CHESTER COUNTY
STRATEGIES FOR THE USE OF THE
OPIOID SETTLEMENT FUNDS

9/28/22
Strategies for the use of the Opioid Settlement Funds

The strategies presented in this document have been developed to help address the needs of individuals, families and communities struggling with, or impacted by, the opioid and overdose crisis. This is by no means inclusive of all potential approaches. It is expected that the strategies will need to be modified at times in response to the community needs, and a protocol will be established incorporating an annual review process.

Guiding Principles

1. Utilize the funds to address detrimental effects of the opioid/overdose crisis currently experienced in Chester County and help mitigate such negative effects in the future.

2. Provide services related to Opioid Use Disorder (OUD) and co-occurring Substance Use Disorder (SUD) and mental Health (MH) conditions (OUD and co-occurring SUD/MH conditions) to all communities and residents with respect, dignity and equity, while supporting culturally appropriate services and programs.

3. As appropriate, utilize these funds in conjunction with existing resources to ensure efficient use of all funds, to maintain and enhance established programs and activities, and address gaps in services.

4. Support additional services that compliment and/or enhance existing programs while avoiding unnecessary duplication of effort.

5. Collaborate with stakeholders and community partners to develop, implement, and sustain services to the community.

All current and future strategies must comply with the approved uses outlined in the opioid settlement.
PART ONE: TREATMENT

A. TREAT OPIOID USE DISORDER

Continue to:

- Support and ensure access to the full continuum of substance use disorder treatment services, including Medication Assisted Treatment.
- Support telehealth services, as deemed appropriate by treatment providers, based on individual client need.
- Require the use of trauma-informed and evidence-supported models for the treatment of OUD and other co-occurring SUD/MH conditions.
- Ensure quality services are provided in all levels of care through routine monitoring.

Expand:

- Availability of additional OUD and other co-occurring SUD/MH services based on individual and community needs.
- Education on and availability of all FDA approved medications for the treatment of OUD through contracted providers, health care professionals, and other relevant opportunities.
- Support for mobile intervention, recovery services and use of telehealth services.
- Strategies to support and assist the drug and alcohol service system in workforce stabilization and development.
- Treatment services and supports for OUD and co-occurring SUD/MH disorders in the prison, based on collaborative work with, and identified needs of the prison management.

Establish:

- Collaboration with prison substance use disorder treatment provider to assist in identifying and connecting inmates to appropriate community-based services, and providing Narcan, upon release.
- Training regarding OUD and co-occurring SUD/MH conditions and treatment and other resources for health care providers, first responders, law enforcement, court personnel, human service professionals and the community.
- Supports for children and family members, including grandparents, impacted by addiction and/or overdose in the family.
B. SUPPORT PEOPLE IN TREATMENT AND RECOVERY

Continue to:

- Educate individuals with an OUD and co-occurring SUD/MH conditions about all treatment options, including medication assisted treatment (MAT).
- Assure the availability of, and access to OUD and co-occurring SUD/MH treatment, Narcan and recovery support services, including peer support and housing.
- Support transportation strategies to assist in access to treatment services.
- Enhance telehealth capabilities to increase access to treatment and recovery support services.
- Provide support services for the family members.
- Participate and support community and stakeholder efforts to address the opioid and overdose crisis.

Expand:

- MAT availability for OUD and co-occurring SUD/MH conditions to all County drug and alcohol contracted treatment providers.
- Case Management and peer-based support services during and following treatment.
- Identification of, and referrals to community-based resources that support individuals’ needs in various life domains, including housing, childcare, medical, and transportation.

Establish:

- Anti-stigma campaign to address the stigma related to individuals with an OUD and co-occurring SUD/MH conditions.
- Additional relationships with local agencies/programs to assist veterans who use substances in obtaining treatment and recovery services.
- Opportunities for community-based, private and non-profit organizations/coalitions, and faith-based organizations to support their community members.
- Strategies for the utilization of funds to recruit and retain bi-lingual counselors.
- Plans to determine the need for a Recovery Center in Chester County, and a means to support, as relevant.
- Training opportunities regarding OUD and co-occurring SUD/MH conditions for area healthcare, education, criminal justice, law enforcement, social service, and educational personnel.
C. CONNECT PEOPLE WHO NEED HELP TO APPROPRIATE SERVICES

Continue to:

- Ensure access to the full continuum of drug and alcohol treatment.
- Support a 24/7 Information and Referral service.
- Support current warm hand-off services to transition emergency room and hospitalized patients suffering from an OUD to treatment and recovery services.
- Provide community and school-based prevention services.
- Support the Law Enforcement Treatment Initiative to divert individuals with an SUD at time of arrest or preliminary hearing into treatment vs. continuation through the criminal justice system.
- Support peer specialist services that support and assist individuals in entering and remaining in treatment and recovery support services and connecting to other needed resources.
- Provide community awareness/education.
- Support street outreach to individuals suffering from an SUD and connect to treatment and other needed resources.
- Support and participate in the County treatment courts.
- Conduct prison assessments, provide treatment recommendations to the courts and facilitate direct referrals to treatment, as appropriate.
- Provide relevant information on prevention, intervention, treatment, and recovery supports to medical and other professionals, community-based providers, and county departments/staff.

Expand:

- Local, 24/7 call center, to provide screening, assessment, and/or information and referrals—addressing substance-related emergency calls, and providing assistance to individuals seeking access to OUD and co-occurring SUD/MH treatment and recovery services.
- Bi-lingual/bi-cultural prevention, intervention, and treatment services.
- Certified Recovery Support Specialists services to provide peer-to-peer services in the community as well as treatment facilities, hospitals, prison and/or other relevant locations.
- Certified Recovery Specialist training and certification opportunities through financial support of the Peer Support Enhancement Initiative (PSEI).
- Outreach, engagement, and warm hand-off services to overdose survivors hospitalized in any of the in-county hospitals.
- Street outreach, including Homeless Acute Case Management (HACM), which utilizes outreach and engagement strategies to engage individuals in mental health and drug and alcohol services.
• Public education and awareness about OUD and co-occurring SUD/MH conditions and local treatment, supports and other resources.
• Current Student Assistance Program services available to schools, including elementary student assistance programs (ESAP).
• Support for existing community coalitions.

Establish:
• Resources/linkages for primary care physicians (PCPs) and other medical professionals to refer clients with an OUD and co-occurring SUD/MH condition to appropriate services.
• A pilot project for mobile outreach and/or co-responder with Emergency Medical Services and law enforcement for OUD and co-occurring SUD/MH-related incidents.
• Supports for children and family members, including grandparents, impacted by a family member’s OUD and co-occurring SUD/MH condition and/or overdose.
• Strategies for determining the need for, and if appropriate the support of, a crisis stabilization center/drop-in center as an alternative to hospital emergency departments, which provides supportive services and appropriate interventions, including screening, assessment, and referral to treatment.
• Opportunities to partner with and/or support non-profits, faith-based communities, community coalitions and local businesses to support outreach to individuals in need of OUD and co-occurring SUD/MH services.
• A means to support training and implementation of Screening, Brief Intervention and Referral for Treatment (SBIRT) with healthcare providers, criminal justice agencies, colleges, and schools.
• Training to healthcare professionals, social services agencies, and criminal justice personnel on how to connect individuals suffering from an OUD or co-occurring SUD/MH conditions to appropriate services.

D. ADDRESS THE NEEDS OF CRIMINAL JUSTICE-INVOLVED PERSONS

Continue to:
• Ensure access to timely, quality, community-based assessments, and treatment.
• Support the Prison Administrators’ plan to provide SUD services in the prison.
• Conduct prison assessments on identified inmates, providing treatment recommendations to the court and facilitating door-to-door admission to treatment.
• Participate in the County treatment courts, providing knowledgeable guidance and direction, and access to all levels of treatment.
• Collaborate with the Criminal Justice Advisory Board, participating in the monthly meetings and various subcommittees, including grants, pre-trial and re-entry services.
- Provide training on resources and access to treatment services to criminal justice staff including, probation/parole officers, public defenders, District Attorney’s Office, and others.
- Offer evidence-supported treatment, including MAT, for those incarcerated at the Prison or returning to the community.
- Provide evidence-supported treatment, including MAT, and recovery support services for individuals under pre-trial, probation or parole supervision.

Expand:
- Law Enforcement Treatment Initiative (LETI) to additional police departments, in collaboration with the District Attorney’s Office.
- Evidence-supported treatment, including MAT, and recovery support services for individuals involved in problem-solving courts as well as under pre-trial, probation or parole supervision.
- Education and training to the Criminal Justice System in Chester County, including law enforcement, corrections staff, and court personnel, on trauma-informed care and responsiveness and other best practices for addressing the needs of individuals with an OUD and co-occurring SUD/MH condition.
- Department staffing support for the four problem solving courts.
- Treatment services, including MAT, and supports for inmates with an OUD and co-occurring SUD/MH disorders in the prison.

Establish:
- A Criminal Justice Case Manager to conduct assessments, provide treatment recommendations to the courts, and facilitate direct referrals to treatment, as appropriate.
- Any needed support and staff training identified by relevant criminal justice staff for pre-release and parole planning/services.
- Support of pre-release and parole planning/services for inmates with an OUD and co-occurring SUD/MH condition, including the provision of Narcan and connection to treatment and recovery supports.

E. ADDRESS THE NEEDS OF PREGNANT OR PARENTING WOMEN AND BABIES WITH NEONATAL ABSTINENCE SYNDROME (NAS)

Continue to:
- Support the continuum of evidence-supported treatment, including MAT, and a broad array of recovery support services for pregnant or parenting women.
- Support Health Department services to pregnant/newly parenting women with an OUD and co-occurring SUD/MH condition.
• Provide training to relevant County staff including MAT, SUD, and Neonatal Abstinence Syndrome (NAS).
• Support the Maternal Dependency Program (MDP) provided at contracted outpatient programs.
• Participate in OUD stewardship meetings at Chester County Hospital.

Expand:

• Case management and support services for pregnant/parenting women with an OUD and co-occurring SUD/MH condition, in coordination with family and child serving agencies.
• Education and provide support to families affected by NAS.
• The provision of MDP in other contracted outpatient providers.
• Access to housing to homeless pregnant/parenting women with an OUD and co-occurring SUD/MH condition.
• Home-based recovery support and case management to pregnant and parenting women with an OUD and co-occurring SUD/MH conditions.
• Linkages for comprehensive evidence-supported services for NAS babies.
• Training for obstetricians and other healthcare personnel who work with pregnant women and their families regarding treatment of OUD and any co-occurring SUD/MH conditions and availability of resources.
• Comprehensive evidence-based treatment and recovery services, including MAT, for uninsured women with OUD and any co-occurring SUD/MH conditions.

Establish:

• Child and family supports for parenting women receiving treatment and/or recovery support services for an OUD and co-occurring SUD/MH conditions.
• Relationships with community-based providers for emergency and transitional housing for mothers and NAS babies.
PART TWO: PREVENTION

A. PREVENT MISUSE OF OPIOIDS

Continue to:

- Provide public education and awareness on OUD and any co-occurring SUD/MH conditions including prevalence and resources.
- Support Communities That Care (CTC) coalitions in their work within their communities.
- Support the Family Education Program.
- Support Student Assistance Programs (SAP) training and services in schools.
- Support a comprehensive system of prevention providers and services in the County.
- Support public education relating to drug disposal.
- Support drug take-back disposal or destruction programs.

Expand:

- School-based education and prevention services with a goal to have full SAP services in kindergarten through 12th grade in all Chester County schools.
- CTCs or other community collaborative efforts.
- Family Education Program and Family Supports.
- Multi-media strategies to disseminate information on opioid and substance use, including those that target specific populations.
- School-based or youth-focused prevention strategies.
- Staffing resources to provide and/or oversee the prevention efforts and services.

Establish:

- Community-based education and intervention services for youth and families of young people who may be at risk of misusing opioids or other drugs.
- A means of supporting local organizations and community coalitions in implementing evidence-supported prevention and stigma reduction efforts.
- Opportunities to collaborate with non-profits, faith-based communities, community coalitions and local businesses to support OUD and co-occurring SUD/MH prevention programs.
- Funding opportunities for community grassroots coalitions that engage in appropriate drug prevention strategies.
- Monthly prevention messaging for all County departments and contracted providers.
- A pilot program for the collection and disposal of used needles, with plans to expand countywide.
B. PREVENT OVERDOSE DEATHS AND OTHER HARMs

Continue to:

- Provide training and resources to communities on the identification of, and response to an overdose.
- Provide training and distribute naloxone to County staff, community-based organizations, and the public.
- Provide necessary training and resources to enable school nurses and other school staff to respond to opioid overdoses.
- Support and insure the sustainability of our warm handoff initiative.
- Participate in the Regional Overdose Prevention Coalition.
- Collaborate with community partners, including the county medical society, Chester County Association of Township Officials, hospitals, etc.
- Partner with and support first responders.
- Support training in harm reduction strategies to treatment provider staff, health care providers, law enforcement and court personnel and other professionals.

Expand:

- Training on OUD and co-occurring SUD/MH to healthcare providers, first responders, treatment professionals, and others.
- Availability and distribution points of naloxone and training on the use of naloxone to the residents of Chester County.
- Naloxone distribution and training opportunities on the use of naloxone to schools, colleges, healthcare providers, and other professionals.
- Access to harm reduction services including testing and treatment for infectious diseases such as HIV and Hepatitis C.
- Evidence-informed programs to reduce harm associated with intravenous drug use, that provide peer support services, connections to medical care and harm reduction services, and referrals to full continuum of treatment services and/or among others.

Establish:

- Means of data collection and analysis to assist in identifying trends in use, overdoses, deaths, etc.
- Support for the Coroner’s Department, such as funding for expanded toxicology testing.
- Relationships with local college/university staff, providing training and resources to enable them to respond to opioid overdoses.
- A pilot program for the collection and disposal of used needles, with plans to expand countywide.
C. SAFE MEDICATION MANAGEMENT

Continue to:

- Educate residents on the safe storage and disposal of medications through social media, public service announcements, handout material and other means.
- Support and advertise medication collection sites and events.
- Track the medication collected quarterly by the permanently located medication collection boxes.
- Provide safe medication storage containers and medication disposal bags to residents during events and other opportunities.
- Collaborate with the Chester County Medical Society to provide education and training to physicians and other licensed prescribers regarding OUD and co-occurring SUD/MH conditions, as well resources in the community to address such issues.

Expand:

- Community awareness regarding medication take-back events and the location of medication drop-boxes in the community.
- The availability of medication disposal bags to the community for the safe disposal of unused medications.
- The availability of medication lock boxes to the community for safe storage of medications.

Establish:

- Options for a “warm hand-off” from community-based physicians and other health care workers to treatment.
- Protocols and means of funding the purchase of medication collection boxes.
- Collaborations with pharmacies and medical professionals prescribing opioids to educate communities about safe storage and proper disposal of medications.
PART THREE: OTHER STRATEGIES

A. FIRST RESPONDERS

Continue to:

- Work with local emergency medical service providers to pilot a Narcan Leave Behind initiative which can be duplicated/expanded to additional EMS providers in the County.
- Collaborate with the Department of Emergency Services on data collection, providing training to EMS providers and identifying other relevant needs/initiatives.

Expand:

- Narcan Leave Behind initiative to additional EMS providers in the County.
- Training for first responders regarding OUD and co-occurring SUD/MH conditions, treatment services and other available resources.

Establish:

- In-person and virtual training program for first responders regarding OUD and co-occurring SUD/MH conditions including local resources available for individuals and families.

B. LEADERSHIP, PLANNING AND COORDINATION

Continue to:

- Co-chair the Overdose Prevention Task Force leadership team.
- Offer a quarterly stakeholder meeting, inclusive of an average of 25 individuals representing various county, community, and other organizations.
- Have department staff participate in the Regional Overdose Prevention Coalition.
- Hold an annual Department conference related to OUD and co-occurring SUD/MH conditions.
- Collaborate with various county and community-based organizations to develop and implement strategies to address the opioid and overdose crisis.
- Survey providers to identify training interests and needs and provide relevant trainings.
- Coordinate with the County Central Coordinating Entity on the distribution of Narcan.
Expand:

- Recruitment/participation in the Overdose Prevention Task Force stakeholder meetings.
- Coordination and protocols with the County’s Central Coordinating Entity for the distribution of Narcan to ensure expansive, but non-duplicative distribution to individuals and organizations throughout the County.
- Resources to staff government oversight and management of opioid abatement programs.

Establish:

- A contract with a consultant to assist in developing and managing a means of tracking, collating, and analyzing countywide overdose data, Narcan usage/reversals, medications collection, hospital visits and other relevant data.

C. TRAINING AND WORKFORCE DEVELOPMENT

Continue to:

- Provide and support trainings required by the Department of Drug and Alcohol Programs licensing standards and county contract.
- Offer trainings that allow drug and alcohol professionals to attain and maintain certification from the Pennsylvania Certification Board.
- Support strategies to recruit and retain qualified staff that work with persons with an OUD and co-occurring SUD/MH conditions.
- Present and/or host trainings for provider staff, County staff and other community-based organizations.

Expand:

- Financial and other support for Certified Recovery Specialist training and certification for eligible individuals.

Establish

- (Re-establish) Department annual conference on OUD and co-occurring SUD/MH conditions that includes keynote and/or panel speakers and multiple breakout sessions on relevant topics.
D. RESEARCH AND EVALUATION

Establish:

• A means to measure, track, and report on the outcomes of services funded through the opioid settlement funds.