



## Prevention

| Strategy   | Initiative  | Department/<br>Division<br>Responsible           | Timeline for<br>Completion* | Status  |
|------------|---|--|-----------------------------|---|
| <b>1a</b>  | Multi-jurisdictional education and prevention campaign, including proper storage and disposal of unused medications, resources for services and treatment, and Good Samaritan Law | HCS/<br>COD                                      | Short-term                  | Planned launch by early December; applying for a grant from the state to expand reach   |
| <b>*1b</b> | Continue prevention coalition and other work to explore and apply evidence-based prevention models  | HCS/ CH&HS/<br>RSD/CD&E                          | Ongoing                     | Ongoing; All Hands Learning series; tabling and support at community events like “What is Addiction” talk by Bellingham Public Library                              |
| <b>*1c</b> | Expand opportunities for community, first responder, and medical training on opioids, overdose prevention and intervention, and use of medication for opioid use disorder (MOUD)  | HCS/ CH&HS/<br>Health Officer/<br>RS and EMS     | Medium-term                 | Hired Medical Advisor; Convene partners through MAC subgroup; sponsored provider training; convene healthcare leadership; PeaceHealth holding a training in October |
| <b>1d</b>  | Increase litter clean-up and encampment mitigation  | HCS/ EH  | Ongoing                     | Ongoing – Sheriff’s office and private contract   |
| <b>1e</b>  | Implement strategies to reduce the number of people experiencing unsheltered homelessness and mitigate the individual and public health impacts of encampments                    | HCS  | Long-term                   | Applied for Trueblood grant; making plans for winter shelter; funded additional shelter beds and facilities including \$1M for YWCA family shelter                  |
| <b>1f</b>  | Purchase and distribute lock bags for personal use safe storage of both prescription and illicit drugs  | HCS/ Health<br>Officer/ CDE/<br>CH&HS and<br>EMS | Short-term                  | Lock bags will be purchased this fall and distributed shortly thereafter  |

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| <b>*1g</b> | Install and promote the use of at least one naloxone vending machine at a central location   | HCS/ CDE Division | Short-term | Complete – have installed 4, with plans to install 5 more this fall, including at Way Station; currently installed at East Whatcom Regional Resource Center, Bellingham Food Bank, Ferndale Community Services Resource Center, Ground Floor (NWYS) |
| <b>*1h</b> | Ensure community resource hub and website include service and treatment options for fentanyl | HCS/ CH&HS        | Short-term | RFP closed; contractor selected; contract pending internal review   |

## Intervention

| Strategy   | Initiative   | Department/<br>Division<br>Responsible                              | Timeline for<br>Completion* | Status  |
|------------|--|---|-----------------------------|---|
| <b>*2a</b> | Embed Substance Use Disorder Professionals (SUDP) in key sites like the Emergency Room to connect people who have recently overdosed, or new parents who are currently using fentanyl, with treatment beds and resources                                       | HCS/ RS/<br>Health Officer<br>in partnership<br>with<br>PeaceHealth | Medium-term                 | Applied for a received a grant to fund service; contract for embedded SUDP at ER approved by Council on 9/24  |
| <b>2b</b>  | Embed Community Health Workers and Social Workers in outpatient healthcare clinics to improve outcomes, particularly for mothers and infants   | HCS/ RS/<br>CH&HS   | Medium-term                 | Working to identify providers; applied for and received grant funding to embed a behavioral health specialist with the street medicine and SSP programs |
| <b>*2c</b> | Explore making non-fatal overdoses a notifiable condition to HCS, implement electronic notification system   | HCS/ Health<br>Officer and IT                                       | Medium-term                 | Researching best practices in other jurisdictions and exploring reporting software  |
| <b>*2d</b> | Work with partners to open a temporary recovery facility, until a 23-hour crisis care center is built, to provide a range of services to individuals who need a safe place to recover post-overdose or transition from jail or other institutions to community | HCS/<br>RS/CD&E   | Medium-term                 | Partnership with Didgwalic Wellness Center to open a MOUD and stabilization facility in November  |

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| <b>2e</b>  | Partner with fire and emergency medical systems and other jurisdictions to support an Overdose Response Team to connect people to follow up care and services                 | EMS, HCS/ RS/ Health Officer/CD&E, Fire Districts, Providers, PeaceHealth | Medium-term | Overdose Response position closed 9/22; working on notification systems  |
| <b>2f</b>  | Expand community-wide access to services and supplies, such as naloxone, that decrease harm/risk to those who use fentanyl  | EMS, HCS/ RS/ Health Officer/ CDE/ CH&HS                                  | Short-term  | So far in 2024, distributed 5,218 doses of naloxone from website requests, at front desk, through outreach programs, via vending boxes and at events |
| <b>2g</b>  | Explore the development of additional emergency shelter and transitional housing options specifically dedicated to substance use disorder                                     | HCS/ RS/ CH&HS  | Long-term   | In process via Council resolution on shelter   |
| <b>2h</b>  | Increase Law Enforcement Assisted Diversion (LEAD) Caseload by adding additional Behavioral Health Specialists; explore options for expanding Alternative Response Team (ART) | HCS/ RS   | Short-term  | Position recruitment in October  |
| <b>*2i</b> | Explore options for use of MOUD in the field  | HCS/ Health Officer   | Medium-term | Hired Medical Advisor; Convene partners through MAC subgroup; Unity Care NW will provide MOUD at Way Station   |
| <b>*2j</b> | Partner with a community provider to add mobile MOUD services   | HCS in partnership with City of Bellingham and provider                   | Short-term  | Partnership with Didgwalic Wellness Center to open a MOUD and stabilization facility and mobile units in November                                    |
| <b>*2k</b> | Create an overdose death review panel with relevant partners  | HCS/ Health Officer, Medical Examiner, Sheriff's office, Prosecutor       | Medium-term | On hold until new Medical Examiner is selected   |

## Treatment

| Strategy   | Initiative  | Department/<br>Division<br>Responsible | Timeline for<br>Completion* | Status  |
|------------|---|--|-----------------------------|---|
| <b>3a</b>  | Identify opportunities at the behavioral health campus on Division for public/private treatment projects or investments and develop a pipeline and prioritization of facility-based treatment projects, informed by stakeholder input | HCS/ RS                                | Long-term                   | 23-hour facility planning in place; will break ground in summer of 2025; received a pledge from Bellingham to help fund; pursuing pledges with Ferndale and Lynden                  |
| <b>3b</b>  | Enhance existing treatment and housing services to add capacity or improve outcomes   | HCS/ CH&HS                             | Short to<br>Medium-term     | Published an RFP to assess opportunities for improvement and program enhancement in permanent supportive housing; will include a treatment focus in homeless housing strategic plan |
| <b>*3c</b> | Expand and diversify jail treatment services  | HCS and<br>Sheriff                     | Medium-term                 | Working with Sheriff and a consultant firm hired to assess services; will have recommendations in early 2025  |
| <b>3d</b>  | Support Lummi Nation's Stabilization and Withdrawal Management Services (SWMS) facility   | Executive's<br>Office                  | Short-term                  | Executive Sidhu sent letters of support to state and federal funders  |
| <b>3e</b>  | Incentivize treatment providers to expand and hire locally  | WCHCS                                  | Long-term                   | Gauging interest in local expansion or new entrants; will work to develop incentive options for Council consideration   |

## Aftercare/Recovery

| Strategy   | Initiative  | Department/<br>Division<br>Responsible             | Timeline for<br>Completion* | Status   |
|------------|---|--|-----------------------------|--|
| <b>*4a</b> | Increase recovery housing   | WCHCS/<br>CH&HS/ RS                                | Medium-term                 | In process to provide \$1.5M in funding to Lake Whatcom Treatment Center to complete or rehab three facilities that will provide recovery and case management services; Applied for a nearly \$8M grant to provide housing for Trueblood class members |
| <b>*4b</b> | Provide land for a recovery-based tiny home village and work to secure permanent recovery housing | WCHCS/<br>CH&HS                                    | Long-term                   | On hold until after severe weather shelter season  |
| <b>4c</b>  | Partner to create additional recovery support facilities and community networks                   | WCHCS/ RS<br>and CH&HS                             | Medium- term                | Recovery Café opened 9/18 by Coalition in partnership with Chuckanut Health Foundation   |
| <b>*4d</b> | Enhance supported employment services   | WCHCS and<br>partners in<br>employment<br>services | Medium to<br>Long-term      | MAC subgroup convened with partners who provide supported employment; building strategies  |
| <b>*4e</b> | Partner to provide additional transportation resources between jail/hospital/services             | WCHCS/ RS,<br>EMS, Service<br>providers            | Long-term                   | Awaiting results of jail assessments and progress on HCA Medicaid grant  |

\*Indicates priority as identified by MAC Group