



COUNTY OF SONOMA

575 ADMINISTRATION
DRIVE, ROOM 102A
SANTA ROSA, CA 95403

SUMMARY REPORT

Agenda Date: 2/11/2025

To: County of Sonoma Board of Supervisors
Department or Agency Name(s): Department of Health Services
Staff Name and Phone Number: Jennifer Solito, 707-565-4774
Vote Requirement: Majority
Supervisorial District(s): Countywide

Title:

Prescription Opioid Settlement Fund Recommendations

Recommended Action:

Approve staff recommendation regarding the implementation plan for use of the Prescription Opioid Settlement Funds awarded to Sonoma County, for expansion of substance use services and other allowable prevention, education, and abatement activities.

Executive Summary:

In recent years, state and local governments have targeted pharmaceutical companies and distributors with legal claims stemming from actions that fueled the opioid addiction epidemic. National settlements to be collected over the next 14 years have been secured to create the Opioid Settlement Fund. Of this, the State of California is expected to receive approximately \$2.05 billion to be paid through calendar year 2038. To date, Sonoma County has received \$12 million which must be used on activities tied to ending, reducing or lessening the effects of the opioid crisis in our jurisdiction.

On September 10, 2024, staff presented the Opioid Settlement Fund Workshop to the Board, providing an overview of allowable uses of these funds and received Board input on areas of interest for fund usage.

This item incorporates that input and proposes an implementation plan totaling \$16,150,000 composed of \$12.7 million in currently available Opioid Settlement Funds and \$3.5 million expected to be received in calendar year 2025. Staff will return to the Board in the future with recommendations for allocating the \$27,550,000 anticipated to be collected between 2026 to 2038.

Discussion:

The County has received approximately \$12.7 million in prescription Opioid Settlement Funds (OSF) to date, currently held in fund balance. Additionally, \$31 million is expected to be received through 2038, for a total of \$43.7 million to Sonoma County. This amount may change should additional settlements be reached and secured for the benefit of Sonoma County. Additionally, local cities have the option to retain their dedicated settlement funds or may opt to reallocate their funds to the local County for use and distribution. The Town of Winsor and cities of Rohnert Park and Sonoma have chosen to reallocate their settlement funds to the County.

Allowable Expenditures

During the September 2024 Workshop, staff presented on the allowable and required uses of the OSF based on the various settlement agreements and state requirements. As a brief summary, the funds must be used for

activities tied to ending, reducing, or lessening the effects of the opioid epidemic in communities and include prevention, intervention, harm reduction, treatment and recovery services, and may not be used for any activities not related to substance abuse treatment and remediation, nor for law enforcement activities related to interdiction or criminal processing.

Sonoma County Opioid Impact Data

Sonoma County has an age adjusted overdose death rate of 21 per 100,000 and is slightly higher than the statewide average of 20 per 100,000. This places Sonoma County 27th in terms of opioid-related overdoses. The lasting effects of the COVID-19 pandemic, restricted access to healthcare and harm reduction services, and the changing drug supply are factors in these trends.

The growing presence of fentanyl in opioids and other drugs have led to an overall increase in unintentional drug overdose deaths, with Black, Latino/a/x, and multiracial residents among those having experienced the greater increases in opioid overdose deaths. Death rates for Sonoma County men have more than tripled from 2016-2018 to 2021-2023 and are more than three times higher than the rates for women. Geographically, the Russian River area continues to experience the highest opioid overdose death rates in the region, with zip code 95446 consistently the highest in the county. People experiencing homelessness make up about 1% of the population of Sonoma County but 10% of the drug overdose deaths. Source: <https://gis-community-health.sonomacounty.ca.gov/pages/mental-health-related-deaths> <%20https://gis-community-health.sonomacounty.ca.gov/pages/mental-health-related-deaths>

This crisis is complex, and the settlement funds will give outreach, care, and community services a much-needed opportunity for expansion. Sonoma County had 135 drug overdose (OD) fatalities in 2023 and of these 76% were opioid involved. The highest age adjusted death rates per 100,000 were in the Russian River area (38.5) and Santa Rosa (26.0). Sonoma County overdoses resulting in emergency department (ED) visits for 2022 stand at 289 with 44% of these involving fentanyl. Men substantially outnumber women for both overdose deaths and ED visits with age adjusted rates of 44.0 vs 15.4 (OD deaths) and 92.9 vs 39.1 (OD ED visits) respectively. Multiracial and Black populations have disproportionately high age adjusted rates as follows: Multiracial 54.8 (OD deaths) and Black 37.2 (OD deaths).

Sonoma County drug overdose death rates 2021-2023:

- Men had a drug overdose death rate nearly 3 times higher than women.
- Adults 25-44 years had the highest age-specific death rate from drug overdose.
- While the drug overdose death rate was low among Hispanic/Latine people in Sonoma County, the number of deaths for this group has more than tripled in the past 6 years.
- The drug overdose death rate was highest among people in Sonoma County identifying as multiracial.
- Santa Rosa and Russian River had the highest drug overdose death rates in the region, with the lowest rate in Sonoma Valley.

Hospital/Emergency visit rates from opioid overdose 2018-2022:

- Visit rate for men was almost 3 times higher than for women.
- Visit rate for adults 25-44 years was 2-6 times higher than rates for other age groups.
- Visit rates among Black people in Sonoma County was 1.5-5 times higher than rates for White and

Hispanic/Latine people in Sonoma County.

- Santa Rosa had the highest visit rate from opioid overdoses than other zip code aggregated regions in the county.

Sonoma County SUDS Needs

In general, the greatest needs related to substance use disorders (SUDS) treatment in Sonoma County include:

- More residential treatment, including for men, BIPOC populations, and youth.
- Preparation for the implementation of SB 43, as described below. This will require additional treatment capacity, both residential and transitional.
- Sober Living Environments and transitional housing.
- Harm reduction and prevention.

As such, the following recommendations are designed to target these areas of highest need.

Recommendations:

The continued loss of life and other impacts on the health and wellbeing of the community due to opioids underscores the need for increased efforts to expand access to substance use disorder treatment services, harm reduction, and education and prevention efforts. As such, DHS proposes allocating a total of \$16,150,000 in OSF Funds, as described below. This includes the currently available \$12.7 million OSF fund balance, and the addition of \$3.5 million, which is the expected OSF revenue to be received in the current calendar year.

1. Staffing for Harm Reduction, Prevention and Education - \$750,000 for 3 years:

Staff recommends utilizing \$750,000 in funding to support the expansion of harm reduction initiatives, prevention, and education, by adding one position to execute the additional program expansion activities, as follows:

- A) Adding a 1.0 FTE AODS Counselor I/II time-limited position, from July 1, 2025 to June 30, 2028, to support County-run prevention programs focused on harm reduction, prevention, and education. Under the guidance of the AODS Specialist and the Supervising Health Information Specialist, this position will focus on outreach, community events, and community education. The position will also train and educate student volunteers, school faculty, parents, and community members.

Harm Reduction - Supporting the expansion of harm reduction initiatives, including training and education for Narcan distribution and fentanyl test strips. DHS will also purchase Narcan and Fentanyl test strips and make available to community groups and facilities to request resources, as they are available.

Prevention/Education - The implementation of a Youth Outreach Program focused on prevention, education, and harm reduction, in coordination with our community partners, will support events and activities, training student volunteers to use and administer Narcan, and increasing community education on substance and opioid use disorder harm reduction. Interventions will include support around health education strategic planning and intentional outreach to youth through coordination with schools and partners for increased awareness, knowledge of access points, and information around treatment programs. Target audiences will

include youth in schools from elementary to college, education for caregivers, school personnel, school resource officers, and to the community around prevention and early intervention. Furthermore, data analysis around overdoses, misuse, demographics and regional analysis/mapping for targeted marketing and prevention work.

2. Expansion of Substance Use Disorder Services:

A) BHCIP Grant Match - \$3.8 Million

No less than 50%, or a total of \$21.5 million of the total expected OSF to Sonoma County, is required to be used on “High Impact Abatement Activities.” This includes matching funds or operational costs for SUDS facilities with an approved project within the Behavioral Health Continuum Infrastructure Program (BHCIP). On December 10, 2024, the Board approved a resolution authorizing DHS to apply to the California Department of Health Care services for a BHCIP grant in the amount of \$67.7 million (amended via Board resolution on February 4, 2025). The proposed project includes developing a campus for individuals with severe mental illness conserved under Lanterman-Petris-Short Act (LPS), as well as an adult residential SUD treatment facility. The campus will include a total of 64 sub-acute treatment beds within four different sixteen-bed facilities. One facility will provide co-occurring treatment. Additionally, another facility will provide treatment for SUD LPS and Murphy LPS Clients. The other facilities are for mental health clients and an open Mental Health Rehabilitation Center facility for step down to build out the continuum of services.

The SUD treatment facility will house 40 adult individuals shared between treatment and withdrawal management. Grant awards are expected to be announced in May 2025. Should the County be awarded the grant, the County must provide a 10% match which will be a combination of in-kind property value of 1430 Neotomas and cash. The in-kind property is valued at \$3.0 million, resulting in a remaining cash need of \$3.8 million. Staff recommends \$3.8 million in OSF be set aside to fund this match requirement. If the grant is not awarded, the \$3.8 million in funds will be included in the proposed Community Funding Release, discussed below in section 2.B.

B) Funding Release for Community Proposals - \$11.6 Million

Staff recommends implementing a broad request for community proposals process for distribution of the remaining \$11.6 million of available OSF, for the development and multi-year operation of new or expanded SUDS prevention, education, and harm reduction programs within Sonoma County. Priority will be given to projects serving populations disproportionately impacted by opioid use, including BIPOC and male populations, and in regional areas lacking current SUDS treatment and recovery residences. Should the Board approve this recommendation, it is expected the proposal solicitation process will begin in summer 2025.

Recommended service categories to be included in the proposal request process are:

Recovery Residences - Staff recommends adding an additional capacity of at least 60 persons in recovery residences to fill in the following demographic and regional gaps in the SUD service continuum:

- BIPOC (7+ residents)

- Latinx (7+ residents)
- Men (14+ residents)
- Men with children (7+ residents)
- Russian River Area (7+ residents)
- Emergency Department Discharges (7+ residents)
- Severe SUD impairment (SB 43) (7+ residents)

These facilities should be monitored with appointed house managers or supervised with trained peers or staff depending on acuity level of residents. All residents should receive SUD services including one or more of the following: outpatient, intensive outpatient, care coordination, recovery services, or medication-assisted treatment (MAT) services. Any program staff, oversight, and residents in facilities from grants recipients will be eligible for support from DHS DMC-ODS Care Coordinator positions. This added capacity is needed to address current population needs, and also in anticipation of the implementation of [SB 43](https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB43) [<https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB43>](https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240SB43), which becomes effective January 1, 2026 and will expand conservatorship to address SUDS impairment and greater expand the capacity needs in the county. Functionally, SB 43 allows people to be placed on psychiatric and other involuntary holds based on presence of a “severe” SUD diagnosis. SB 43 also expands grave disability criteria to include issues of personal safety and inability to obtain necessary medical care. This has the potential to greatly increase conservator and SUDS treatment needs.

Outpatient Treatment with MAT services - Adding outpatient programming with a developed continuum of services (outpatient, intensive outpatient, partial hospitalization) with a comprehensive MAT program and ability to serve clients with moderate to severe co-occurring mental health diagnoses.

Residential Treatment for Men with MAT services - Staff recommends adding 12+ additional men’s residential treatment beds. The residential treatment program should have a comprehensive MAT program and ability to serve clients with moderate to severe co-occurring mental health diagnoses.

Syringe Exchange Programs - Staff recommends increasing capacity for syringe exchange programs in Sonoma County. Syringe exchange programs services can provide education on safe injection practices, sterile injecting supplies, wound care supplies, connections to SUD treatment, mental health services, and healthcare services. These programs would also provide testing for common injection transmitted infections including human immunodeficiency virus (HIV), hepatitis C virus (HCV), and hepatitis B virus (HBV).

Prevention, Education, and Harm Reduction - Development of targeted media and information campaigns using a variety of modalities to reach key audiences that are informed by overdose data. Proposals should be focused on one or more demographics such as: BIPOC, Latinx, Russian River Area residents, adults ages 25-44, or youth. Staff recommends that education and harm reduction efforts coordinate with community partners, support events and engagement activities, and provides training where appropriate such as with Narcan

administration and utilization of fentanyl test strips. Areas of focus should be data driven and include collaboration with County SUD Prevention and Public Health when possible.

Strategic Plan:

This item directly supports the County’s Five-year Strategic Plan and is aligned with the following pillar, goal, and objective.

Pillar: Healthy and Safe Communities

Goal: Goal 1: Expand integrated system of care to address gaps in services to the County’s most vulnerable.

Objective: Objective 2: Identify gaps in the Safety Net system of services and identify areas where departments can address those gaps directly, and seek guidance from the Board when additional resources and/or policy direction is needed.

Racial Equity:

Was this item identified as an opportunity to apply the Racial Equity Toolkit?

No

Prior Board Actions:

9/24/2024 - Opioid Settlement Funds - Workshop:

<http://sonoma-county.legistar.com/LegislationDetail.aspx?ID=6866623&GUID=2C3C067C-37B1-499F-9D13-10BCBF755B7F>

FISCAL SUMMARY

Expenditures	FY24-25 Adopted	FY25-26 Projected	FY26-27 Projected
Budgeted Expenses	0		
Additional Appropriation Requested	0		
Total Expenditures	0		
Funding Sources			
General Fund/WA GF			
State/Federal			
Fees/Other			
Use of Fund Balance	0		
General Fund Contingencies			
Total Sources	0		

Narrative Explanation of Fiscal Impacts:

The Opioid Settlement Funds are currently held in a non-departmental budget account. Should the Board approve OSF usage as proposed in this item, the Department will include applicable adjustments in the next quarterly consolidated budget adjustment to appropriate the funds for usage within and by DHS.

Staffing Impacts:			
Position Title (Payroll Classification)	Monthly Salary Range (A-I Step)	Additions (Number)	Deletions (Number)

Narrative Explanation of Staffing Impacts (If Required):

None

Attachments:

Attachment 1 - Presentation

Related Items "On File" with the Clerk of the Board:

None