

The Opioid Crisis & Related Public Health Issues in the Rural Northern Counties: A Summit to Discuss Solutions

Summit objectives:

- 1) To encourage the sharing of best practices among providers in the region;
- 2) To facilitate networking among providers working related to the opioid crisis in the region; and
- 3) To summarize local provider recommendations for responding to the opioid crisis and related public health issues in the rural northern counties

Day One Agenda (Facilitator: Shelley Facente, Facente Consulting)

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8:30-9:00	Check-in & breakfast
9:00-9:10	Welcome; review of landscape, highlighting "added value" of this Summit
9:10-10:10	 Review of the data Overview of opioid use in the region (Christine Fenlon, CDPH) Overview of hepatitis C in the region, including treatment updates (Rachel McLean, CDPH) Overview of STDs, including HIV, in the region (Heidi Bauer, CDPH) Overview of other health concerns (e.g., soft tissue infections, endocarditis) (Danny Toub, Bay Area/North and Central Coast AIDS Education & Training Center)
10:10-10:40	What happened in Scott County, Indiana and implications for rural northern California (Alessandra Ross, CDPH)
10:40-10:45	Overview of upcoming county assessment (Taeko Frost, Harm Reduction Coalition)
10:45-11:00	Break

11:00-11:45 Breakout sessions

1. Current responses and challenges to hepatitis C prevention, testing and linkage to care in the region (Facilitators: Claire Feldman, Petaluma Health Center; Cassandra Miracle, Butte County Public Health Department; Gina Valente-Moore, Mathiesen Memorial Health Clinic) (EMPIRE, front area)

- Current responses and challenges to STD (including HIV) prevention, testing, and linkage to care in the region (Facilitators: Carolyn Chu, UCSF; Ashley Dockter, CDPH) (EMPIRE, back area)
- 3. Models for providing services in frontier or very low-resource counties (Facilitator: Andrew Woodruff, Plumas County Public Health Agency) (OAK)
- 4. Working with people who use drugs (outreach, peer models, etc.)
 (Facilitators: Meghan Murphy & Lorie Violette, Face to Face; Brandie Wilson,
 Humboldt Area Center for Harm Reduction) (ALEXANDER)
- 11:45-12:30 Report-back from small groups and discussion about current responses
- 12:30-1:15 Lunch
- 1:15-2:15 State resources for the region
 - California Hepatitis Alliance & California Syringe Exchange Program Network (Emalie Huriaux, Project Inform/California Hepatitis Alliance)
 - California Hub & Spoke System (Michael Freeman, DHCS)
 - Clinical Consultation Center (Carolyn Chu, UCSF)
 - Project ECHO (Norah Terrault, UCSF)
 - Syringe Program Technical Assistance & Supply Clearinghouse (Matt Curtis, CDPH)
- 2:15-2:45 Available/wanted: Improving effectiveness through collaborations

 Up to 3 minutes per person to stand up in the large group and describe a service you have available, or ask for a service you desire.
- 2:45-3:15 Break / Networking find those people you want to talk with some more!
- 3:15-4:00 Breakout sessions redux
 - 1. Current responses and challenges to hep C prevention, testing and linkage to care in the region (EMPIRE, front area)
 - 2. Current responses and challenges to STD/HIV prevention, testing, and linkage to care in the region (EMPIRE, back area)
 - 3. Models for providing services in frontier or very low-resource counties (OAK)
 - 4. Working with people who use drugs (ALEXANDER)
- 4:00-4:45 Report-back from small groups and discussion about what is needed to proceed
- 4:45-5:00 Wrap up, follow up plan, and closure



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Day Two Agenda (Facilitator: Eliza Wheeler, Harm Reduction Coalition)

8:30-9:00	Networking, breakfast, self-reflection exercise
9:00-9:15	Welcome and brief introductions
9:15-10:00	Setting the Context: the Opioid Epidemic andHhistory of Overdose Education and Naloxone Distribution (OEND)
	Objective: to understand the current scope and magnitude of opioid use and overdose in CA and the US, and to contextualize OEND within a broader strategy to reduce the harms associated with opioid use.
10:00-10:30	Focus on Fentanyl
	Objective: to examine the current data we have on fentanyl in California, along with an exploration of innovative strategies to empower people who use drugs (PWUD) reduce their risk amidst a changing drug supply.
10:30-10:45	Break
10:45-11:45	Overdose Basics: Risks, Recognition and Response
	Objective: to review a standard OEND training including; understanding opioid overdose, overdose risk, how to recognize an overdose and how to respond using naloxone.
11:45-12:00	Group exercise/reflection

12:00-1:00 Lunch

1:00-2:30 Implementing OEND/Naloxone Distribution Systems

Objective: to review best practices in OEND including; engaging PWUD, standing orders, legal issues, data collection, types of naloxone, pathways to receiving naloxone.

2:30-3:15 Breakout discussions on OEND:

Objective: to drill deeper into issues that programs are facing, or explore topics of interest in more depth.

Breakout #1: Implementing at Federally Qualified Health Centers (FQHCs)

Breakout #2: Standing orders, working with prescribers

Breakout #3: Data collection tools and guidance

Breakout #4: Implementing in substance use disorder treatment and correctional settings

Breakout #5: Sharing innovative strategies to reach PWUD in rural settings

Breakout #6: Prescription naloxone and Pharmacy Access

Breakout #7: OPEN space

3:15-3:30 Break

3:30-4:30 Breakout report back and resource sharing

Objective: to identify those in the room that may be able to assist with resources to overcome barriers identified in the breakout groups, and to share next steps with the larger group.

4:30-4:45 Technical Assistance & Capacity Building Resources in California

4:45-5:00 Wrap-up and closing exercise