an opioid use disorder or at risk for an opioid overdose in 2024. During this reporting period (CY 24 April 2024 – June 2024, awarded agencies provided services to 150 people for a total of 4,023 days of services.

Law Enforcement Agencies Opioid Abatement Efforts

Law enforcement agencies are provided funds to support community drug disposal, education on medication assisted treatment, diversion, or deflection programs, or providing medication assisted treatment in jail settings.

Ashland County Sheriff's Office

The program initially had some challenges related to healthcare services and subsequently met with DHS staff for Technical Assistance. Challenges were discussed and the program is now operational. The case manager started employment with this agency in June 2024. The case manager was onboarded and provided orientation and training. She researched tools to use with inmates and began seeing inmates for service provision by the end of June. Despite the program just starting, program participants were provided with 1:1 peer counseling sessions at least once a week on a weekly basis. The topics covered during these sessions were tailored to the individual needs of the participants and included cognitive based thinking habits and wellness recovery

plans. Participants are also provided with 1-hour AODA groups once a week, along with Mental Health 1:1 sessions every Friday.

Buffalo County Sheriff's Office

This project has completed successfully. The agency continues to distribute drug deactivation kits, with over 100 kits having been distributed in this reporting period.

Columbia County Sheriff's Office

Columbia County's programming within their jail continued during this reporting period. Columbia County Sheriff's Office staff report inmates have access to referral forms, which they can complete if they so wish. Once submitted, they are evaluated by jail medical staff and seen by peer support counselors. Other progress during this reporting period includes treatment programming for people incarcerated with an opioid-use disorder serving jail residents. Service provided include: 513 people screened for opioid use disorder; 29 people enrolled in medication-assisted treatment for opioid use disorder; 0 people received methadone treatment; 20 people received naloxone/Narcan®; 20 people received peer support services; and 20 people received case management or care coordination services. Peer support is being provided from two different local agencies who provide services to clients in the jail and follow up with them after release.

Crawford County Sheriff's Office

Crawford County has engaged in efforts to price, purchase and determine a location to install a permanent drug drop box.

Eau Claire County Sheriff's Office

During this reporting period, a community drug disposal box was installed in July 2024 and a public education video was created. The agency's Deflection Program has encountered several challenges leading to delays. Initially, program launch was delayed due to delays in receiving funding. Additionally, building the new program involved developing various technologies and processes, including an automated system for officers to submit referrals. This aspect has proven particularly slow and complex, contributing to further delays. Despite these setbacks, the deflection program officially launched on May 1st. As a new program, one challenge has been ensuring that stakeholders consistently remember to engage with and refer individuals to services. The novelty of the program means that it is still becoming an integral part of their regular practice. Another challenge has been engaging referrals effectively. Many individuals contacted by the police have not been ready for change at the time of contact, leading to lower-than-expected engagement. To improve this, the program is exploring alternative methods for engaging referrals and creating additional opportunities to spark interest and buy-in for the program. Overall, there is a commitment to addressing these issues through enhanced communication with law enforcement and innovative approaches to engaging with potential referrals.

Jackson County Sheriff's Office

This reporting period has proven to show strong progress toward project implementation and function. All three programs have experienced forward momentum. Online education materials from Overdose Lifeline have been purchased for all Law Enforcement officers and trainer materials to sustainably provide this training to new staff, jail staff, and other stakeholders were also purchased. To date, deflection team has conducted two active outreach deflection efforts and one prevention deflection where a referral was completed, and the individual received treatment services for OUD. Additionally, supplies and materials for this program have been purchased to

aid in efforts to fully initiate the program. Treatment services for those in jail with an OUD or at risk of opioid overdose have also expanded. Policies and procedures have been implemented, enhanced, and modified as needs are being identified. Two part-time case managers have been hired with grant dollars to assist in program implementation, data tracking, and coordinated reentry efforts. To date, a total of seven incarcerated individuals have received MOUD, individual therapy, and coordinated reentry for those who were released to the community. Coordination of care for one individual who transferred to a WI DOC facility was also completed to allow for the continuation of MOUD while serving a prison sentence.

Kenosha County Sheriff's Office

The agency is ready to acquire and deploy drug deactivation kits to promote a safer, drug-free community. They have begun to identify the organizations and distribution methods to expand the reach to ensure households within Kenosha County have access to this vital resource. Due to the change in staffing of the agency's Fiscal Services Manager, there was a slight delay in getting program started. The position has now been filled and the agency is on target to start the procurement process.

Madison Police Department

The Madison Police Department's Madison Area Recovery Initiative is a multi-agency collaboration which seeks to deflect and divert individuals struggling with opioid and other substance use disorder away from the criminal justice system and connect them with treatment, recovery and peer support services. This current DHS Opioid Abatement grant to MPD supports the below listed aspects of the MARI program.

During this reporting period, MPD hired a MARI Program Assistant position in July 2024. The MARI PA has been trained on all tasks and is providing critical support to MPD's MARI program. MPD recently purchased the Cognito software platform for use by MARI Resource Team outreach officers and PA to help track MPD diversion and deflection efforts. Staff conversations are now focused on entering legacy data from the previous system into the new Cognito software system. Staff is also currently customizing software data entry intake screens. MPD anticipates the software will "go live" during the next reporting period. A contract for evaluation related services was completed with UW Population Health Institute, as well as a contract with JB Public Safety Consulting LL for MARI related project coordination services.

Marathon County Sheriff's Office

The Marathon County Sheriff's Office reports processes are running smoothly as the agency strengthens the Medication-assisted treatment education initiative for their staff, as well as awareness training and treatment for people incarcerated with an opioid use disorder within their jail. Staff attended 38 hours of training on a variety of topics which enhanced their awareness and understanding of addiction medicine and harm reduction. SMART Recovery groups have been expanded to offer group to both genders on a weekly basis (rather than every other week) and attendance is at its highest. Seeking Safety groups have been running since January 2024 with one cycle being completed for females and one cycle completed for males in June 2024.

During this reporting period, approximately 588 people were screened for an OUD, 9 people were enrolled in MAT services, 3 people received methadone treatment, 9 people received buprenorphine treatment, 7 people received naloxone, and 5 people received case management or care coordination services.

Menominee Indian Tribe Police Department

Accomplishments and other relevant metrics will be shared in future reports.

Milwaukee County Sheriff's Office

Milwaukee County Sheriff's Office has chosen to decline the awarded amount because hope kits have a two-year shelf life, and the office already possesses a high inventory of the kits. Additionally, the office cannot implement the trainings attached to the grant due to current staffing levels in combination with overtime needs; therefore, this contract was not executed as planned.

Racine County Sheriff's Office

Approximately 1,334 people have been screened for OUD during this reporting period, with 212 people being enrolled in MAT for OUD. Fifteen people have received methadone treatment; 42 people received buprenorphine treatment and 2 people received naltrexone (Vivitrol) treatment. Monthly counseling sessions are provided to methadone patients and a Chronic Care clinic is provided to all Suboxone participants by the agency Nurse Practitioner. Mental health staff provided counseling for all those who have completed withdrawal protocols as well. Other notable metrics include, 6 people receiving naloxone/Narcan®; 12 people receiving peer support services; and 15 people receiving case management or care coordination services during this reporting period.

Rhineland Police Department

Pre-arrest and Pre-arraignment deflection programs for people OUD is scheduled to begin in September 2024. Accomplishments and other relevant metrics will be shared in future reports.

Rock County Sheriff's Office

County Board reviews, contracting, and MOU establishment occurred during this reporting period. Rock County continues to make good progress as efforts continue to be made in launching their staff training and jail programs. The jail began its first phase which is screening. Due to not having a finalized contract in place with a partner agency the program has not fully started. The numbers reflected in this report are the screenings completed, as well as for those who come into custody and remain on their MOUD. Numbers will increase significantly once the agency is able to utilize funding to expand this program further. Approximately 985 people were screened for an OUD, 27 people were enrolled in MAT for OUD, 8 people received methadone treatment, 13 people received buprenorphine treatment, and 6 people received naltrexone.

Sawyer County Sheriff's Office

The agency plans to redesign their proposed program due to unforeseen challenges. They continue to work with the DHS Contract Administrator regarding a new plan proposal. The plan includes combining services with other projects and utilizing this deflection opportunity to create a Community Operations Program (COP) position to promote a relationship between law enforcement and the community.

Shawano County Sheriff's Office

Approximately 4,800 drug deactivation kits were procured during this reporting period. The agency is now working to distribute the kits to local municipalities.

Sparta Police Department

During this reporting period, the agency has finalized an agreement with the Patrol Union on the Community Response Specialist position and posted the position. The hiring and selection process has now started. The agency has met with the Director of Next Steps for Change regarding the relationship between agencies and how referrals would be made for peer support.

An MOU between the Sparta Police Department and Next Steps for Change will be created in the future. Officers began their wellness checks with Hakes Wellness Solutions and began researching equipment and training that the agency will be purchasing/implementing in the future of grant term. The agency is excited to get the pre-arrest/pre-arraignment deflection program running and looks forward to shadowing other agencies with successful programs to help learn about more possibilities within the community.

Village of Cottage Grove Police Department

This program is completed and is operational. The agency purchased approximately 200 drug deactivation kits during this reporting period and works to disseminate them into the community. A new permanent drug drop box was installed in August 2024 for community use.

Statewide Community-Based Organization for After-School Programming

Funds were previously awarded to the Boys and Girls Club Fox Valley, which represents a network of 26 Boys and Girls Clubs serving more than 70 communities across the state of Wisconsin. This funding supports after-school programming for youth, focused on providing them with information and skills to make healthy decisions through the SMART Moves Program, a program developed by the Boys and Girls Club of America. By the close of the 2023-24 school year in June 2024, approximately 10,544 program hours were completed by youth in the 23 participating Boys & Girls Clubs. Approximately 705 youth had completed 11 or more program sessions and 955 youth have improved or maintained their healthy decision-making skills as demonstrated by a pre- and post-survey completions.

As discussed earlier in this report, contracting for FY 25 was completed during this reporting period, with 21 locations opting in for future programming. Program metrics and additional information will be shared in future reports.

Hub and Spoke Pilot Program

Vin Baker Recovery is an Opioid Treatment Program and Hub and Spoke Pilot provider which opened mid-March 2024. During this reporting period, Vin Baker Recovery enrolled 17 individuals within Milwaukee County and filled critical clinical staff positions including peer support specialists.

Surgical Collaborative of Wisconsin

The Surgical Collaborative of Wisconsin (SCW) utilizes a comprehensive approach to opioid stewardship that maximizes both safe opioid prescribing and pain management for potentially vulnerable surgical patients. During this reporting period, the contract between DHS and the Surgical Collaborative of Wisconsin was fully executed.

SCW's interventions for surgical prescribers aim to address the supply of prescription opioids available for misuse. The following educational opportunities and materials were created and distributed by SCW via email and website to over 300 surgeons, nurses, Advanced Practice Providers, pharmacists, quality improvement professionals, and hospital leadership during this reporting period:

- SCW collaborated with Dr. Tudor Borza, MD, MS (Assistant Professor, Department of Urology, University of Michigan, Honorary Fellow Department of Urology, University of Wisconsin, Co-Director of Opioid Stewardship, Surgical Collaborative of Wisconsin) to create and distribute the Grand Rounds presentation "Postoperative Pain Management and the Opioid Epidemic: The Path Forward in 2024. Dr. Borza presents on the role of surgical prescribing in the opioid epidemic, describes components of multimodal pain management strategies, and discusses safe and effective opioid sparing pain management strategies in surgical patients. This activity is approved for up to 2.0 *AMA PRA Category 1 Credits*[™] through the American College of Surgeons and is available at no cost to SCW members. It also qualifies as opioid based education for ongoing statewide credentialing.

- With input from surgeons, external groups, and published guidelines, SCW updated and distributed Opioid Prescribing Recommendations for Opioid Naïve Patients. This is an evidence-based opioid prescribing guidance card that covers common General Surgery, Breast Surgery, OB/GYN, and Urology procedures managed by SCW surgeons. A 4x6-pocket version of the card can be downloaded and printed at no cost to SCW members.
- SCW partnered with Dr. Amit Singh and Dr. Bill Peppard from the Medical College of Wisconsin to create a new educational opportunity focused on post-operative pain management strategies for both opioid-naïve and opioid-tolerant patients. This opioid stewardship webinar is available to all SCW members and approved for 1.00 *AMA PRA Category 1 Credits*[™] through the American College of Surgeons for 3 years.

Using prescription fill data from July 2022 to June 2023, SCW created and distributed benchmarked performance reports on post-operative opioid stewardship. These reports describe prescribing guidelines and post-operative opioid fills at the surgeon and hospital level for the following procedures: laparoscopic cholecystectomy, breast procedures, appendectomy, and inguinal hernia repair. By comparing the opioid prescribing for their patients to guidelines and statewide prescribing, SCW surgeons are encouraged to prescribe fewer opioids, leaving less unused medications in the community for misuse and diversion.

SCW is preparing to launch an evidence-based education program to prevent the misuse of opioids through patient at-home destruction and disposal. SCW is partnering with Detera Systems to provide their Drug Deactivation and Disposal Pouch to patients receiving a post-operative opioid prescription for free. Each pouch will have a custom project label with QR code that directs the user to opioid education, information about the program, and a brief user survey. This program is scheduled to launch Fall 2024.

Please contact me if you have any questions regarding this report.

Sincerely,



Kirsten L. Johnson
Secretary-designee