

**Vermont Opioid Settlement Advisory Committee
Strategic Program Review
Ongoing Programs Funded Through the Opioid Abatement Special Fund**

Organization Information

Organization: **SUD Preferred Providers/VCJR**

Program: Outreach and Engagement Workers

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Title: Division Director, Health Department, Substance Use Programs

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SECTION I

1. Program Implementation

Has the program been implemented substantially as proposed when funding was approved?

☐ Yes **XXXX**

☐ Partially

☐ No

If "Partially" or "No," please describe the significant changes made and the reason(s) for those changes.

2. Program Accomplishments

Please describe the most significant outcomes, accomplishments, or milestones that best demonstrate the progress and impact of this program.

26 outreach positions are funded throughout the Preferred Provider Network to increase motivation of and engagement with individuals with substance use disorder in settings such as police barracks, shelters, social service organizations, and elsewhere in the community.

Accomplishments include:

- Organizations report an increase in collaboration and trust with community partners.
- Organizations report an increase in referrals from community partners.
- This grant allows organizations to have multiple contacts with individuals to engage them and build rapport over time.
- 624 individuals began treatment services because of the direct outreach in FY26.
- VDH convened the outreach staff network to create peer-to-peer learning opportunities. This is ongoing in FY27.

3.Evidence of Effectiveness

Please describe the information, data, evaluation findings, participant experiences, or other evidence that demonstrates the program is achieving meaningful benefit for the population served.

Existing reports or evaluations may be referenced rather than reproduced.

In addition to above:

Fiscal Year	Number of individuals outreached to	Contacts with community partners
FY24	1119	308
FY25	3144	1166
FY26*	3968	1133
*Partial data		
TOTAL	8,231	2,607

Section II

Long – Term Sustainability

4. Essential Services

Please identify the core services or program components that your organization believes are essential to continue beyond the life of the Opioid Abatement Special Fund.

Substance use disorder (SUD) outreach and engagement workers are important because they **meet people where they are, build trust, reduce barriers to treatment, and help individuals access the support they need to recover and improve their quality of life.** They play a vital role in connecting individuals affected by substance use with resources, services, and compassionate care. This looks like:

- **Building trust and relationships:** Many people experiencing substance use disorders face stigma, judgment, trauma, or distrust of service systems. Outreach workers build respectful, supportive relationships without judgment.
- **Meeting people where they are:** They connect with individuals in their communities, shelters, encampments, homes, and other settings where people may feel more comfortable receiving support.
- **Connecting people to treatment and resources:** They help individuals access treatment programs, counseling, recovery services, housing, transportation, health care, and other essential resources.
- **Reducing stigma and shame:** By treating people with dignity and compassion, outreach workers help individuals feel seen, heard, and valued rather than defined by their substance use.
- **Preventing overdoses and saving lives:** They can provide education about overdose risks, connect people to naloxone and harm-reduction services, and encourage safer practices that reduce the risk of death and other health complications.
- **Supporting individuals at their own pace:** Recovery looks different for everyone. Outreach workers recognize that change can take time and provide ongoing encouragement, even when someone is not ready to enter treatment.
- **Improving access to care:** They help navigate complicated systems and address barriers such as transportation, insurance, lack of identification, housing instability, and limited access to services.
- **Supporting families and communities:** By helping people access care and essential resources, outreach workers can strengthen families, improve community well-being, and reduce the harmful effects of untreated substance use disorders.

5. Sustainability Planning

Please describe your organization's approach to sustaining the essential services identified above. In your response, discuss anticipated future expenses and available resources apart from the Opioid Abatement Special Fund that may support the continuation of those services.

At this time, OASF is the identified source into the foreseeable future.

AHS is looking at a variety of ways to financially support this work. Research is underway to see if providers that are certified as CCBHCs (Designated Agencies) can include this in their portfolio. This would require CMS approval.

This has always been an allowable activity within the Substance Use Prevention, Treatment and Recovery, Services (SUPTRS) Block Grant for decades. This grant has been level funded for approximately 10 years. If there was an increase at the federal level we would look to continue to invest in this activity.

6. Future Program Viability

If Opioid Abatement Special Fund support were no longer available within the next three to five years:

- Which services would likely continue?
- Which services would likely be reduced or discontinued?
- Please explain why.

This would continue to be an allowable SUPTRS Block Grant activity but the statewide FTE capacity would reduce significantly.

7. Community Impact

Please describe the anticipated impact on the individuals, families, and communities served if the services supported through the Opioid Abatement Special Fund were no longer available.

Where applicable, discuss anticipated service gaps, barriers to care, or other community impacts.

As published by the Substance Abuse and Mental Health Services Administration (SAMHSA), Vermont's 2024 unmet need for substance use disorder treatment is as follows:

Measure	Estimate
People age 12+ classified as needing SUD treatment	21.42%
Of those needing treatment, not receiving it	79.26%
Of those needing treatment, receiving it	20.74%

The Outreach and Engagement staff are helping reduce the number of Vermonters needing and not receiving treatment.

For additional information:

[DSU Community Needs Assessment Report](#)

Section III

Looking Ahead

8. Future Considerations

Looking ahead over the next three to five years, what should the Opioid Settlement Advisory Committee understand about the future needs, opportunities, or challenges affecting this program as it develops recommendations to the General Assembly?

It is critical that these resources remain intact. We need to continue to reduce the number of individuals not connected to services.