VCJR & City OPC Update

Oct. 26th, 2026

Saving lives, providing care and improving community health and safety



VCJR Vermonters for Criminal Justice Reform

How we got here

1) Act 178 was passed into Vermont state law in June 2024 authorizing the creation of a pilot Overdose Prevention Center (OPC) in Burlington. Funded through opioid settlement dollars—$1.1 million in FY25, with continuation through at least 2028.

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2) The City of Burlington is the grant recipient for the OPC project.

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3) In March 2025, the City selected Vermonters for Criminal Justice Reform (VCJR) as the OPC Provider upon the recommendations of the review committee.

4) The City and VCJR created a joint Project Proposal and Compliance Plans which were unanimously approved by the City Council on April 28, 2025 and submitted to the VT Department of Health for final approval

5) In May 2025, the Vermont Department of Health accepted the City's proposal. The City began working with the State on a formal grant agreement, with a start date of July 1, 2025

6) Final contracts with VCJR were executed in December of 2025 (funding became available)

Why Burlington Was Chosen for Vermont’s First OPC



- Burlington has the highest concentration of overdose incidents in the state, especially downtown—making it the most effective location to reach people who need it most.
- The City Council has supported an OPC since 2018, and both former and current mayors have championed the effort. There’s also strong backing from health experts, public safety, and harm reduction providers.
- State Legislation through Act 178, passed in 2024, designated Burlington as the pilot site. It secured $1.1 million in opioid settlement funds to launch the project and built in oversight and evaluation requirements.
- Burlington already has harm reduction services, experienced providers, and strong partnerships—making it well-prepared to implement the OPC quickly and effectively.

Why was VCJR chosen to implement the OPC?



Vermonters for Criminal Justice Reform (VCJR) is a walk-in re-entry and recovery center serving people with substance use and co-occurring mental health disorders.

VCJR staff has extensive experience providing low barrier services to very high-risk people in Vermont. We have earned the trust and credibility of this challenging to reach and serve population and we are already successfully providing important and lifesaving services in the community that complement OPC services very well.

Who VCJR Serves



We've served over **500 high-risk people** on site at our re-entry and recovery center. At intake:

- 49% of participants were recently released from incarceration (a particulary high risk group for overdose death)
- 59% of participants were unhoused
- 82% tested positive for both stimulants and opioids
- 82% reported current injection drug use
- 48% reported an overdose in the past 6 months
- Over 90% were not accessing services at another recovery center

Services We Currently Provide



- Walk-in case management
- Overdose prevention services and harm reduction supplies
- Parenting and DCF support
- Drug checking services
- Crisis support
- Drug treatment, treatment options counseling and linkages to care
- Transportation (inpatient treatment, housing appointments, specialty medical appointments, etc.)
- Accompaniment to the emergency room/hospital, hospitalization retention support and hospital discharge planning
- Low barrier medical care through a partnership with Johnson Health Center Services
    - Wound care/Infection care (including antibiotics)
    - Mental health and MOUD medications, including long-acting injectable forms
    - On-site lab testing
    - Prevantive care
    - STI testing and treatment
    - HIV/Hepatitis C testing and treatment

Program Accomplishments: Phase 1



- **Syringe Services Programming:** Maintained Syringe Services Program status with VDH
- **Work Plan:** Developed and implemented a work plan in coordination with VDH
- **Policies and Procedures:** Drafted dozens of policies and procedures in accordance with VDH's OPC Operational Guidelines, incorporating technical assistance from Project Weber/RENEW and additional policies informed by the community services assessment.
- **Budget:** Developed budget and budget narratives
- **Community engagement:** Engaged with hundreds of community stakeholders, community members, decision makers and community providers in order to keep the community informed on progress and educate the public on OPC's and the need in Vermont

Program Accomplishments: Phase 1 Continued



- **Hired Contractors**: real estate agent, budgeting and finance support, hazardous waste disposal, techinical assistance partners

- **Community Webinar:** Over 100 community members attended a successful educational webinar with research and public health experts, staff of an existing OPC and people with lived experience

- **Database:** VCJR has successfully installed a data server and partnered with Brown University for support in building a database specific to OPC services

- **Grant Obligations:** VCJR and the city have had success with all grant objectives and continue to make good progress on opening an OPC

Program Accomplishments: Phase 1 Continued



Partner Engagement: Engaged partners to support the work of the OPC and the required wrap around services needed to give the best possible care to the vulnerable population served.

- BioServ - Hazardous Waste Management
- MK Mastercraft - Tech Support and Database Server
- Pathways – Housing assistance and intentional peer support
- Brown University - Technical Assistance, Database Support & Development
- Johnson Health Center – Low barrier medical care, medications for opioid use disorder (MOUD), lab services and much more
- Project Weber/RENEW - Consulting on OPC best practices and organization
- Howard Center: referrals and linkages to Chittenden Clinic, substance use counseling and more
- Pacific Institute for Research and Evaluation (PIRE) - Services Assessment and Neighborhood Impact Study

Program Accomplishments: Phase 1 Continued



Community Service Assessment: In accordance with grant obligations, the Burlington OPC Services Assessment was completed in partnership with PIRE (an independent non profit that provides public health related research and evaluation typically for federal or state governments)

- Conducted to evaluate local need and inform the planning, design and potential location of the OPC
- The assessment utilized a mixed-method approach that combined in person interviews with persons with living experience, an online multi-lingual survey, and interviews and focus groups with first responders and community partners

Program Accomplishments: Phase 1 Continued



- Key findings included:
  - Burlington continues to experience a high burden of overdose mortality relative to state and national average due laregly to fentanyl and other dangerous contaminants
  - Risk remains elevated despite reductions in state averages, especially among people who are unhoused, have chronic health conditions and in people who frequently use drugs in public or alone
  - PWLE attitudes regarding OPC were overwhelmingly strong
  - Community perspectives were more mixed, but overall leaned supportive
  - Overall findings indicate an OPC has the potential to reduce overdose fatality, decrease public drug use and connect vulernable people to life saving health and social supports

Service Assesment Results



Notable Survey Results of people with lived experience (PWLE)

Substance Use (methods of consumption in the past 30 days)

- 96% Reported smoking or inhaling
- 53% Reported injecting
- 12% Reported either Ingesting or snorting
- 86% Reported using drugs at least once per day
- 43% Said that they used alone most of the time or always

Health Conditions

- All but 2 respondents reported having at least one chronic health condition, such as chronic circulation problems, wounds or scarring from an injury, abscesses, diabetes, Hepatitis C, or other conditions affecting the heart, liver or lungs.

Service Assesment Results

Housing Status

- 80% unhoused indicating they were unsheltered or living in an outdoor public space within the past three months.
- 16% reported living in an apartment or house that they rented or owned in the past three months.

Areas where substance use occurs

- 78% Where living or staying
- 70% Outside like a park or alley
- 67% A vehicle
- 63% City Hall Park
- 61% At someone else’s residence
- 57% Public restrooms
- 53% Outside at the Waterfront
- 43% Public building

Service Assesment Results

OPC services most prioritized by PWLE

- 98% Compassionate Overdose Response
- 98% Overdose Prevention Supplies & Education
- 98% Health professionals
- 96% Use indoors rather than in public
- 96% Sterile injection and/or smoking equipment
- 93% Referrals for treatment or social services
- 93% Safety from being seen or arrested by police while at the OPC93% Want any overdose to be reversed/avoid fatal overdose
- 91% On-site drug checking
- 91% Safety from crime or violence
- 80% Don’t want to use alone
- 20% Wrote in additional services they would like access to.

Of the 49 PWLE surveyed, 92% responded that they would consider using the OPC once it opens and 73% would use it all or most of the time.

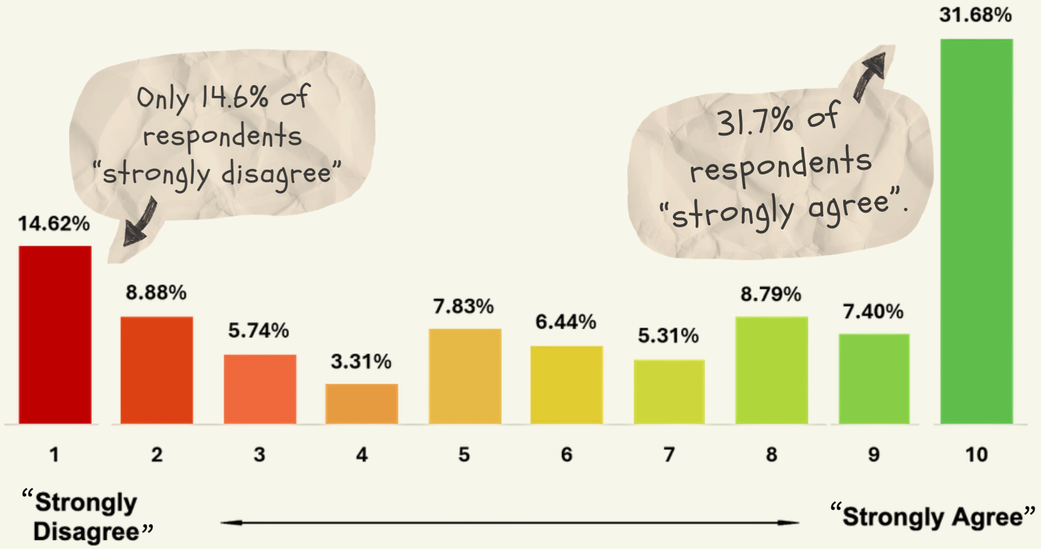
Notable Survey Results from the Wider Burlington Community Survey



Participant Identified as

- 74% Burlington Residents
- 45% Working in Burlington
- 2% Burlington Business Owners
- 12% of respondents did not identify as living or working in Burlington
- 8% of community survey respondents identified as a person who currently uses or formerly used non-prescription opioids or stimulants

Respondents were asked to what extent they agreed or disagreed that an OPC would be helpful in Burlington. **66.75% of respondents selected 5 or above**



7. **Community Engagement and Education:** VCJR and the City have conducted robust and ongoing community engagement to provide information about the Burlington OPC, answer questions and listen to community perspectives. Prestentations included:



Ward/Neighbrhood Planning Assemblies (NPA)

Ward NPA	Dates
Ward 1	6/11/2025, 2/11/2026, 9/9/2026, 10/1/2026
Ward 2	6/12/2025, 12/11/2025, 9/10/2026
Ward 3	11/5/2025
Ward 4 & 7	2/26/2025, 5/27/2026, 9/23/2026
Ward 5	11/20/2025, 3/19/2026, 4/16/2026
Ward 8	3/26/2026, 10/22/2026

Community Engagement with Service Providers

Service Provider/ Group	Dates
Turning Point	12/17/2025
Situation Table	8/26/2026
Brown University/ UVM infectious disease providers	7/17/2026
UVM Larner School of Medical Students	4/29/2026, 6/10/2026, 9/14/2026
CVOEO/ Bridges Recovery Shelter	4/6/2026, 10/8/2026
Johnson Health Center	1/2026, Ongoing
Howard Center Chittenden Clinic	9/10/2025, 5/26/2026





Community Engagement at Stakeholder Events

Stakeholders	Dates
City Council Engagement & Work Sessions	Fall 2025 & Fall 2026
Overdose Awareness Day Tabling Organized Team by Sharing	8/31/2026
Legislative testimony and outreach/updates to key legislators	Most Recent Testimony 5/26/2026
Marketplace Commission Meeting	3/18/2026
Community Education Webinar Facilitated with OPC experts, VCJR, and the City in Partnership with PIRE	11/6/2025
Chittenden County Public Defender's Office	Fall 2025
First Unitarian Universalist Society of Burlington Listening Circle	6/2/2025
Chittenden Country States Attorney	10/13/2026





Site Acquisition



- VCJR has a preferred property that is currently being held under a 90 days Letter of Intent.
- While the Letter of Intent is in place, the City is working with City government, the Planning Commission and City Council to secure the required permissions for the preferred site.
- A draft Financing Plan has been submitted to DSU for review.
- The City has contracted with PIRE to Conduct a Neighborhood Impact Study prior to opening the OPC.
- The team has been working to complete updated Year 2 and Year 3 budgets based on the proposed financing plan pending approval by DSU.

Sustainability Planning



The OPC pilot project was greenlighted with well over majority votes from this committee and further prioritized by the VT legislature with intent for a three-year pilot (beginning in FY 2025) in order to save lives. However, even with legislative intent, it requires voting and a new appropriation each year.

The City and VCJR are actively exploring additional public and private funding sources to ensure long-term sustainability after the intial three-year pilot, including:

- Other harm reduction or behavioral health grants
- Additional Opioid Settlement Funds
- Medicaid billing for eligible services
- Philanthropic and community-based support

Rhode Island's OPC: Project Weber Renew



- 0 Fatal overdoses
- In just the first 9 months 653 unique people were served over 6.619 visits
- 4,000 referrals to treatment, peer support, case management, and other services in its first 10 months.
- In 2025 alone, providers wrote over 6,000 prescriptions for lifesaving medications like buprenorphine
- By April 2026, the OPC had reached approximately 12,040 visits, conducted more than 150 overdose interventions, and still had 0 fatal overdoses.
- From January–June 2025, the OPC had 2,517 visits, 44 overdose interventions, only 1 EMS transport, and 0 fatal overdoses.
- The State of Rhode Island surpassed their goal of reducing overdoses by 50% by 2030 several years early! Rhode Island went from 436 overdose deaths in 2022 → 219 in 2025, a 50% reduction and the Governor credits their OPC first!

Overdose Prevention Center’s Services Save Lives



- The purpose of the opioid settlement funding is reduce overdose deaths and OPC’s are one of the most concrete ways we can do that
- It is well documented that OPC’s prevent overdose deaths, save lives and connect people to other life saving services (like MOUD and other medical care)
- Opioid settlement dollars are being used to fund OPC services in both Rhode Island and New York and they are both saving lives and improving their communities as intended
- Vulnerable people at high risk of opioid related deaths are telling us they need an OPC to help improve their safety
- An OPC will help connect very high-risk people who are falling through the cracks to care: people who use harm reduction programs are 5 times more likely to enter treatment

Overdose Prevention Center's Services Save Lives



- Overdose deaths in Chittenden County are increasing. According to State's Attorney data, fatal overdoses have increased 64% in Chitteden County (we lost 18 people in the first 6 months of 2026, compared to a three-year average of 11)
- Vermont is dealing with a dangerous and volatile drug supply that we can't control
- Substance use disorder is a chronic and relapsing condition and many people are falling through the cracks in our system
- The OPC is an opportunity to try something we haven't yet. Opioid settlement funds are intended to be used on innovative new strategies aimed at saving lives
- The legislature has also funded an independent evaluation of the OPC, which will look at impacts and compare metrics before and after opening. This is a unique opportunity and will provide valuable information on effectiveness and can be used to guide future spending

Questions?

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