



# COUNTY OF SAN DIEGO

## AGENDA ITEM

### BOARD OF SUPERVISORS

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**DATE:** May 23, 2023

**26**

**TO:** Board of Supervisors

### SUBJECT

**RECEIVE UPDATE ON OPIOID SETTLEMENT FRAMEWORK IMPLEMENTATION AND HARM REDUCTION MEDIA CAMPAIGNS INCLUDING ILLICIT FENTANYL AWARENESS FOR YOUTH; AUTHORIZE COMPETITIVE SOLICITATIONS FOR PUBLIC MESSAGING, OUTREACH, AND EDUCATION CAMPAIGNS; AND AUTHORIZE UPDATES TO THE OPIOID SETTLEMENT FRAMEWORK (DISTRICTS: ALL)**

### OVERVIEW

The overdose epidemic continues to affect communities nationwide, with illicit fentanyl driving a large proportion of the overdose deaths. In San Diego County, opioids are involved in the majority of overdose deaths. In response to this crisis, the San Diego County Board of Supervisors (Board) approved several recent actions including, but not limited to:

- Adoption of the County of San Diego's (County) Comprehensive Harm Reduction Strategy (June 8, 2021 (4));
- Approval of a media campaign to prevent fentanyl overdoses in youth (October 19, 2021 (2));
- Declaring Illicit Fentanyl a Public Health Crisis (June 28, 2022 (22));
- Enhancing Fentanyl Education and Strengthening Harm Reduction Efforts for Young People (October 11, 2022 (11)); and
- Adoption of the San Diego County Opioid Settlement Framework (October 25, 2022 (20)).

Today's action provides updates on these Board-directed actions and seeks approval to issue competitive solicitations for as-needed behavioral health responsive public messaging, outreach, and education, to meet the urgent needs of the region. Additionally, today's action authorizes the Chief Administrative Officer or designee to review the Opioid Settlement Framework established on October 25, 2022 (20) to ensure alignment with Opioid Settlement Agreements and any new State guidance and return to the Board in 120 days with any recommended changes. This item supports the County's vision of a just, sustainable, and resilient future for all, specifically those communities and populations in San Diego County that have been historically left behind, as well as the ongoing commitment to the regional *Live Well San Diego* vision of

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healthy, safe, and thriving communities. This will be accomplished by investing in access for care, support, outreach, and education for those impacted by the opioid crisis.

## **RECOMMENDATION(S)**

### **CHIEF ADMINISTRATIVE OFFICER**

1. Receive an update on the implementation of the Opioid Settlement Framework.
2. Receive an update on harm reduction outreach and education campaigns, including a media campaign to prevent fentanyl overdoses for youth.
3. In accordance with Section 401, Article XXIII of the County Administrative Code, authorize the Director, Department of Purchasing and Contracting, to issue one or more competitive solicitations for as-needed behavioral health responsive public messaging, outreach, and education, which may include but is not limited to overdose prevention, harm reduction, illicit fentanyl, naloxone, prescription opioid misuse, and other urgent behavioral health priorities, including crisis services, Community Assistance, Recovery & Empowerment Act, and others, as needed, and upon successful negotiations and determination of a fair and reasonable price, award up to six contracts for an initial term of up to one year, with four option years, and up to an additional six months, if needed; and to amend the contracts to reflect changes in program, funding or service requirements, subject to the availability of funds and the approval of the Agency Director, Health and Human Services Agency.
4. Authorize the Chief Administrative Officer or designee to review the Opioid Settlement Framework established on October 25, 2022 (20) to ensure alignment with Opioid Settlement Agreements and any new State guidance and return to the San Diego County Board of Supervisors in 120 days with any recommended changes.

## **EQUITY IMPACT STATEMENT**

Every San Diegan experiences the world differently and has unique circumstances and opportunities that can impact health, lifestyle behaviors, and overall well-being, leading to differences in health outcomes, or health inequities. These health disparities exist among communities, including when it comes to overdose and substance use. Although no single age group, race/ethnicity, gender, or socioeconomic status is immune to the current overdose crisis, data from the County of San Diego (County) Medical Examiner Office and the San Diego Association of Governments indicate that those between the ages of 18-45 years old, as well as Native American/Alaska Native and Black/African American residents, are disproportionately impacted by fatal overdose compared to others. Based upon this, efforts are underway in collaboration with regional stakeholders to learn unique needs as it relates to this issue.

Today's recommendations build on the San Diego County Board of Supervisors' prior actions, including the adoption of the Opioid Settlement Framework, to specifically address the opioid and illicit fentanyl public health crisis. Through the implementation and performance monitoring

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of programs and services driven by the Opioid Settlement Framework's key components, as well as the current and future responsive behavioral health public messaging, outreach, and education efforts, the County strives to reduce harm to San Diego County residents impacted by this crisis.

### **SUSTAINABILITY IMPACT STATEMENT**

Today's actions support the County of San Diego's (County) Sustainability Goal #2 to provide just and equitable access to County services with investments focused on chronically underserved communities. The implementation of the Opioid Settlement Framework ensures that programs and services are informed by the community and are available countywide to address the opioid and overdose crisis. This item also supports Sustainability Goal #4 to protect the health and well-being of everyone in the San Diego County region, through broad public messaging campaigns designed to educate residents on illicit fentanyl, naloxone, crisis response services for psychiatric emergencies, and other urgent public messaging needs.

### **FISCAL IMPACT**

Funds for this request are included in the Fiscal Year (FY) 2023-24 CAO Recommended Operational Plan Change Letter in the Health and Human Services Agency. If approved, today's recommendation will result estimated annual costs and revenue of up to \$6.0 million in FY 2023-24 and estimated annual costs and revenue of up to \$6.0 million in FY 2024-25. The funding sources are Opioid Settlement Funds, Mental Health Services Act, Community Assistance, Recovery & Empowerment Act Start-Up/Planning funds, and Crisis Care Mobile Unit grant funds. There will be no change in net General Fund cost and no additional staff years.

### **BUSINESS IMPACT STATEMENT**

N/A

### **ADVISORY BOARD STATEMENT**

At their regular meeting on April 6, 2023, the Behavioral Health Advisory Board voted to approve these recommendations.

### **BACKGROUND**

The United States is in the midst of an overdose crisis that has had a devastating impact on public health and the overall well-being of all Americans. Data from the Center for Disease Control and Prevention (CDC) National Center for Health Statistics indicate there were an estimated 106,699 overdose deaths in 2021. According to the CDC, most of these deaths were caused by synthetic drugs, such as illicitly manufactured fentanyl and methamphetamine, often in combination with other drugs, including cocaine and heroin. In 2021, opioids accounted for 71% of all San Diego County drug overdose deaths, with 743 of the 820 opioid deaths involving fentanyl. While overdose deaths are still elevated, preliminary 2022 data from the County of San Diego (County) Medical Examiner Office is promising. From January to June 2021, there were a

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total of 309 drug (218 opioid) overdose deaths; in 2022 for that same time period, there were 273 drug (198 opioid) overdose deaths.

In response to this crisis, the San Diego County Board of Supervisors (Board) has approved several recent actions including, but not limited to:

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Today's item provides an update on the broad range of work the County has undertaken toward overdose prevention, with a special focus on implementation of the Opioid Settlement Framework (Framework) and public messaging campaigns focused on harm reduction outreach and education. The County is leveraging diverse funding streams to support this body of work including Medi-Cal, Mental Health Services Act funds through the healthcare integration work, Substance Abuse Block Grant funding, Overdose Data to Action (OD2A), and Opioid Settlement Funds.

### **Opioid Settlement Framework**

The County was a party to lawsuits against particular opioid pharmaceutical companies, manufacturers, and distributors that flooded the medical and street marketplaces with their products resulting in substantial loss of life due to overdose and contributing to the ongoing struggles of many to overcome addiction. As these lawsuits resulted in an unprecedented award for the County, community engagement forums consisting of opioid experts and community stakeholders were convened to determine the best use for these funds, which informed the Framework adopted by the Board on October 25, 2022 (20).

As of February 2023, the County has received \$14.2 million in proceeds from the Janssen & Distributors (J&D) and Malinckroft settlements. Guidance from the Department of Health Care Services (DHCS) for the allowable uses of the J&D settlement funds has been developed while guidance for the use of the Malinckroft settlement is pending. Based on current guidelines available for allowable uses, funds must be used for future opioid remediation activities and includes care, treatment, and other programs and expenditures designed to: 1) Address the misuse and abuse of opioid products; 2) Treat or mitigate opioid use or related disorders; or 3) Mitigate other alleged effects of, including on those injured as a result of, the opioid epidemic.

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In addition to the opioid remediation activities outlined within the settlement agreements, the State requires no less than 50% of the funds received by a California Participating Subdivision from the Abatement Accounts Fund in each calendar year to be used for designated High Impact Abatement Activities (HIAA). DHCS guidance emphasizes investing in evidence-based practices with a focus on those listed in the State designated core strategies and HIAA.

Today's update is reported below within the three key components outlined by the Framework, healthcare integration, harm reduction and prevention, and social supports and services. Additionally, details include activities-to-date occurring within each component and is informed by feedback that emerged from the community engagement forums. Updates on other activities and key performance indicators included in the Framework but not mentioned in today's item will be reported in the future as significant updates occur.

### ***Healthcare Integration***

Healthcare integration recognizes that both medical and behavioral health factors are important parts of a person's overall health. Medical and behavioral health clinicians work together as a team to address a patient's concerns to improve access to care, minimize stigma, lower costs, and improve overall health outcomes. For this reason, several activities aimed at advancing healthcare integration efforts throughout San Diego County are detailed below.

### ***Design and Implementation of the San Diego Relay Program***

The San Diego Relay program – a 24/7 nonfatal overdose response service delivered by peers in selected emergency departments (EDs) in San Diego County will include two main components: an initial ED interaction, and a 90-day period of continued peer navigation and support. Program services will focus on fostering engagement, assessing immediate needs, providing overdose education and naloxone access, and supporting linkages to care and vital services. Through the integration of medical, clinical, and community-based care, participants of San Diego Relay will receive peer-led services aimed at reducing overdose risk and fostering linkages to services that can help them thrive. On March 1, 2023, a Request for Information (RFI) questionnaire was posted to the County's online procurement system (BuyNet), and a virtual meeting was facilitated on March 9, 2023, with the intent to gather feedback, inform the program's design, and identify any potential challenges to achieving program goals. Feedback collected from this process included benefits of the service, oversight requirements and projected operational challenges. This feedback will be used to inform next steps in service planning.

### ***Execution of Health Integration Contracts***

Integration of care across physical health, mental health, substance use disorder (SUD) treatment services, and community-based services are key components in addressing the needs of people who use drugs (PWUD). The County has executed two contracts to support the healthcare integration body of work.

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- On February 6, 2023, the *Psychiatric and Addiction Consultation and Family Support* contract was executed, a behavioral health consultation service for primary care providers and behavioral health providers who serve youth, as well as youth clients and their caregivers.
  - The program services aim to enhance primary care providers level of competence, confidence, and capacity to assess and appropriately treat clients with behavioral health needs; improve early identification and treatment of behavioral health issues in youth; and provide education, referrals, and linkages for youth and their caregivers seeking behavioral health services.
  - Program services are available to providers in primary care and behavioral health care settings that serve people under the age of 21 who are uninsured, underinsured, or enrolled in Medi-Cal, as well as youth and caregivers who receive services in those settings.
  - Program enhancements include the integration of the American Society of Addiction Medicine (ASAM) criteria to better support level of care determinations for substance use disorder treatment and the addition of a Certified Peer Support Specialist position who will offer peer-led services aimed at supporting both integrated care and the recovery process.
- Additionally, the *Rural Integrated Behavioral Health and Primary Care Services* contract which provides a Collaborative Care Model (CoCM) of services to clients of primary care clinics in rural regions of San Diego County was executed on February 14, 2023.
  - This contract aims to build capacity within primary care clinics in rural communities to treat behavioral health conditions by providing routine screenings, prevention, early identification of behavioral health conditions, brief interventions, evidence-based medications, and warm hand-off linkages to behavioral health treatment providers when needed.
  - Program services also include outreach and engagement to increase awareness of behavioral health conditions and increase access to behavioral health services in rural communities. The program is available to individuals residing in rural North Inland or East Regions who are Medi-Cal beneficiaries, uninsured or underinsured.
  - Program enhancements include the adoption of the CoCM, an evidenced-based practice model that is guided by principles of client-centered care, low-barrier treatment, cultural competence, strengths-based, resilience and recovery, and parity across mental health and substance use services. Staff training and service delivery is guided by the CoCM principles and aims to support the comprehensive integrated care the model demands. Additionally, to better support level of care

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determinations for substance use disorder treatment, each program site will have a staff member trained in ASAM criteria.

#### *Development of an EMS Buprenorphine Induction Program*

Medication-assisted treatment (MAT) is highly effective in reducing the risk of relapse, reducing the rate of engaging in risky activities, and reducing the costs of substance use disorder treatment for PWUD. A major barrier for PWUD to access and engage in MAT is the rigid requirements for entry and continuation. As part of the County's efforts to offer opportunities for increased access, engagement, and retention among those seeking MAT services, County Emergency Medical Services (EMS) is exploring development of a pilot program authorizing paramedics to initiate MAT (buprenorphine) in the prehospital setting to treat patients in opioid withdrawal. County EMS is collaborating with the Health and Human Services Agency (HHSA) to facilitate a warm handoff to connect these patients to opioid use disorder treatment services, even when patients refuse transport to the hospital "against medical advice" after receiving prehospital buprenorphine.

Development of a prehospital buprenorphine program builds on the County EMS Leave Behind Naloxone program as a next step in mitigation of the opioid crisis. In preparation for implementation of a prehospital buprenorphine program, County EMS has begun recruitment of opioid mitigation-focused staff and has taken the following actions:

- Engaged the State of California EMS Commission with a recommendation to move prehospital buprenorphine from "trial study" status to "local optional scope of practice (LOSOP)" for paramedics. The Commission and EMS Authority ultimately approved this transition thereby making development of a prehospital buprenorphine pilot program feasible in San Diego County.
- Subsequently, submitted a LOSOP application to the EMS Directors Association of California, Scope of Practice meeting in December 2022.
- Hosted a data standardization meeting for all Local EMS Authorities across the State that are planning to apply for buprenorphine LOSOPs.
- Identified needed training and medical oversight systems for this novel prehospital intervention.
- Developed a liaison with the CA Bridge Program, a program of the Public Health Institute, to harmonize local policies and protocols with state-of-the-art, best practice harm reduction strategies.

#### *Development and Integration of an Overdose Response Unit*

In an effort to improve detection of overdose outbreaks and facilitate more effective responses, the County is establishing a cross-departmental County Overdose Unit which will be situated within County HHSA, Behavioral Health Services (BHS) and Public Health Services (PHS). This unit will ensure the County can effectively implement and manage cross-sector, real-time

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surveillance and response to overdoses in San Diego County. The unit will be responsible for the monitoring of trends, identification of possible clusters, investigation of individual or cluster situations, and community response, including public messaging and education, as needed. A total of 20 staff years for positions will be added across BHS, PHS, and EMS. The HHSA Overdose Unit will partner with Public Safety Group, San Diego County Fire, and County EMS to support various overdose prevention, surveillance, and response activities. As of May 9, 2023, seven of these 20 positions have been filled.

#### *Innovations in Care: Exploration of the Use of Digital Therapeutics*

Digital therapeutics, broadly defined is a treatment or therapy that utilizes digital and often internet-based health technologies to prevent, manage, or treat a medical disorder or disease. Treatments specific to the prevention and management of a wide variety of diseases and conditions including substance use, apply advanced technologies to support treatment adherence and disease progression, with the aim to improve patient health outcomes. BHS staff have reviewed the literature for the effectiveness of digital therapeutics, attended a platform demonstration, and evaluated relevant policy for this treatment adjunct. Staff continue to explore innovative modalities to improve engagement, retention, and effectiveness of services for PWUD.

#### ***Harm Reduction and Prevention***

Harm reduction services and prevention strategies serve as critical components of the Continuum of Care and are necessary tools for addressing the opioid crisis. Harm reduction emphasizes *meeting people where they are* and working directly with PWUD to prevent overdoses and disease transmission, and to improve the physical and mental health, and well-being of those served. Prevention strategies, including public messaging campaigns health promotion activities, focus on engaging and empowering individuals and communities to choose healthy behaviors and make changes that reduce the risk of adverse health outcomes. Efforts to further advance this component are detailed below.

#### *Expanding Naloxone Access and Supply*

Naloxone is a life-saving medication that reverses the effects of an opioid overdose. Research has demonstrated that broad community distribution of naloxone is associated with a reduction in overdose deaths. Through the County's Naloxone Distribution Program, continued efforts to saturate the community with naloxone are underway and include the implementation of naloxone vending machines and the expansion of the County's naloxone distribution provider network. The first machine was placed on March 2, 2023, in the South Region. Since then, an additional five machines have been placed (three in Central Region; two in North Inland Region) with six more to be placed by June 30, 2023, bringing the total to 12. Of the six that are currently operational, three are placed within Tribal nations.



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Additionally, County EMS and the Sheriff's Department have increased efforts to expand access to naloxone through the development and implementation of innovative Leave Behind Naloxone programs which provide individuals at risk of an overdose, their family, and friends with naloxone.

- As of May 8, 2023, the EMS medical director had approved applications from 15 agencies to participate in the Leave Behind Naloxone program providing naloxone to patients, family, and friends at the scene of an emergency, even when patients refuse transport to the emergency department.
- In December 2022, the Sheriff's Department initiated the Leave Behind Naloxone program and deputies began providing individuals who are at risk of an overdose, their family, and associates with naloxone and information guides. In addition to this community-level effort, some stations have provided the necessary training to their crime prevention personnel to incorporate the program into community-related events. Eighteen of the department's stations, substations, and storefronts are offering free naloxone to anyone who makes the request in person. Since initiating the program, the Leave Behind Naloxone program has distributed 809 naloxone kits as of May 2, 2023.

#### *Comprehensive Harm Reduction Services*

Safe, effective, and cost-saving, harm reduction programs offer a range of services to meet the needs of PWUD, including the provision of clean syringes and collection and disposal of used syringes. The most effective programs provide comprehensive services to PWUD, including the distribution of lifesaving medications, health education regarding risk reduction, and referrals to substance use treatment and other health care. In July 2021, a working group with representatives from County and multiple stakeholders outlined program goals, designed a program structure, and developed policies and procedures for program implementation. In November 2022, the Community Readiness Assessment report was completed and shared with the working group.

Currently, PHS is implementing County-operated, comprehensive Harm Reduction Services, including clean syringe access, collection of used syringes, health education regarding risk reduction, testing (HIV, hepatitis C and STIs), and referral to substance use treatment, mental health services, and referral to housing support and other needed services. Services will be provided at several locations throughout San Diego County twice per month using a mobile clinic. Staff have initially engaged the cities of Chula Vista, Escondido, Oceanside, and San Diego, which will be served by the County's program, regarding community engagement, program design, and the public health data used for program development. It is anticipated services will be launched September 2023.

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### *Drug Checking Services*

Drug checking is a harm reduction public health intervention that informs individuals about the composition of their substances to increase awareness, avoid unintended effects, and reduce harm. Specifically, drug checking services provide PWUD with information on the chemical composition of their drug samples to facilitate more informed decision-making. Drug checking services can serve as an immediate intervention tool aimed at changing an individual's drug use if drugs are shown to contain unwanted or unknown chemical compounds. Being able to get more specific information about the contents of their drugs can help PWUD to understand their overdose risk. Drug checking data can also be used to help determine trends in the unregulated drug supply offering opportunities to help inform the development and implementation of effective community responses.

Various technologies can be employed in the provision of drug checking services such as fentanyl testing strips (FTS) and Fourier-transform Infrared (FTIR) technology. FTS are small strips of paper that can detect the presence of fentanyl in different kinds of drugs (cocaine, methamphetamine, heroin, etc.) and drug forms (pills, powders, and injectables). FTS users dissolve a small sample of a drug into water, insert a test strip, and look for an indicator line alerting the user to the presence of fentanyl. Although the results may indicate that fentanyl is present, drug checking strips do not provide information regarding the purity or potency of fentanyl in the substance. FTIR technology identifies chemicals in different kinds of substances using an infrared light source to measure absorption. Infrared radiation passes through a sample; the radiation that passes through the sample is recorded and used to identify and distinguish the different chemicals in the sample. Unlike FTS, FTIR technology can simultaneously detect multiple drugs and adulterants in the same sample and provide quantitative results on purity and potency.

To advance this work, gather feedback, inform the program's design, and identify any potential challenges to achieving program goals a RFI questionnaire was posted to BuyNet on March 23, 2023, and a virtual meeting was facilitated on April 13, 2023. Feedback collected from this process includes program design considerations, anticipated challenges, and recommended strategies to address barriers. Planning and service design work for the implementation of drug checking is ongoing.

### *Social Supports and Services*

To truly address the opioid crisis and help people enter and stay in recovery, a person's full spectrum of needs must be considered. This ranges from emotional and social support to housing and workforce integration. It includes investing in our supportive communities of parents, family members, schools, community organizations, and businesses who are equipped to provide education on substances and treatment resources. For this reason, efforts to engage, foster and inform are underway through public health messaging and outreach campaigns and targeted

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naloxone distribution events facilitated in coordination with rural and Tribal nations. Additionally, continued efforts to integrate peers such as in the San Diego Relay model aim to advance the County's commitment to leveraging the valuable perspectives and input of those with lived experience to better serve and meet the needs of PWUD.

Specific efforts to meet the housing needs of PWUD such as the 22-bed Community Harm Reduction Team-designated Safe Haven shelter which opened on December 27, 2022 and provides transitional housing for those who need it most and connection to services. In January 2022, two opioid treatment programs (OTPs) where the first OTPs to administer recovery residence funding. Recovery residences funding at these programs allows a direct access to shelter and supportive living environments as opposed to linkage through an intermediary homelessness service provider. Recovery residences funding will be expanded to additional OTPs which are expected to begin on July 1, 2023.

#### **Update on Behavioral Health Outreach, Education, and Public Messaging Efforts**

Parallel to efforts enhancing programs and services to address the opioid crisis, BHS remains committed to public outreach and education efforts through community-informed public messaging campaigns and materials that are clear, meaningful, and persuasive, and delivered through familiar media platforms, posters, radio ads, etc. Today's item includes an update on the youth illicit fentanyl media campaign and upcoming harm reduction campaign efforts, as well as a recommendation to expand and accelerate continued public health messaging and education by approval of new contracts that will establish capacity for timely public messaging that is responsive to community needs.

#### ***Youth Illicit Fentanyl Awareness Campaign***

On October 19, 2021 (2), the Board approved a recommendation to develop a culturally and age-appropriate substance use awareness campaign, to include a focus on fentanyl awareness, in multiple languages to educate youth and transition age youth about the dangers of illicit substances, including fentanyl and fentanyl-laced or counterfeit prescription drugs.

Activities to solicit input from students and other stakeholders to inform the initial phase of a youth illicit fentanyl awareness campaign ramped up in August 2022 following the declaration of illicit fentanyl as a public health crisis and the return of youth and teens for the 2022-23 school year. Participants shared their first impressions of materials, commented on what components resonated with them or were more effective, as well as if there were aspects of campaign messages that were confusing, unclear, or likely not to resonate with them or their peers. Additionally, youth were asked to share examples, ideas, and recommendations for San Diego County's forthcoming campaign, including main points for key messages, color schemes, and the best methods for promoting services and resources to local youth populations.

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Nearly 60 students participated in these initial input and engagement sessions, with activities held virtually and in-person throughout the region. Participants ranged in age from 14 to 24 and were identified through existing community coalitions and youth groups, the *Live Well San Diego* Youth Sector and Youth Leadership Team, and outreach via County Community Health Worker Liaisons. An online input form was also developed to collect additional input from the broader community and promoted via email newsletters to school-based networks and other community distribution lists. Campaigns assessed by stakeholders included “*Faces of Fentanyl*,” “*Laced and Lethal*,” “*The Rise of Fentanyl (Talk Now AZ)*,” and the “*Facts on Fentanyl*” campaign from the CDC.

Initial feedback and recommendations were synthesized in October and November 2022 and provided to the *It's Up to Us* media contractor to develop initial creative materials for youth and teens, and for a secondary audience of parents, caregivers, and other adults aged 30-60 who may be influential in a teen's life. Youth and teen communication channels for the first part of the campaign include social media channels (e.g., Instagram, Snapchat, TikTok), streaming audio platforms (e.g., Spotify, Pandora), gaming platforms (i.e., Twitch), and traditional broadcast radio and print advertisements to be displayed in school-based settings. Adult communication channels include social media and streaming audio, but also digital web advertisements, Google search ads/search engine optimization, out-of-home advertisements such as billboards or banners, and traditional print and radio advertisements. Initial campaign materials launched on December 30, 2022 and will run through early spring 2023.

BHS staff will continue collaborations with other County departments to enhance community engagement and awareness of illicit fentanyl risks, naloxone, overdose prevention, and community resources. Planning for the next phase of the youth fentanyl campaign is underway and upcoming efforts will include a series of youth-developed overdose prevention materials. A youth-led video and visual art challenge to raise awareness around the opioid crisis and related topics, including illicit fentanyl and naloxone, will also run during the summer to augment broader messaging efforts. BHS is also working with regional prevention and early intervention (PEI) health promotion staff to identify community-based efforts that can be enhanced and scaled up through PEI and Opioid Settlement Funds, especially in rural and Tribal areas of the county as indicated in the approved Framework.

### ***Harm Reduction Public Messaging***

The County and community partners have been planning for broader outreach and messaging to support activities related to the County's Comprehensive Harm Reduction Strategy and widespread awareness and distribution of intranasal naloxone throughout the community. Based on preliminary research and strategic workshops conducted by the CDC, four areas of focus for education campaigns to address the evolving drug overdose epidemic were identified. These campaigns are intended to reach young adults ages 18-34; however, recent campaigns aim to

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educate younger, at-risk audiences on preventing overdose and substance use-related harms based on the ages of individuals impacted by fatal and non-fatal overdoses. The CDC's "Stop Overdose" campaigns focus on the following four topics: understanding the dangers of fentanyl, educating about the risks and consequences of using and mixing drugs, promoting the lifesaving power of naloxone, and supporting recovery to reduce stigma.

In alignment with the CDC's campaigns, the County is working with stakeholders and subject matter experts to collect input for new materials that will focus on two areas:

1. Harm reduction for people who use drugs or who are at higher risk of an opioid-related overdose due to high drug use; and
2. A general campaign to educate community members on what naloxone is, where they can obtain it, and how to administer it if needed.

Activities and materials developed through these efforts are intended to compliment work already completed by the Sheriff's Department and PHS, particularly public education efforts related to the OD2A grant awarded to the County in 2019. OD2A public education efforts primarily focus on educating prescribers (e.g., physicians, physician assistants, nurse practitioners, etc.), and healthcare systems (e.g., hospitals, federally qualified health centers, and insurers) throughout San Diego County. Efforts to further expand the reach and scope of this messaging will focus on increasing awareness of the risks of opioids, overdose prevention, and available treatments.

### ***Expansion of Behavioral Health Public Outreach, Education, and Public Messaging***

Increasing awareness of mental health and substance use issues, as well as the available tools and resources to support those impacted by mental health conditions and substance use disorders, can augment program and service efforts significantly. Outreach and education activities not only support knowledge building and sharing among community members but equip them with information needed to act in the event of a psychiatric or substance use-related emergency and help to address the stigma that often surrounds these topics and the individuals affected by them.

The need for tailored educational materials on a variety of issues, programs, and services has only continued to increase in demand and priority since the onset of the COVID-19 pandemic. Although healthcare already has several effective treatments to support people with mental health conditions and substance use disorders, many people who could benefit from them do not seek them out. Research demonstrates the fear or shame associated with the condition or treatment may interfere with people accessing medical care and recovery support, thereby potentially increasing the harms they experience.

Messaging campaigns and materials that promote person-first language, focus on informing the public of available resources and treatments, and avoid messaging made to villainize a person experiencing a condition or disorder have been shown to be a powerful tool to reduce this

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stigma. The application of multi-media efforts, inclusion of personal stories from people impacted, and messaging that emphasizes support is available and recovery is possible can aid those in need and promote help-seeking and utilization of available services.

Informational workshops, community forums, and training sessions can also help policymakers, healthcare professionals, educators, employers, faith leaders, youth, and the public become more familiar with behavioral health issues, topics, and resources, and empower individuals to be advocates and allies. Implementing and increasing public messaging and education efforts to reduce stigma and draw support for behavioral health interventions can normalize conversations about behavioral health needs and help drive change.

As more information becomes available regarding the various Opioid Settlement Agreements and subsequent guidelines for the utilization of funds, review of the components of the Framework to ensure alignment with any additional guidance will be necessary. Today's action authorizes the Chief Administrative Officer or designee to review the Opioid Settlement Framework established on October 25, 2022 (20) to ensure alignment with Opioid Settlement Agreements and any new State guidance and return to the Board in 120 days with any recommended changes.

#### **LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN**

Today's proposed actions support the County of San Diego's 2023-2028 Strategic Plan Initiatives of Equity (Health) and Community (Quality of Life) by investing in access for care, support, outreach, and education for all impacted by the opioid crisis.

Respectfully submitted,



HELEN N. ROBBINS-MEYER  
Interim Chief Administrative Officer

#### **ATTACHMENT(S)**

N/A