Opioid Settlement Advisory Committee Funding Recommendations 24-10

In 2022, Public Act 22-48, AN ACT IMPLEMENTING THE GOVERNOR'S BUDGET RECOMMENDATIONS REGARDING THE USE OF OPIOID LITIGATION PROCEEDS was passed into law and later amended by Public Act 23-92 and Public Act 24-150. The Acts establish an Advisory Committee in Connecticut General Statues Secs. 17a-674b through 674g. The Committee is co-chaired by the Commissioner of the Department of Mental Health and Addiction Servies (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 statutes specify 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.

Section (e) of CGS Sec. 17a-674c states:

- "(e) Moneys in the fund shall be spent only for the following substance use disorder abatement purposes, in accordance with the controlling judgment, consent decree or settlement, as confirmed by the Attorney General's review of such judgment, consent decree or settlement and upon the approval of the committee and the Secretary of the Office of Policy and Management:
- (1) State-wide, regional or community substance use disorder needs assessments to identify structural gaps and needs to inform expenditures from the fund;
- (2) Infrastructure required for evidence-based substance use disorder prevention, treatment, recovery or harm reduction programs, services and supports;
- (3) Programs, services, supports and resources for evidence-based substance use disorder prevention, treatment, recovery or harm reduction;
- (4) Evidence-informed substance use disorder prevention, treatment, recovery or harm reduction pilot programs or demonstration studies that are not evidence-based, but are approved by the committee as an appropriate use of moneys for a limited period of time as specified by the committee, provided the committee shall assess whether the evidence supports funding such programs or studies or whether it provides a basis for funding such programs or studies with an expectation of creating an evidence base for such programs and studies;
- (5) Evaluation of effectiveness and outcomes reporting for substance use disorder abatement infrastructure, programs, services, supports and resources for which moneys from the fund have been disbursed, including, but not limited to, impact on access to harm reduction services or treatment for substance use disorders or reduction in drug-related mortality;
- (6) One or more publicly available data interfaces managed by the commissioner to aggregate, track and report data on
- (A) substance use disorders, overdoses and drug-related harms, (B) spending recommendations, plans and reports, and (C) outcomes of programs, services, supports and resources for which moneys from the fund were disbursed;
- (7) Research on opioid abatement, including, but not limited to, development of evidence-based treatment, barriers to treatment, nonopioid treatment of chronic pain and harm reduction, supply-side enforcement:
- (8) Documented expenses incurred in administering and staffing the fund and the committee, and expenses, including, but not limited to, legal fees, incurred by the state or any municipality in securing settlement proceeds, deposited in the fund as permitted by the controlling judgment, consent decree or settlement;
- (9) Documented expenses associated with managing, investing and disbursing moneys in the fund; and

(10) Documented expenses, including legal fees, incurred by the state or any municipality in securing settlement proceeds deposited in the fund to the extent such expenses are not otherwise reimbursed pursuant to a fee agreement provided for by the controlling judgment, consent decree or settlement."

Opioid Settlement Fund Balance

Fund Balance as of November 19, 2024	\$137,036,481		
Total Cost of Recommendation 24-10	(\$631,777)		
Available Balance Upon Approval	\$136,404,704		

Summary of Current Proposal

This recommendation is for funding for technical assistance from SAVE Project, national leaders in the field of collegiate recovery, to support opioid overdose education and prevention at Connecticut institutions of higher education. National level technical assistance, over the span of two academic years and under the umbrella of the existing Connecticut Healthy Campus Initiative, would provide an opportunity for campuses to increase their capacity to effectively disseminate opioid overdose education while simultaneously developing and/or enhancing recovery friendly communities at their institutions. The technical assistance will include:

- A Technical Assistance Summit open to faculty, staff, students, family members, and community
 members to establish opioid overdose awareness and overdose prevention education as a collective
 statewide collegiate priority.
- Monthly interactive Learning Collaboratives focused on how to implement evidence-based best
 practices for disseminating public health messaging about opioids and overdose prevention to the
 entire campus community including students, family of students, faculty, and staff.
- Personalized Technical Assistance requested by any participating institution to address individualized capacity building needs around the topic of opioids and overdose prevention.

Timeline

The approach has been recommended for funding for 2 years and 7 months from 4/1/25-10/31/27.

Compliance Analysis

Allowable Use:

Statutory: CGS Sec. 17a-674c(e)3

(3) Programs, services, supports and resources for evidence-based substance use disorder prevention, treatment, recovery or harm reduction

Settlement Agreement: Exhibit E, Schedule B Part 1 (C)(12) and Schedule B Part 2 (G)(6), (8) and (H) (1), (3)

Background

OSAC Funding Recommendation Form:

Source of Recommendation:	Public Portal
ADPC Subcommittee Name:	Recovery

Date of Initial Recommendation	November 19, 2024	
Presentation		
(should coincide with OSAC meeting	12.0	

Detail Recommendation Summary: (project title, summary of request, priority, category, funding amount requested, project dates)

Project Title: Promote and Expand Opioid Overdose Education and Prevention in CT's Colleges and Universities

Summary of Request:

date)

This recommendation is for funding for technical assistance, from national leaders in the field of collegiate recovery, to support opioid overdose education and prevention at Connecticut institutions of higher education. National level technical assistance, over the span of two academic years and under the umbrella of the existing Connecticut Healthy Campus Initiative, would provide an opportunity for campuses to increase their capacity to effectively disseminate opioid overdose education while simultaneously developing and/or enhancing recovery friendly communities at their institutions.

Research demonstrates that college-aged adults are more likely than other age groups to misuse opioids generally, including prescription pain relievers, heroin use, and other opioids including fentanyl, have worse opioid use disorder treatment outcomes, including higher rates of 24-week relapse than older adults. Research further indicates that college students have limited knowledge about how to recognize an opioid or an opioid overdose and importance of naloxone administration to reverse an opioid overdose. Further, college aged individuals have a lower perceived risk of opioid overdose death.

The Healthy Campus Initiative, a coalition committed to creating and sustaining healthy campus and community environments throughout Connecticut, focuses on implementation of on-campus activities that will positively impact the campus community environment. The Connecticut Healthy Campus Initiative has provided funding to 13 campuses, to be used between June 30, 2023—December 13, 2024, to support the efforts of institutions of higher education in the state of Connecticut to implement opioid and stimulant education and awareness activities. It is requested that OSAC funding be made available to build upon these efforts by providing 2 years year of technical assistance, available to any Connecticut institution of higher education. The Technical Assistance would be available to all accredited colleges and universities in CT, including the Community Colleges, and include:

- A Technical Assistance Summit, to establish opioid overdose awareness and overdose prevention
 education as a collective statewide collegiate priority. It is critical that collegiate settings recognize
 the risks of opioid overdose and their unique ability to educate tens of thousands of people about
 prevention, treatment, harm reduction, and recovery supports as a workforce development
 initiative that warrants specific attention, among many competing collegiate priorities. The
 Summit will include breakout sessions for college faculty/staff, students, and community.
- Following the summit, monthly interactive presentations would be held within a dedicated professional learning cohort provided by national experts, SAFE Project (Stop The Addiction Fatality Epidemic) in collaboration with the Connecticut Healthy Campus Initiative. These monthly opportunities would focus on how to implement evidence-based best practices for disseminating public health messaging about opioids and overdose prevention to the entire campus community including students, family of students, faculty, and staff. Topics would include how to effectively disseminate: opioid overdose response training; information about secure medication storage and disposal; education about the multiple pathways of recovery for opioid use disorder including medications, psychotherapy, peer support communities, and harm reduction; and education about stigma-reducing behaviors.
- Personalized Technical Assistance requested by any participating institution to address individualized capacity building needs around the topic of opioids and overdose prevention.

Funding would also be available for campus staff and students create specific events/initiatives on campuses related to the TA topics.

Technical Assistance would be provided by national content experts, **SAFE Project** (Stop The Addiction Fatality Epidemic). SAFE Project has been at the forefront of community-driven substance use initiatives, working with diverse communities across the nation to foster resilience and well-being. Their strategic approach to this work embraces systems building, and their model is in direct alignment with the **Strategic Prevention Framework (SPF)**. The SPF, developed by SAMHSA in 2004, is a five-step process that provides a method to design and deliver a culturally appropriate, effective, and sustainable intervention (Drug Enforcement Administration, 2020). With SAFE Project's assistance, campuses will assess their campus needs, build capacity through coalitions, map their assets and plan an informed intervention based on available public health research <u>SAFE Solutions – From SAFE Project</u>. They will coach campuses through the implementation and evaluation of their efforts, while also providing technical assistance to our contacts at the state as they structure and report on deliverables. This dynamic and iterative process is in direct alignment with the SPF and allows for sustainable, scalable systems change.

	4/1/25- 10/31/25	11/1/25- 10/31/26	11/1/26- 10/31/27	Total Cost
Technical Assistance (TA) with SAFE Project		\$38,000	\$38,000	\$76,000
(yearly allocations):				
12 Monthly 60-Minute Training Meetings				
for Faculty and Staff				
 12 Monthly 60-Minute Meetings for 	3			
Students & Community Engagement	*			
 240 Hours of Individualized Technical 				
Assistance as requested by participating				4
institutions				
Reporting on impact and progress of the				
TA (6 month, 12 month, and final report)				
Kickoff Summit: Presenter preparation time, travel	\$65,000			\$65,000
and speaking fees; summit location and meal				
expenses; and materials necessary for training				
Supplies & Marketing (Harm Reduction supplies,	\$12,767	\$83,038	\$83,038	\$178,843
marketing materials)				. ,
Project Coordinator	\$38,500	\$66,000	\$66,000	\$170,500
Student and Community Engagement Incentives		\$12,000	\$12,000	\$24,000
Campus Specific Events and Initiatives		\$30,000	\$30,000	\$60,000
Indirect Expenses	\$11,627	\$22,904	\$22,904	\$57,434
Total Cost	\$127,894	\$251,942	\$251,942	\$631,777

¹ Shelton RC, Goodwin K, McNeil M, Bernitz M, Alexander SP, Parish C, Brotzman L, Lee M, Li WB, Makam S, Ganek N, Foskett D, Warren C, Metsch LR. Application of The Consolidated Framework for Implementation Research to inform understanding of barriers and facilitators to the implementation of opioid and naloxone training on college campuses. Implement Sci Commun. 2023 May 23;4(1):56. doi: 10.1186/s43058-023-00438-y. PMID: 37221618; PMCID: PMC10204023.

CORE Priority: Priority 6, Strategy 1, Tactics 1&2; Priority 6, Strategy 2, Tactics1&2: Invest in efforts to reduce community stigma against OUD and OUD treatments

Category: \square treatment \boxtimes harm reduction \boxtimes prevention \boxtimes recovery supports

Lead & Partnering Agencies:

Department of Mental Health and Addiction Services

Connecticut Healthy Campus Initiative/CT Clearinghouse

Vetted by Referral Subcommittee? ⊠ yes

	Vetted by Research and Data Subcommittee? ⊠ yes
	 EBP ⋈ or Promising Practice □ Program evaluation recommended? □yes ⋈ no
	Pilot ⊠ or Established Program □
	Local □ or Statewide Rollout ⊠
	Vetted by Finance and Compliance Subcommittee? ⊠ yes
	Allowable Strategy ⊠ Compliant yes ⊠ no □
	 Proposed Funding Amount: \$631,777 total: \$127,894 for 4/1/25-10/31/25, \$251,942 for 11/1/25-
	10/31/26, \$251,942 for 11/1/26-10/31/27
	Approved Funding Amount: Same as proposed
	 ■ Budget submitted ☑
	 Proposed project dates: 4/1/25-10/31/27
	Approved project dates: same as proposed
	RFP □ Sole Source ⊠
	Committee Vote:32 Proceed with Recommendation0 Do Not Proceed with
Recomme	ndation

Signatures

Jeffrey Beckham

Secretary, Office of Policy and Management

Matthew Fitzsimmons

Designee, Attorney General, State of Connecticut