



Harm Reduction Summit

Opioid Abatement Funding: Explanation and Possibilities

June 16, 2025



Lauren's story





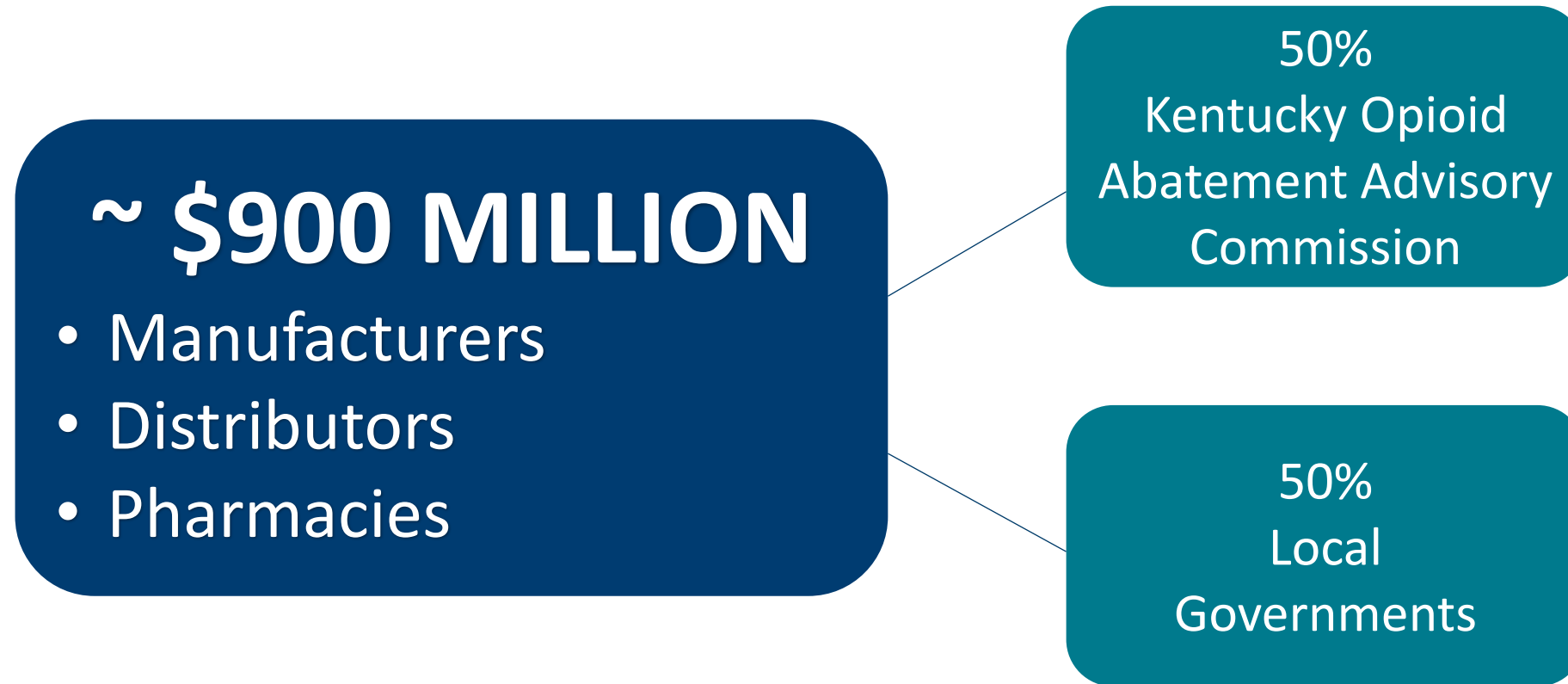
Margaret McGladrey, PhD
RITA Hub Faculty Director

What is the Rapid Implementation and Technical Assistance (RITA) Hub?

- ▶ RITA provides no cost technical assistance and implementation support to criminal legal system, health, and social service agencies across Kentucky.
- ▶ We are committed to assisting agencies that want to implement evidence-based programs (EBPs) to prevent and treat opioid use disorder.



Brooke Hiltz, JD
Research Program Administrator



Funds must be used in accordance with KRS 15.291 (5) Exhibit E

Opioid remediation



- Care, treatment, and other programs and expenditures designed to
- (1) address the misuse or **disordered use** of opioid products,
- (2) treat or mitigate opioid use or related disorders, or
- (3) mitigate other alleged effects of, including on those injured as a result of, the opioid epidemic.



Settlement agreement quick links

[Exhibit E](#)

[KRS 15.291](#)

Reporting requirements



Impact reporting update July 2025

1. Basic Information:

- County or municipality name
- Fiscal year
- Contact details for the report preparer

2. Funded Effort and Progress:

- Name and authorization date of the funded effort
- A brief progress report (125-250 words)

3. Optional Metrics (if available):

- **Process measures:** Quantity of services provided (e.g., number of participants)
- **Quality measures:** Indicators of service quality (e.g., client satisfaction)
- **Outcome measures:** Impact on clients (e.g., recovery progress)



Principle 1: Spend money to save lives

Principle 2: Use evidence to guide spending

Principle 3: Invest in youth prevention

Principle 4: Focus on racial equity

Principle 5: Develop a fair and transparent process for deciding where to spend the funding

Allowable uses of Opioid Settlement Funds



Prevention - e.g., media campaigns, school- and youth-based programs

Harm reduction - e.g., syringe service programs, naloxone distribution

Treatment - e.g., medications for opioid use disorder, telehealth, access to treatment

Recovery supports - e.g., supportive housing, wrap-around services

Leadership/planning/coordination - training, research

According to the terms of the opioid settlements and KRS 15.291 and 15.293

Allowable uses of Opioid Settlement Funds



Core strategies:

- **Naloxone** or other opioid overdose reversal drugs
- **Medication for Opioid Use Disorder (MOUD) / MAT**
- Services for **pregnant women and parents**
- Expanding treatment for **neonatal abstinence syndrome**
- Expansion of **warm hand-off programs** and recovery services
- Treatment for **incarcerated populations**
- **Prevention** programs
- Expanding **syringe service** programs
- Evidence-based **data collection** on the effectiveness of abatement strategies

See Exhibit E, the National Opioid Settlement Agreement

Examples of evidence-based programs



Expansion of local
syringe service
programs

Community-based
naloxone distribution

Naloxone vending
machine placement

Development and
distribution of anti-
stigma campaigns

Increased jail-based
access to Medication
for Opioid Use
Disorder

Peer support, social
worker, and/or care
navigator placement

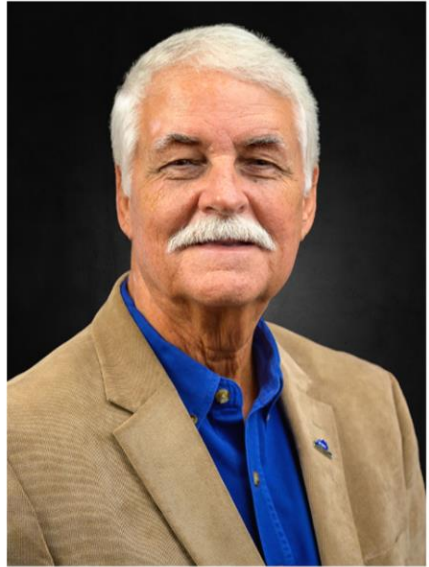
Transportation,
childcare, and
workforce
development supports

Establishment of
recovery community
centers or recovery
housing

- Increase naloxone access for first responders, individuals with OUD, families, schools, outreach workers, and those leaving incarceration.
- Support public health efforts to distribute free naloxone.
- Provide naloxone training for first responders, patients, families, schools, and communities.
- Equip and train school staff to respond to overdoses.
- Develop or enhance overdose and naloxone tracking systems.
- Educate the public on overdose response.
- Promote awareness of immunity and Good Samaritan laws.
- Train first responders on Good Samaritan protections.
- Support syringe service programs with supplies, staff, peer support, and care connections.
- Expand testing and treatment for HIV, Hepatitis C, and other infectious diseases.
- Fund mobile units offering harm reduction, treatment, and recovery support.
- Train healthcare providers and peers in harm reduction strategies.
- Support routine fentanyl screening in clinical toxicology tests.



Breckinridge County



“As with any new program, there are always questions and concerns that arise and our county has an advisor that we can contact to get the answers. Lauren has been invaluable to us as a point of contact for the many questions and concerns we have had as we implement this program. We appreciate KACo and the foresight they had to be proactive and create the technical advisor position and place Lauren in that position. This has been a tremendous help to our county.”

- Maurice Lucas,
Breckinridge County Judge/Executive

FREE

**Monthly
Harm Reduction
Supplies
Distribution**

2025 Distribution Dates:
January 7th
February 4th
March 4th
April 1st
May 6th

LOCATION:
HARDINBURG PUBLIC LIBRARY
6:00 PM TO 8:00 PM CST

SUPPLIES AVAILABLE:
Naloxone (Narcan)
Fentanyl Test Strips
Xylazine Test Strips
Wound Care Supplies
Harm Reduction Education

Breckinridge County Harm Reduction Program

FIRST COME FIRST SERVED WHILE SUPPLIES LAST

For More Information Call: 270-668-7294 or email kayela.bennett@ky.gov



Counties in action – harm reduction



Introducing



Located at:
The Lee County Health
Department Annex
45 Center Street
Beattyville, KY
606-216-6483



- Recovery Coaching
- Offender Corrections Education
- Emergency Food & Clothing
- Transportation
- Help for Family & Friends
- CR, AA, NA, Relapse Prevention
- SMART Recovery
- Parenting Classes
- Overdose Response
- Casey's Law Advocacy
- Substance Use Treatment
- Sober Living/Transitional Housing
- Employment Readiness
- Leave Behind Program
- New Beginnings Program
- Food Commodities (60+)
- Telehealth- physical & behavioral
- Anger Management

One Stop Resource Center for anybody in **Addiction** and **Recovery**!
Come See Us!



Why is it important to consider the criminal legal system?

An estimated

58%

of people in state prison and 63% of people sentenced to a local jail suffer from drug dependency or abuse.

Evidence Based Programs exist across the system.

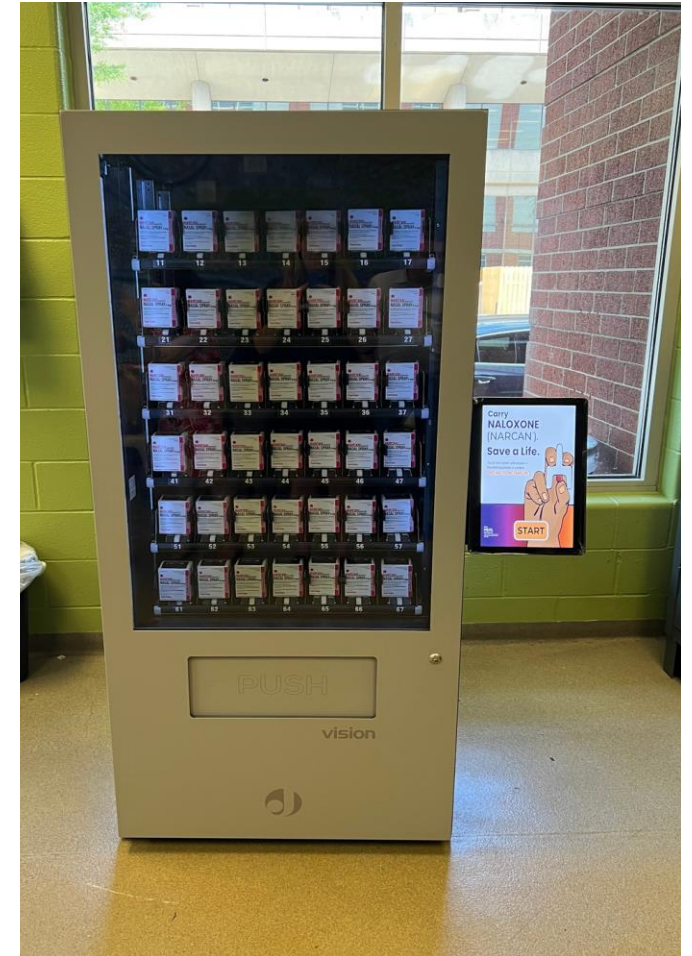
- ▶ Integrating overdose education and naloxone distribution into agency practice.
- ▶ Setting up naloxone vending machines in jails, courthouses, and other public settings.
- ▶ Embedding peer support specialists, social workers, and/or care navigators into agencies (police departments, detention centers).
- ▶ Increasing access to peer support specialist training and credentialing for people in the CLS system.
- ▶ Expanding access to medication for opioid use disorder in detention centers.

Narcan vending machines



KRS §15.291(5)a(3) and KRS §15.291(5)b(24)

- Hands-off, judgement free way to distribute Narcan without adding work to agency staff.
- Can be placed in any public area: jails, health departments, police departments, libraries, etc.
- Kentucky jails with Naloxone vending machines: Madison County, Boyd County, Knox County, and Louisville Metro DC
- www.findnaloxone.gov can be used to locate no-cost Narcan and keep the machine stocked.
- Price varies from \$3000 - \$12,000 depending on the style and capabilities of the machine.



Within the first 2 weeks after release from incarceration, the risk of death from drug overdose is about 12 times higher.



Peer support specialists, social workers, care navigators



KRS §15.291(5)a(1a,b); KRS §15.291(5)b(1, 25-27); KRS §15.291(5)b(4)

- **Peer support specialist** – Someone in recovery from a substance use and/or mental health condition who has been trained and is certified to provide support to others experiencing similar challenges
- **Social worker or care navigator** – Someone who has been trained to assist individuals, families, and communities to improve their quality of life by addressing social, emotional, and behavioral problems.
- **There are many agencies throughout Kentucky that train and embed these professionals, including:**
 - Bluegrass Care Navigators
 - Fresh Start
 - Pathways
 - Voices of Hope

Peer support specialists



KRS § 15.291(5)a(1a,b); KRS § 15.291(5)b(1,25-27); KRS § 15.291(5)b(4)



Counties in action

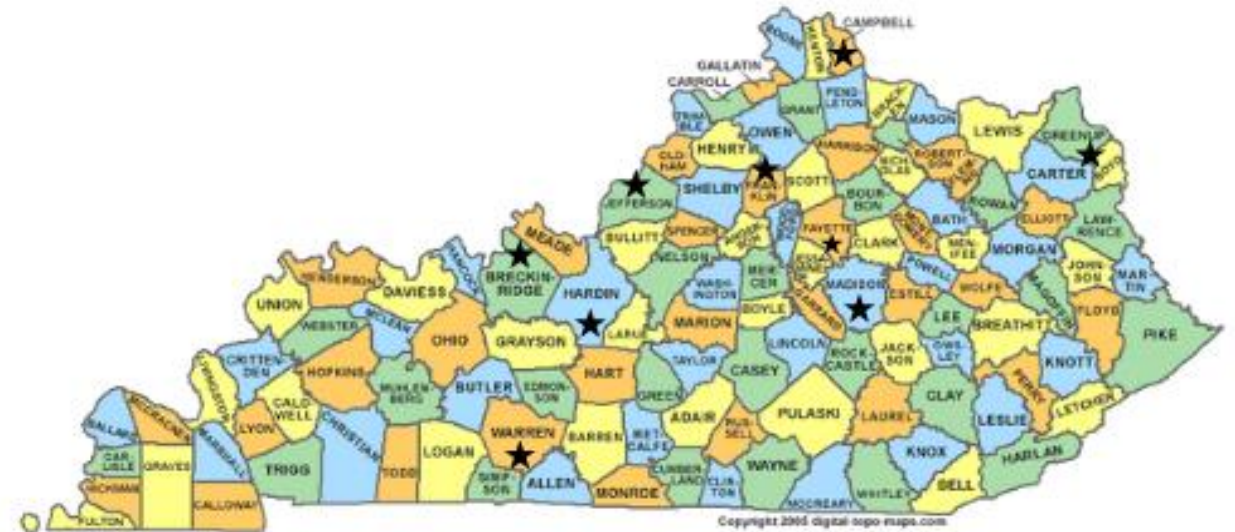


Social workers in the following police/fire departments:

- Alexandria, KY (Campbell Co.)
- Frankfort, KY
- Louisville, KY
- Lexington, KY - Paramedicine department

Peer support specialists in the following jails:




- Boyd County Jail
- Greenup County Jail
- Warren County Jail
- Breckinridge County Jail
- Madison County Jail



Medications for opioid use disorder (MOUD)



- MOUD are an effective but underutilized treatment that can save lives and improve quality of life for patients with OUD.
- Medications like methadone or buprenorphine can help stabilize brain chemistry during recovery, which reduces cravings and withdrawal symptoms.

Methadone Reduces Risk of Death	Buprenorphine (Suboxone®, Sublocade®, Brixadi® & Others) Reduces Risk of Death	Naltrexone (Vivitrol®)
 <ul style="list-style-type: none">• Helps with withdrawal, cravings, and pain• Taken as a liquid• Only available from licensed opioid treatment programs, which are highly regulated by the government• Patients may be required to go to the clinic daily for the first 90 days of treatment	 <ul style="list-style-type: none">• Helps with withdrawal, cravings, and pain• New rules make it easier for healthcare providers to prescribe it, but not all clinics offer it• Available as a tablet or film that is usually taken daily under the tongue or as a weekly or monthly injection given by a healthcare provider	 <ul style="list-style-type: none">• May help with cravings but does not treat opioid withdrawal or pain• Often need to stop all opioid use for 7-10 days• Available as oral pills or monthly shot (shot recommended)

MOUD in County Jails

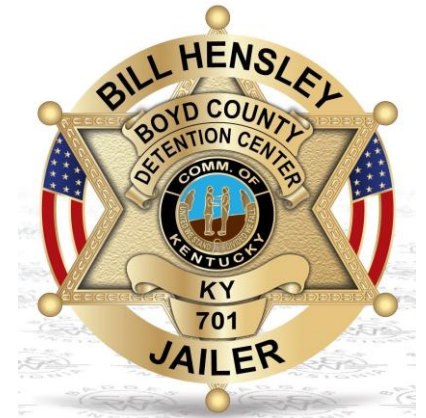
KRS § 15.291(5)a(1a,b); KRS § 15.291(5)b(1,25-27); KRS § 15.291(5)b(4)

In a recent letter from the U.S. Attorney's Office for the Eastern District of Kentucky, correctional facility administrators were advised that under the ADA, “**facilities cannot deny healthcare services**, including lawfully prescribed medication, to individuals based upon the type of medication prescribed. This includes buprenorphine (Suboxone), naltrexone, or methadone, which are used to treat Opioid Use Disorder (OUD). Individuals being treated with medication for OUD are generally considered disabled and are protected by the ADA.”

Boyd County Detention Center MOUD program



- Provide evidence-informed treatment, including MOUD, recovery support, harm reduction, or other appropriate services to individuals with OUD and any co-occurring SUD/MH conditions who are incarcerated in jail or prison.
- Provide evidence-informed treatment, including MOUD, recovery support, harm reduction, or other appropriate services to individuals with OUD and any co-occurring SUD/MH conditions who are leaving jail or prison or have recently left jail or prison, are on probation or parole, are under community corrections supervision, or are in re-entry programs or facilities.





- **Steering committee** creation
- Utilization of existing coalitions and task forces as **advisory groups**
- Engagement in **community needs assessments**
- **Strategic planning**
- **Work plan** creation
- Development of **request for proposals** and request for proposal review committees
- **Formalizing processes** to ensure continuity and sustainability

Creating a settlement council



Voices from impacted communities and opioid abatement experts

- People with lived/living experience, including MOUD recipients
- Public health professionals (e.g., health departments, schools of public health)
- Primary prevention providers (e.g., PCPs, school clinicians)
- Treatment providers serving underserved populations
- Recovery and social service groups (e.g., Housing First programs)
- Ensure council diversity in gender, race, ethnicity, orientation, professional background and lived experience.



Questions?



KACo opioid settlement resource library



s and Training ▾ Advocacy ▾ County Information ▾ News ▾

Opioid Settlement



County Officials Directory
County Election Results
KACo Salary Explorer
County Financials
Annexation
Opioid Settlement
County Map
Medical Cannabis
County Data

- [Sample MOU](#)
- [Sample RFP/Grant Application](#)
- [FAQ](#)

KACo Opioid Settlement Resource Library



This resource library contains links to settlement resources, including the settlement agreement and distribution schedules, information about the Kentucky Opioid Abatement Advisory Commission, resources from NACo and John Hopkins University. This page will be updated as more information and resources become available.

You can submit questions about the opioid settlement here.

Opioid Settlement Advisor



- General settlement questions
- Strategic planning
- Allowable uses
- Spending plan development
- Resources
- Monitoring
- Peer examples

Lauren Carr

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No cost technical assistance and implementation support

Services include:

- Integrating overdose education and naloxone distribution into agency practice
- Assisting with ordering and setting up naloxone vending machines
- Guiding the training and embedding of peer support specialists, recovery coaches, and care navigators
- Creating customized EBP implementation plans and providing connections to peer agency contacts
- Curating and facilitating customized training programs on topics related to OUD, harm reduction, and EBP implementation

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