

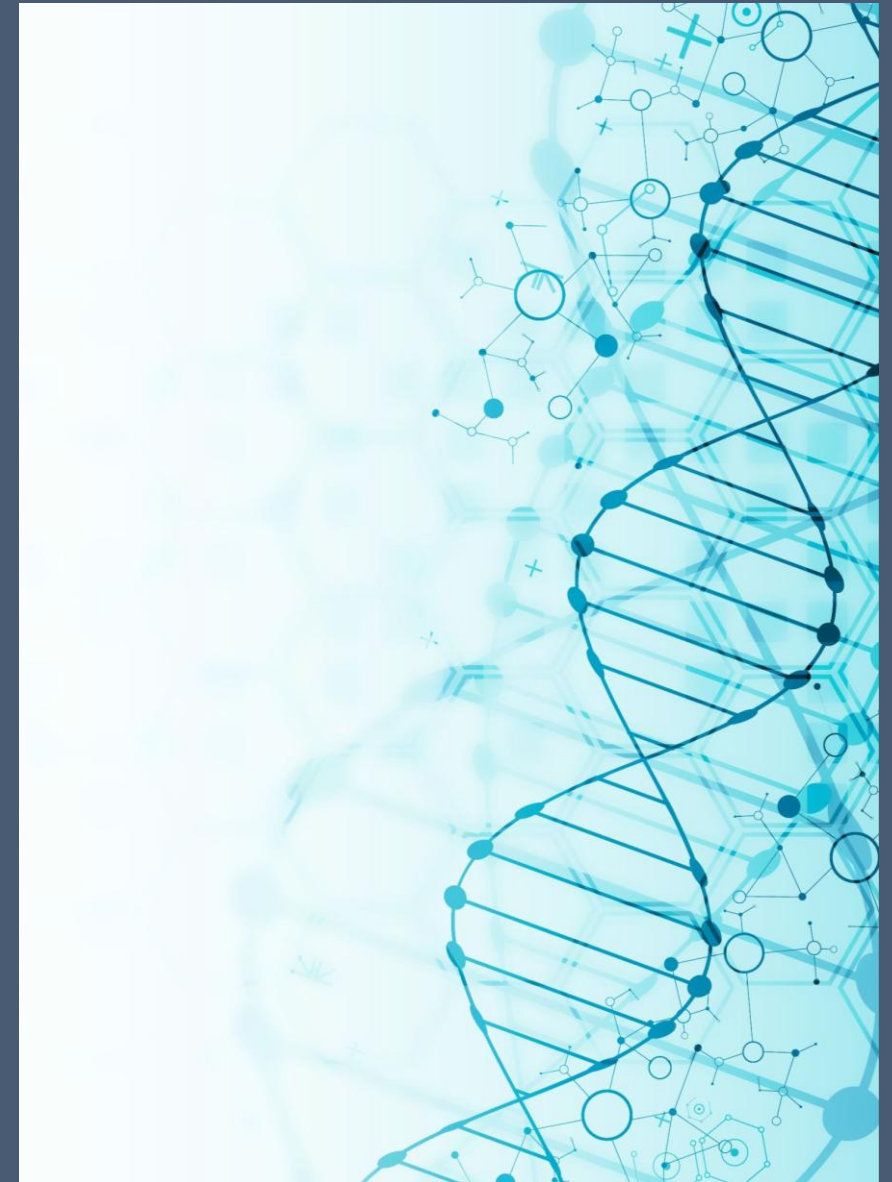


Prevention
Training
Technical
Assistance
Service
Center



CT State Opioid Settlement Funds Workshop

Connecticut Opioid REsponse (CORE)



Learning Objectives

- Gain knowledge of the Opioid Settlement Funds
- Understand allowable uses of the funds
- Know how much money each municipality is projected to receive
- Be aware of state law associated with the funds
- Practice ways to advocate for access to the funds
- Complete an Advocacy Action Plan

Polls

How many here know what the
Opioid settlement fund amounts are
for the community in which you work
and live?

Polls

Has your municipal leader reached out to collaborate with you on the use of these funds?

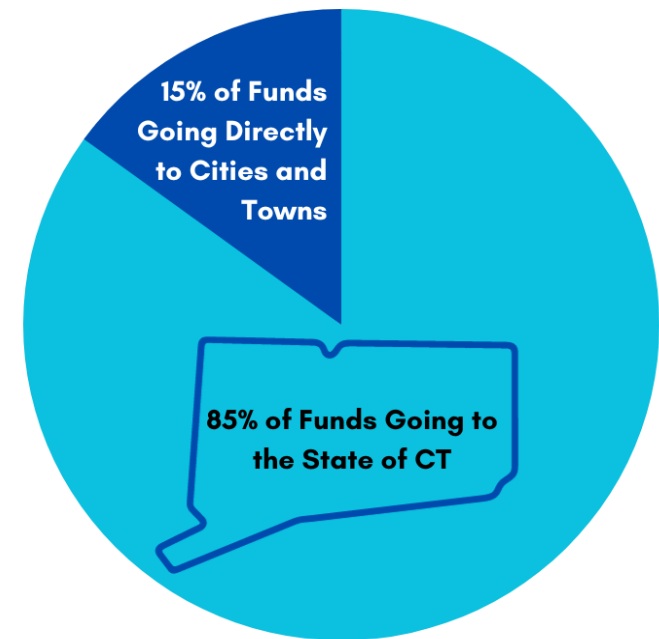
Polls

How many here are actively engaged in the planning and use of those funds?

Background

- Connecticut will receive approximately \$600 million across 18 payments through the settlement with opioid distributors Cardinal, McKesson, AmerisourceBergen, and manufacturer Johnson & Johnson.
- The settlement language explicitly states that no less than 85 percent of those funds must be used exclusively for opioid remediation, including expanding access to opioid use disorder prevention, intervention, treatment, and recovery.
- Fifteen percent of the settlement funds are going directly to cities and towns, with the remaining 85 percent going to the state.
- Connecticut's mayors, first selectmen, city councils and town representatives have discretion over how to spend those funds, as long as they stay within the broad terms of the settlement agreements.

Allocation of ~\$600 million Over the Next 18 Years for Opioid Remediation



Collaboration with the local prevention infrastructure

There is no requirement for town leadership to allocate or share the funds with LPC's, Coalitions, RBHAO's, etc.



Groups will need to advocate for access to these funds and to collaborate on sustainable, evidenced based strategies, and programs within the agreement terms on use of the funds.



There are years of funding to come so if you missed out on this first wave, there is time to advocate with municipal leadership for access and use of these funds towards your prevention activities, strategies, and programs, and to understand where the funds are currently distributed and being used.

Background

During the 2022 legislative session **Public Act 22-48, AN ACT IMPLEMENTING THE GOVERNOR'S BUDGET RECOMMENDATIONS REGARDING THE USE OF OPIOID LITIGATION PROCEEDS** was passed into law.

The Act establishes a new Advisory Committee, co-chaired by DMHAS and a representative from the municipalities, to ensure the proceeds received by the state as part of the opioid litigation settlement agreements are allocated appropriately.

The Act specifies the proceeds will be spent on substance use disorder abatement infrastructure, programs, services, supports, and resources for prevention, treatment, recovery, and harm reduction with public involvement, transparency, and accountability.

- Members serving on the CT Opioid Settlement Advisory Committee can be viewed here: <https://portal.ct.gov/DMHAS/Newsworthy/News-Items/CT-Opioid-Settlement-Advisory-Committee>

Municipal Shares of the Money

- The calculations are the amounts that the indicated State(s) and/or Subdivision(s) would receive pursuant to the Settlement Agreements if all relevant facts and circumstances were to remain unchanged. Be advised, however, that the relevant facts and circumstances, including but not limited to current levels of State and Subdivision participation, are subject to change and thus, there are no guarantees regarding the amounts or timing of any future payment(s). The amounts and timing of any future payments will be governed by the terms of the Settlement Agreements and are subject to change....
- To see amounts by town per the above statement please visit this link: **National Opioid Settlement Payments (Distributor and Janssen) - Municipalities' Share**
- **Activity:** Pull up the link and find your community's payments.

Public Act No. 23-92 AN ACT CONCERNING THE
USE OF FUNDS IN THE OPIOID AND TOBACCO
SETTLEMENT FUNDS AND FUNDS RECEIVED BY
THE STATE AS PART OF ANY SETTLEMENT
AGREEMENT WITH A MANUFACTURER OF
ELECTRONIC NICOTINE DELIVERY SYSTEM AND
VAPOR PRODUCTS.

- Link to full law:
<https://www.cga.ct.gov/2023/ACT/PA/PDF/2023PA-00092-R00HB-06914-PA.PDF>
- Established the Opioid Settlement Fund
- States how the funds may be spent and adds reporting requirements.
- *“Any municipality that receives moneys directly from a settlement administrator pursuant to a judgment, consent decree or settlement related to opioid litigation shall submit an annual report to the committee detailing its expenditures for the preceding fiscal year on a form prescribed by the committee. Each such municipality shall submit such report to the committee on or before October 1, 2023, and annually thereafter, until the total amount of such moneys received by the municipality has been expended.”*
- Municipal reports will be posted online per the statute.
- Also, speaks to the JUUL funds and the RBHAO’s and the Tobacco and Health Trust Fund.

The overarching Principles regarding allocation of these funds are the following:

1

Spend the Money to
Save Lives

2

Use Evidence to
Guide Spending

3

Invest in Youth
Prevention

4

Focus on Racial
Equity

5

Develop a Fair and
Transparent Process
for Deciding Where
to Spend Funding

[Detail on these Principles can be found in the updated CORE Report March 2024](#)

March 2024 Final CORE Report On Funding Priorities

Funding Priority 1	Funding Priority 2	Funding Priority 3	Funding Priority 4	Funding Priority 5	Funding Priority 6	Funding Priority 7
Increase Access to and Support the Most Effective Medications (Methadone and Buprenorphine) for Opioid Use Disorder Across Diverse Settings	Reduce Overdose Risk and Mortality, Especially Among Individuals at Highest Risk and Highest Need with Linkage to Treatment, Naloxone, and Harm Reduction	Improve the Use of Existing Data and Increase Data Sharing Across Relevant Agencies and Organizations	Increase Size of the Addiction-specialist Workforce and Improve Non-specialist Clinician and Community Understanding of OUD and Evidence-based Treatments to Decrease Stigma and Promote Treatment Uptake	Simultaneously Deploy and Evaluate Select Primary, Secondary, and Tertiary Prevention Strategies	Invest in Efforts to Reduce Community Stigma Against Opioid Use Disorder and Opioid Use Disorder Treatments.	Address Social Determinants and Needs of At-Risk and Impacted Population
7 Strategies 32 Tactics	4 Strategies 18 Tactics	3 Strategies 9 Tactics	3 Strategies 7 Tactics	7 Strategies 6 Tactics	2 Strategies 4 Tactics	3 Strategies 10 Tactics

There are 29 Strategies and 86 Tactics across these funding priorities found in the report.

Specific Strategies and Tactics for each of these priorities can be found on pages 17-40 of the CORE Report

Uses of the Funds

- NALOXONE OR OTHER FDA-APPROVED DRUG TO REVERSE OPIOID OVERDOSES
- MEDICATION-ASSISTED TREATMENT (“MAT”) DISTRIBUTION AND OTHER OPIOID-RELATED TREATMENT
- Services for PREGNANT & POSTPARTUM WOMEN
- EXPANDING TREATMENT FOR NEONATAL ABSTINENCE SYNDROME
- EXPANSION OF WARM HAND-OFF PROGRAMS AND RECOVERY SERVICES
- TREATMENT FOR INCARCERATED POPULATION
- EXPANDING SYRINGE SERVICE PROGRAMS
- EVIDENCE-BASED DATA COLLECTION AND RESEARCH ANALYZING THE EFFECTIVENESS OF THE ABATEMENT STRATEGIES WITHIN THE STATE
- TREAT OPIOID USE DISORDER
- SUPPORT PEOPLE IN TREATMENT AND RECOVERY
- CONNECT PEOPLE WHO NEED HELP TO THE HELP THEY NEED
- ADDRESS THE NEEDS OF CRIMINAL JUSTICE-INVOLVED PERSONS
- ADDRESS THE NEEDS OF PREGNANT OR PARENTING WOMEN AND THEIR FAMILIES, INCLUDING BABIES WITH NEONATAL ABSTINENCE SYNDROME
- PREVENT OVERDOSE DEATHS AND OTHER HARMS (HARM REDUCTION)
- FIRST RESPONDERS EDUCATION AND TRAINING
- LEADERSHIP, PLANNING AND COORDINATION
- RESEARCH

Full list of Opioid Remediation Uses can be found here: <https://portal.ct.gov/-/media/DMHAS/UpcomingEvents/Exhibit-E-Final-Distributor-Settlement-Agreement-8-11-21.pdf>

Prevention Specific Uses

- Funding for media campaigns to prevent opioid use
- Funding for evidence-based prevention programs in schools
- Funding for medical provider education and outreach regarding best prescribing practices for opioids consistent with the 2016 CDC guidelines, including providers at hospitals (academic detailing)
- Funding for community drug disposal programs
- Funding and training for first responders to participate in pre-arrest diversion programs, post-overdose response teams, or similar strategies that connect at-risk individuals to behavioral health services and supports
- Support efforts to discourage or prevent misuse of opioids through evidence-based or evidence-informed programs or strategies that may include:
 - Funding media campaigns to prevent opioid misuse.
 - Corrective advertising or affirmative public education campaigns based on evidence.
 - Public education relating to drug disposal.
 - Drug take-back disposal or destruction programs.

Prevention Specific Uses Continued

- **Funding community coalitions that engage in substance prevention efforts.**
- **Supporting community coalitions** in implementing evidence-informed prevention, such as reduced social access and physical access, stigma reduction—including staffing, educational campaigns, support for people in treatment or recovery, or training of coalitions in evidence-informed implementation, including the Strategic Prevention Framework developed by the U.S. Substance Abuse and Mental Health Services Administration
- Engaging non-profits and faith-based communities as systems to support prevention.
- Funding evidence-based prevention programs in schools or evidence-informed school and community education programs and campaigns for students, families, school employees, school athletic programs, parent-teacher and student associations, and others.
- School-based or youth-focused programs or strategies that have demonstrated effectiveness in preventing drug misuse and seem likely to be effective in preventing the uptake and use of opioids.
- Create or support community-based education or intervention services for families, youth, and adolescents at risk for OUD and any co-occurring SUD/MH conditions.
- Support evidence-informed programs or curricula to address mental health needs of young people who may be at risk of misusing opioids or other drugs, including emotional modulation and resilience skills.
- Support greater access to mental health services and supports for young people, including services and supports provided by school nurses, behavioral health workers or other school staff, to address mental health needs in young people that (when not properly addressed) increase the risk of opioid or another drug misuse.

Selecting Evidence-Based Strategies/Practices

- *Evidence-based practices* are interventions that are guided by the best research evidence with practice-based expertise, cultural competence, and the values of the persons receiving the services, that promote individual-level or population-level outcomes.
- *Evidence-based prevention strategies* refers to programs, policies, or other strategies that have been evaluated and demonstrated to be effective in preventing health problems based upon the best-available research evidence.
- *Conceptual fit:* An intervention has good conceptual fit if it directly addresses one or more of the priority factors driving a specific substance use problem and has been shown to produce positive outcomes for members of the focus population. To determine the conceptual fit of an intervention, ask yourself, “Will this intervention have an impact on at least one of our community’s priority risk and protective factors?”
- *Practical fit:* An intervention has good practical fit if it is culturally relevant for the focus population, a community has the capacity to support it, and it enhances or reinforces existing prevention activities. To determine the practical fit of an intervention, ask yourself, “Is this intervention appropriate for our community?”

Reporting

- Municipalities are required to file an annual report with the state detailing their spending.
- Connecticut Opioid Settlement Expenditure Survey
 - First report was due by October 1, 2023
 - The form should be completed by all municipalities that received Connecticut Opioid Settlement Abatement funds during state fiscal year 2023 (July 1, 2022- June 30, 2023)
 - All opioid settlement funds received and spent during the covered period must be reported.
 - First Report was released January 4, 2024.
 - Pull up the link below to see how settlement funds expenditures in each municipality were reported:

Fiscal Year 2023 Municipal Report On Use of Funds

Fiscal year 2024 Municipal Report On Use of Funds

Working Together to Scale Uses of the Funds

As municipalities are projected to receive different amount of funds, how can you work collaboratively with your neighbors, region, and across the state to leverage uses of the funds, avoid redundancies, and share resources?

Customizable templates, fact sheets, PSA's, social media campaigns that can add different logos, websites, and contact information.

Sharing each others' events, messaging, deliverables and products. Utilizing existing state or regional campaigns or materials and customizing them.

Schedule time to connect with neighboring communities for planning and coordination.

Working with and connecting through the RBHAOs

Building Advocacy Capacity for Access to the Funds Towards Prevention Efforts

- Have you built relationships with your town leadership?
- Is your town leadership and community aware of your coalition or prevention council?
- Do you have or have you identified champions who can speak on your behalf?
- Do you have a needs assessment, data, and a plan for how you would use the funds to enhance your prevention efforts around opioid prevention efforts?
- What stakeholder groups have you identified to bring to the table (elected leadership, schools, prescribers, caregivers, treatment professionals, faith-based organizations, law enforcement, etc.).

Shared Experience

Successes and Challenges

What are some success you have experienced?

What are some challenges you have experienced in engaging with municipal leadership and/or on access to these funds?

Advocating

- What are you advocating for?
- Who are you advocating to?
- What is your plan for what you advocating for?
- Demonstrate your impact.
- Share the story of your why.
- Advocacy Action Worksheet

Opioid Settlement Funds Worksheet	
Name of Mayor, First Selectperson?	
Email address of Mayor, First Selectperson	
Telephone number of Mayor, First Selectperson	
Total Projected Amount of Opioid Settlement funds for your community	
Projected amount of opioid settlement funds for your community 2023-2024 fiscal year	
Projected amount of opioid settlement funds for your community 2024-2025 fiscal year	
State Unintentional Drug Overdose Reporting System: List at least 2 stats for your community. https://public.tableau.com/app/profile/heather.clinton/viz/SUDORS_Dashboard_final2/OverdoseDashboard	
Efforts/Successes in your community/coalition/LPC's are taking to address substance misuse and the opioid epidemic.	
List any partnerships, sectors, collaborations etc. who are working collaboratively towards your prevention efforts.	
How are you incorporating youth into your planning, programming, and advocacy efforts?	
Ideas on how your community/coalition/LPC would utilize the settlement funds from allowable uses to create or enhance efforts.	
List three next steps you can take to advocate for access and use of these funds towards your prevention goals.	

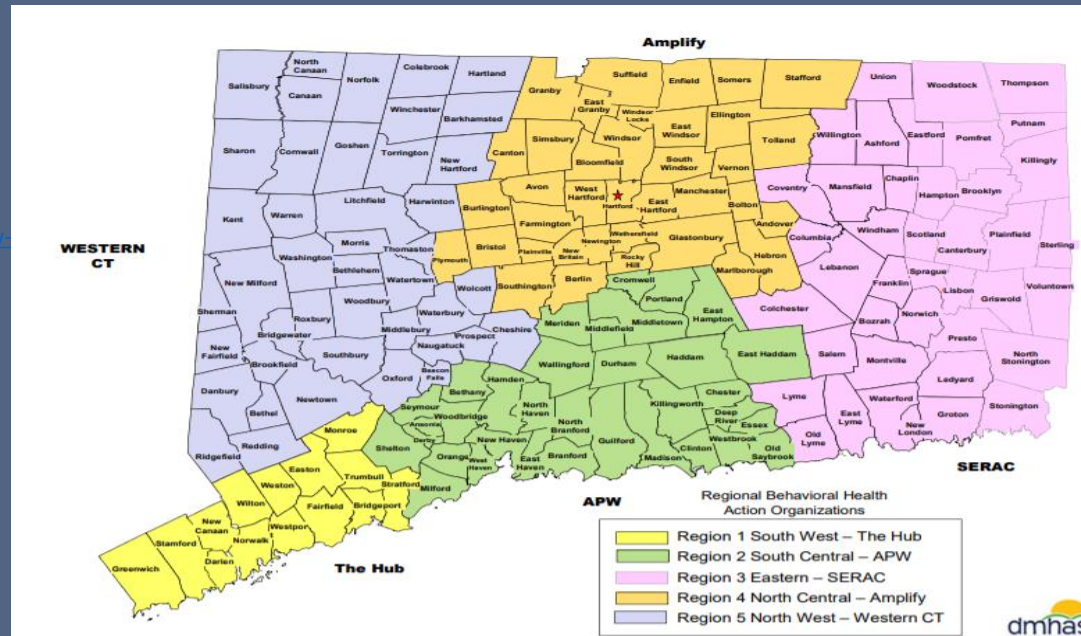
Examples of Next Steps and Opportunities:

- Conduct a community needs assessment or utilize an existing one to understand community needs and to guide allocations to funding priorities.
- Create a group, or utilize an existing entity, of community stakeholders from different sectors and continuum of care providers to plan use of funds to positively impact the identified area in the needs assessment (prevention, treatment, lived experience, recovery, harm reduction) who can advise and lend input on best use of the funds.
- Create a plan on how the community will allocate the funds over time, what the identified goals and target populations are, deliverable expectations, and an evaluation of impact.
- Create a vetting and approval process on requests for funding.
- Ensure allocations are tied to evidenced based strategies to meet your identified priorities.
- Track expenditures for reporting purposes and to share strategies and results with your community. Monitoring expenditures across funding priorities and/or community departments may lend insight later in your evaluation and reporting.
- Be open to changing priorities and goals over time.
- Consider collaborating with neighboring communities, regional, and state efforts to leverage and scale activities and impact.

Regional Behavioral Health Action Organizations



<https://www.apw-ct.org/>



<https://www.wctcoalition.org/>



Alliance 
for Prevention & Wellness
A program of BHcare

Resources

[OSAC: March 2024 Updated CORE Report: 7 Funding Priority Areas, Strategies and Tactics](#)

[SAMSHA: ENGAGING COMMUNITY COALITIONS TO DECREASE OPIOID OVERDOSE DEATHS PRACTICE GUIDE 2023](#)

[CDC: Drug Free Communities 2022 Evaluation Report](#)

[A Quick “How-To” Guide to Understanding Opioid Settlements State-to State](#)

[TTASC: A Parent’s Guide to Opioid Use Prevention](#)

[CT Association of Directors of Health: Essential Measures: Opioid and Substance Use Disorders Toolkit for CT](#)

[DMHAS: CT Opioid Settlement Advisory Committee Home Page](#)

[Prevention Institute Webinar: Supporting Decision Makers Using Opioid Settlement Funds: A Snapshot of Spending and Opportunities](#)



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Thank you
for coming!