

Wichita-Sedgwick - Opioid Settlement Consortium (WS-OSC): Strategic Plan for Utilization of Opioid Settlement Funds (2025-2039)

DRAFT REVISED 12/6/24

Vision

A Sedgwick County where everyone has equitable access to coordinated and comprehensive substance use services for a healthier community.

Mission

To unite a diverse and collaborative group of community partners in addressing substance use through treatment, prevention, intervention, and harm reduction with a focus on promoting overall health and well-being in Sedgwick County.

Guiding Principles

- 1. Spend money to save lives:** Prioritize opioid settlement funds for programs and services that directly reduce overdose deaths and strengthen the continuum of care, ensuring resources supplement—not replace—existing efforts.
- 2. Use evidence to guide spending:** Commit to funding strategies rooted in proven evidence while embracing innovative, community-driven solutions tailored to the unique needs of the City of Wichita and Sedgwick County.
- 3. Focus on equity:** Direct resources to address disparities in access to care and outcomes, ensuring that communities historically underserved receive the support needed to achieve health equity.
- 4. Invest in cost-effective interventions along the substance use continuum:** Target investments toward effective prevention, treatment, and recovery initiatives that deliver meaningful impact across the entire spectrum of substance use care.
- 5. Ensure a fair and transparent funding decision-making process:** Establish a transparent and inclusive process actively involving public health leaders, community members, and individuals with lived experience in guiding funding decisions.
- 6. Sustainability:** Design long-term strategies that integrate settlement investments into existing infrastructure, ensuring programs remain effective and impactful well into the future.

In pursuit of this Vision, and to carry out the Mission in accordance with the Guiding Principles, we will focus on the following Strategies:

Strategy 1: [Stigma Reduction, Community Outreach and Education](#)

Invest in programs that increase awareness and reduce stigma through community outreach and education. These programs should include a multifaceted, culturally sensitive, inclusive, and evidence-based approach.

Strategy 2: [Integrated Care](#)

Establish a sustainable integrated care that fosters collaboration across the healthcare continuum to address individuals' complex needs.

Strategy 3: [Overdose Prevention Initiatives](#)

Invest in culturally responsive prevention and harm reduction services to diminish substance use risk and overdose incidence, and increase community and youth

Strategy 4: [Expansion of Treatment Capacity](#)

Establish financially sustainable comprehensive treatment services, ensuring all levels of care are accessible and equitable in our community.

Strategy 1: Stigma Reduction, Community Outreach, and Education

Invest in programs that increase awareness and reduce stigma through community outreach and education. These programs should include a multifaceted, culturally sensitive, inclusive, and evidence-based approach.

Goals*	Potential Goal Metrics	Potential Activities*	NOTES
Community Stigma Reduction: Allocate funding for stigma reduction efforts and awareness campaigns aimed at reducing misconceptions about substance use disorders and promoting empathy and understanding for the community at large.	Increase in public understanding that substance use disorder is a disease.	Pre and post intervention focus groups to gauge community stigma.	
High Impact Stigma Reduction: Prioritize culturally sensitive, inclusive, and evidence-based initiatives that target high-impact demographic groups (e.g., educators, healthcare providers, law enforcement, and policymakers) to increase awareness, destigmatize substance use, and advocate for evidence-based	Number of "reaches" to prioritized demographic.	Educational activities for these demographic groups.	
	Number of participants in engagement efforts.	Pre and post surveys of participants.	
Community Outreach & Education: Develop comprehensive community outreach and education programs aimed at raising awareness about the risks of substance misuse and providing information on available resources for prevention, treatment, and recovery.	Number of "reaches" to prioritized demographic.	Provider (including justice system and law enforcement providers) and community education on MOUD to reduce stigma, especially around methadone.	Comprehensive includes: programs are accessible to all communities, including rural areas, and are culturally sensitive and linguistically appropriate. Possible guides for measurement include the use of person-centered language, incorporating solution messages, use of sympathetic language, and
	Number of participants in engagement efforts.		

**Goals and activities are prioritized based on impact, feasibility, chronology (order of business), as determined by the WS-OSC*

Strategy 2: Integrated Care

Goals*	Potential Goal Metrics	Potential Activities*	NOTES
Enhanced Access to Behavioral Health Services and Recovery Housing for Underserved Populations: Allocate funding to expand access to behavioral health services, including SUD treatment, mental health support, and recovery housing, mainly targeting underserved populations in Sedgwick County.	Number of funded beds in the community. Number of people served. Number of those that complete successfully. Number of new patients that qualify/enter care. Average wait times/number of people on waitlists for entry to services.	Wraparound services for unhoused populations, connections to care (i.e. State Opioid Response (SOR), employment opportunities). Embed peers/community health workers across continuum of care (i.e. emergency departments, justice system, treatment, recovery housing).	
Workforce Support: Increase and better support the provider workforce along the behavioral health continuum of care (clinicians, healthcare workers, first responders, etc.) through evidence-based recruitment and retention strategies, training, and educational opportunities that expand knowledge and reduce burnout.	Retention: Review of wages relative to market competitiveness; quarterly turnover rate; annual retention rate Training: Percentage of behavioral health providers trained; post-training assessment scores Recruitment: Number of additional providers recruited to workforce. Increase total # by 2 per sector annually Burnout: Percent decrease in burnout among providers using validated burnout measurement tool	Establish educational stipend program with local universities to increase Certified Addiction Technician (CAT) and Certified Addiction Specialist (CAS) certifications. Develop evidence based OUD training program for law enforcement and first responders. Provide retention bonuses to existing providers supporting high risk populations. Establish mid-level providers to fill the gap	Wages can only increase if there are increases in payment rates to providers. Increasing payment rates and allowable services is needed to increase wages (Policy Issue) Policy issue, need more roles beyond Licensed Addiction Counselor (LAC).
Partnerships: Develop transparent, collaborative partnerships between community organizations to improve communication and service delivery for those needing care.	Number of community partners that establish X number of agreements within other partners in the community.	Foster MOUs between organization to facilitate continuation of care. 42CFR part II considerations included. Including those with lived experience in the process.	
Sustainable Funding: Develop a pathway for sustainable funding for integrated care in our community.	Develop a legislative platform via Sedgwick County government relations	Utilize existing mental health and substance use coalitions--with support from governing bodies--to advocate policy and legislative initiatives. Develop avenues for advocacy for billing structures that support integration of services that have traditionally been in silos. Address reimbursement rates (policy issue). Advocate and develop processes for uptake of value based care among providers in community. Develop potential sales tax initiative.	

**Goals and activities are prioritized based on impact, feasibility, chronology (order of business), as determined by the WS-OSC*

Strategy 3: Overdose Prevention Initiatives

Goals*	Potential Goal Metrics	Potential Activities*	NOTES
Improve Youth Resilience Programs: Expand prevention programs focused on youth at higher risk for substance use to provide culturally responsive substance use education and resilience-building workshops, to increase knowledge about substance use risk and protective factors among youth in our community.	Number of youth participants who complete culturally responsive substance use education and resilience-building workshops.	Identify more youth who are at higher risk for baseline data and future goal-setting. Collaborate with Wichita Unified School District 259 and other schools/school districts	Define "Youth at higher risk". This may include foster care youth, justice-involved youth, and drug-endangered children.
	Percentage of participants showing increased knowledge about substance use risks and protective factors on post-program evaluations (target: 80%).	Collaborate with existing youth resilience programs currently in community and partner on program implementation.	
	Measurable changes in youth risky behaviors and self-reported substance use.		
Reduce Number of Overdose Incidents: Initiate a naloxone distribution program where participating first responders are equipped with overdose prevention kits for leave behind focus to prevent future overdose incidents.	Number and location of leave behind kits distributed.	Identify disparities and patterns in nonfatal and fatal overdoses.	Explore collaboration with DCCCA's Kansas Nalxone Program.
	Percentage reduction in opioid overdose incidents in Sedgwick County (target: 20%).		
Screening, Brief Intervention, and Referral to Treatment (SBIRT): Increase use of SBIRT in medical and community settings.	Number of SBIRT interventions delivered in both medical and community settings.	Identify a preferred screening tool to use and standardize.	
		Explore opportunities for funding SBIRT outside of Medicaid.	
Re-entry Supports: Support re-entry and recovery/treatment maintenance programming through the use of Community Health Workers, peer navigators, or other similar roles.	Reduced recidivism to jail	Identify models currently implemented (e.g., peer support at SACK and CrossRoads) to enhance with re-entry programming	
	Number of follow-up contacts and time-lengths	Meet with jail staff and outpatient treatment providers to clarify and create a consistent re-entry plan (including who is making sure people get to appointments, court advocate roles, etc.)	
	Number of people engaged in treatment who are discharged and return later		
	Number of people served		

*Goals and activities are prioritized based on impact, feasibility, chronology (order of business), as determined by the WS-OSC

Strategy 4 Expansion of Treatment Capacity

Establish financially sustainable comprehensive treatment services, ensuring all levels of care are accessible and equitable in our community.

Goals*	Potential Goal Metrics	Potential Activities*	NOTES
Medical Detox: Establish and maintain sufficient medical detox resources that are accessible to uninsured or underinsured individuals.	Number of unique individuals served through medical detox annually.	Establish a medical detox program within the new Crisis Center by 2026. Identify a sustainable funding stream for ongoing operations.	There is no medical detox within the City/County for those without insurance or are uninsured.
MAT/MOUD Resources: Establish and sustain easily accessible MAT/MOUD resources.	Number of individuals provided MAT services annually.	Provide technical support or advocate for less restrictive barriers to increase provider network for all MAT medications by 2025.	Establishing Detox first, then expanding MAT/MOUD: order of operations is important here
Diversion: Expand diversion in jails and judicial processes (including non-substance-related charges) into treatment and recovery services through potential sentencing grid expansion.	Percent decrease in total jail population and recidivism.	Advocate for a revised sentencing grid to expand opportunities for diversion when the charge is non-substance related. Advocate for DA hearings for individuals diverted to treatment in recovery programs as opposed to remaining in jail.	Senetencing grid expansion will require policy change
MAT/MOUD in Jails: Establish MAT/MOUD induction for people with OUD/SUD within county jails	Number of inmates incarcerated in jails who are able to access MAT/MOUD.	Work with and educate Sheriff Department on the role of MAT/MOUD induction in the jail.	
Postvention Services: Establish co-responder teams to provide postvention services for individuals who have experienced a non-fatal overdose and their family members or friends in the period immediately following the overdose event.	Percent of individuals who receive postvention services after an intervention.	Research evidenced based postvention programs and establish programing based off of these results and make changes as the program and evaluation of moves forward.	

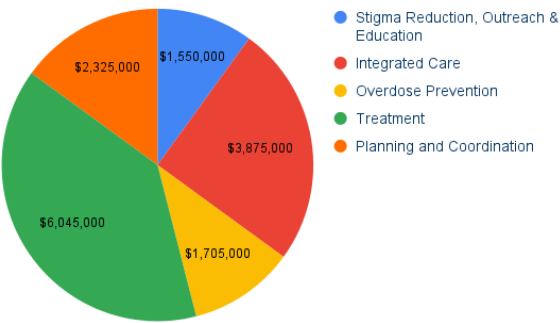
**Goals and activities are prioritized based on impact, feasibility, chronology (order of business), as determined by the WS-OSC*

Strategic Plan Spending Allocation Recommendations

Notes:

Allocation Estimates		
Strategy	Cost	Percentage
Strategy 1: Stigma Reduction, Community Outreach, and Education	\$1,550,000	10%
Strategy 2: Integrated Care	\$3,875,000	25%
Strategy 3: Overdose Prevention	\$1,705,000	11%
Strategy 4: Expansion of Treatment Capacity	\$6,045,000	39%
Planning and Coordination of Strategic Plan	\$2,325,000	15%
Total	\$15,500,000	100%

Allocation Estimates



Implementation Workplan			Suggested Timeline
Phase 1: Standing up process and infrastructure for implementation of Strategic Plan			
	P1 Task 1: Select Governance Structure from provided options		Q1 - Q2 2025
	P1 Task 2: Depending upon the governance structure selected, establish necessary City and County staffing and, if applicable,		
	Subtask: Identify City and County staffing responsibilities		
	Subtask: If applicable, identify advisory body stakeholders		
	Subtask: Establish roles and responsibilities for members and and determine group lead		
	Subtask: Set annual meeting schedule. Initiate meetings		
	P1 Task 3: Determine approach for evaluating strategic plan efforts		Q2 - Q3 2025
	Subtask: Review of evaluation options, including an external evaluator		
	Subtask: Develop scope of work for strategic plan evaluation		
	Subtask: If necessary, solicit for external evaluation		
Phase 2: Implementing Goals - Round One			
	P2 Task 1: Select which specific goals from each strategy to fund from the strategic plan in round one		Q2 2025
	P2 Task 2: Determine best mechanism for solicitation (RFP, RFA, grants, etc). Dependent on the governance structure selected, e		
	P2 Task 3: Develop scopes of work for selected goals based on strategy and goal statements provided. Establish suggested		
	P2 Task 4: Develop evaluation and selction process determining winning applicants		
	Subtask: Identify evaluators		Q3 2025
	Subtask: Identify baseline evaluation metrics for each goal to be included in scopes. Leverage "potential metrics"		
	P2 Task 5: Solicit finalized scopes of work, evaluate and select winners		Q4 2025 - Q4 2027
	P2 Task 6: Communicate the opportunity and provide technical assistance (TA) and education sessions to potential applicants		
	P2 Task 7: Develop contracts in collaboration with City and County procurement (see P3 Task 1)		Q4 2025 - Q4 2027
	P2 Task 8: Programming begins!		
Phase 3: Evaluating Goals - Round One			
	P3 Task 1: Evaluation kickoff		Q4 2025
	Subtask: Solidify evaluation metrics and duration of funding via the contracting process		Q4 2025 - Q4 2027
	P3 Task 2: Establish ongoing evaluation updates between evaluator and decision makers		
	P3 Task 3: Year end evaluation review with decision makers to determine what programming continues		Q4 2026 & Q4 2027
Phase 4: Implementing Goals - Round Two			
	P4 Task 1: Select which specific goals from each strategy to fund from the strategic plan in round two		Q1 2027
	Subtask: Determine newly available settlement funding amounts for City of Wichita and Sedgwick County collaborative		Q2 2027
	P4 Task 2: Determine best mechanism for solicitation (RFP, RFA etc)		
	P4 Task 3: Develop scopes of work for selected goals		Q3 2027
	P4 Task 4: Leverage evaluation process from Round one for selecting winners		
	Subtask: Identify baseline evaluation metrics for each goal to be included in scopes		
	P4 Task 5: Solicit finalized scopes of work, evaluate and select winners		
	P4 Task 6: Communicate the opportunity and provide technical assistance (TA) and education sessions to potential applicants		Q4 2027 - Q4 2029
	P4 Task 7: Develop contracts in collaboration with City, County procurement and, if applicable, the advsiory body		
	P4 Task 8: Round two programming begins!		
Phase 5: Evaluating Goals - Round Two			
	P5 Task 1: Round 2 Evaluation kickoff		Q4 2027
	Subtask: Solidify evaluation metrics and length of programming via the contracting process		Q4 2027 - Q4 2029
	P5 Task 2: Establish ongoing evaluation updates between evaluator and decision makers		
	P5 Task 3: Year end evaluation review with decsion makers to determine what programming continues		Q4 2028 & Q4 2029
Phase 6: Strategic Plan Audit			
	P6 Task 1: Conduct formal review of strategic plan process		Q1 - Q2 2030
	Subtask: Determine process for evaluation audit (internal or external)		
	Subtask: If necessary, solicit for external evaluator		
	P6 Task 2: Complete public report with key findings and recommendations for next steps		Q3 2030
	Subtask: Hold public forums to collect feedback on report. Refine findings leveraging community input		
	P6 Task 3: Review and discuss strategic plan audit findings with decision makers to determine next steps. <i>Option for entire</i>		Q4 2030

Strategic Plan Implementation: Governance Options

[Full description of governance options developed by the Steadman Group](#)

Governance Body	Example Structure	Example Operational Process
Extant City Council/County Commissioners	The City Council of Wichita and the Sedgwick County Commissioners would	Periodic (monthly to quarterly) meetings would be held during the regular
City/County Governance with an Advisory Council	A hybrid model where an Advisory Council (Committee or Board) consisting	The Advisory Council would meet regularly (monthly initially, evolving into
Public-Private Partnership Administration Model	Establish a public-private partnership (PPP) where local government	The administrator would be tasked with developing and implementing a
Independent Opioid Settlement Council	A new, independent Opioid Settlement Council would be created, modeled	The Council would comprise appointed members from various sectors,

Communications Recommendations for the City of Wichita-Sedgwick County Kansas Opioid Settlement Strategic Plan

Purpose: Ensure transparency, accountability, and sustained stakeholder engagement in the implementation of the City of Wichita-Sedgwick County Opioid Settlement Strategic Plan, under the authority of the Goals

Key Audiences & Roles	Outcomes/Actions	Communication Channels	Example Message Themes	Example Key Messages	Timeline
City Council and Sedgwick County	Regularly review and approve	En Banc meetings; regular	Transparency and	1. Leading a unified, community-driven, and evidence-	Monthly to quarterly updates
Community Stakeholders: E.g.,	Engage in feedback sessions and	Community listening sessions	Community impact: Focus on	1. Building a healthier, stronger Wichita and Sedgwick	1. Strategic Plan launch
Program and Services Providers:	1. Widespread and timely	Invited speakers to En Banc	Helping people recover,	1. Your role is critical in shaping and sustaining	Monthly City, County and En
Law Enforcement and First	Commit to program	Law enforcement websites,	Partners for prevention and	1. Law enforcement and first responders are on the	Align with City and County
Funding Partners: Organizations	Commit to supporting and	Regular meetings between	Engagement, action, and	1. Your role is critical in shaping and sustaining	Quarterly/biennial meetings
Media and Public Audiences: To	Strengthen media and public	1. Earned and paid media	Hope and progress: Convey a	1. Building a healthier, stronger Wichita and Sedgwick	Link to major announcements,

Data Monitoring & Evaluation Recommendations

Purpose: Monitor and evaluate the impact of the Wichita-Sedgwick County Opioid Settlement Strategic Plan, and the projects and programs funded under the Plan.

Goals

1. Ensure accountability and informed decision-making
2. Review, and adapt, or revise the Strategic Plan as necessary to maximize long-term goals
3. Provide a process for monitoring and reporting on Strategic Plan-funded projects and programs

Strategic Plan				
Task				Timing
Data Collection & Monitoring	Example Data Sources	Evaluation	Reporting & Accountability	
Goal Metrics: Review and establish final Strategic Plan overall metrics based on Goals Metrics	See Strategies [tabs]			Q1/Q2 2025
Dashboard: Develop Strategic Plan dashboard based on Goal Metrics	1. See Strategies [tabs] 2. Consider real-time monitoring: implement real-time tracking of key metrics (e.g., overdose rates (e.g., Overdose Detection Mapping Application Program (ODMAP), naloxone distribution, treatment admissions) to provide a transparent view for stakeholders and the public.	Review and analyze aggregated data on Strategic Plan Goal Metrics trends and flag issues.	1. Provide dashboard updates to the City Council and County Commissioners during "En Banc" meetings. 2. Provide a transparent website view of Dashboard for stakeholders and the public.	1. Establish Dashboard Q2-Q4 2025 2. Updates quarterly or monthly dependent En Banc meetings schedule 3. Real-time monitoring
Data collection: Conduct ongoing collection of dashboard data	1. Public Health Data: Overdose rates, emergency department visits, and treatment admissions. 2. Service Data: Reports from funded programs, including participant demographics and outcomes. 3. Community Feedback: Surveys, focus groups, and stakeholder interviews. 4. Financial Data: Budgets, expenditures, and return on investment (ROI) analysis. 5. GIS mapping for the geographic distribution of impacts	1. Compare year-over-year changes in key metrics. 2. Conduct qualitative analyses to understand community needs and program effectiveness. 3. Use predictive analytics to anticipate future challenges and allocate resources accordingly.	Benchmark and trend analysis reports	Annually
Strategic Plan Review: Conduct a formal review of the Strategic Plan progress	1. Strategic Plan Goal Metrics 2. City and Council meetings public input 3. Stakeholder surveys and focus groups	Annual evaluation/Periodic Audit 1. Use evaluation findings to adapt or revise the Strategic Plan as necessary 2. Engage an external evaluator periodically (e.g. 2-5 years) for an evaluation audit to ensure objectivity and rigor.	1. Prepare an annual public report with key findings and recommendations to City Council and County Commissioners. 2. Hold public forums to review the report 3. 2. Use feedback to refine strategic approaches and metrics	Annually or 3-5 year internals

Funded Projects & Programs				
Task				Timing
Data Collection & Monitoring	Example Data Sources	Evaluation	Reporting & Accountability	
Deliverables/Metrics: Establish project and program deliverables and performance metrics through, e.g. grants or contracting process	Funded project/program required reporting			Ongoing, dependent on funded project/program period
Dashboard: Integrate funded programs/projects deliverables and performance data into the Strategic Plan Dashboard.	Funded project/program required reporting	Review and analyze aggregated data from funded programs/projects to track trends and flag issues.		Ongoing, dependent on funded project/program period
Data collection: Conduct ongoing collection of project/program data	Funded project/program required reporting	Compare and analyze agreed-upon deliverables and performance data with results	Report project/program outputs to City Council and County Commissioners	Ongoing, dependent on funded project/program period
Project/Program Improvements		1. Use project/program performance evaluation findings to inform the next round of funded projects/programs. 2. Conduct deep-dive evaluation to identify best practices and challenges. 3. Assess cost-effectiveness and return on investment (ROI) for funded programs.	Report project/program evaluation findings to City Council and County Commissioners.	Ongoing, dependent on funded project/program period

Wichita - Sedwick Opioid Settlement Strategic Plan Partners & Stakeholders							
Organization/Individual	Sector	Primary Point of Contact	Website	Focus Areas/Subject Matter Expertise	Programs/Projects	Funding Capacity and Needs	Notes
<i>Title/Name</i>	<i>E.g., government, substance use service provider, mental health service provider, recovery housing, foundation</i>	<i>Name, title, email and/or phone</i>		<i>Brief description of opioid response-related focus areas or areas and areas of expertise</i>	<i>Organization's opioid settlement-related programs and projects, especially those that provide opportunities for collaboration and braided funding</i>	<i>Opioid response-related organizational financial information, e.g. operating budget, funded projects, grant or other funding opportunities and needs</i>	<i>Additional information that would be helpful for implementation of the Strategic Plan</i>
Kansas Health Foundation	Foundation	Ed O'Malley CEO	https://kansashealth.org/				Revisit Strategy once KS State determines priorities (Q1'25 to KFA Board before May): - Reallocate funding or adjust strategies where State funding can supplant/supplement - Coordinate collaborative proposals for specific KFA opportunities"
Wichita Public Schools	Education		https://www.usd259.org/				Youth substance use prevention, treatment, and recovery; behavioral health workforce development
Prime Fit Youth Foundation	Prevention	Kim Wilson, PhD, Co-Founder	www.PrimeFitYouthFoundation.org	Targeted, culturally congruent program that targets behavioral, mental, emotional, social, and academic health. Bolsters protective factors, mitigates risk factors.	Prime Fit has both a prevention and an intervention arm. For substance us, the primary focus is on prevention. Daily mentoring as well as weekly small groups and academic support provided during school and after school.	Many schools/children are on a wait list due to funding needs. With additional funding, Prime Fit could serve additional schools/children.	
Prevention Initiatives at Wichita State University's Community Engagement Institute	Prevention	Chad Childs, LCMFT, TTS, Prevention Initiatives Manager	https://communityengagementinstitute.org/	We are dedicated to supporting partners in using evidence-based and best practice prevention and promotion strategies; working together to build healthy communities. We serve the public, statewide.	Kansas Prevention Collaborative with KDADS, Cure Violence ICT (a project of the City of Wichita's with the Community Engagement Institute, Destination Innovation, and Institute of Development), CADCA Youth Upstream, Caring Across Cultures; Suicide Prevention Readiness Training, with KDADS, etc.	State and Local funding; needs partnership resources to promote behavioral health and substance use and suicide prevention	We are well-connected to State and local organizations and agencies with similar goals and we are always intentional to support strengthening grass-roots and local community based organizations. We recognize the power and importance of relationships and we influence those we can to be healthy and supportive of our neighbors.
Center for Change	Substance abuse treatment/MAT services	Chad Jacobs LAC, MAT Heidi Brown LAC Supervisor	www.centerforchangeks.com				
HOPE Services/Suspenders4Hope at Wichita State University	Prevention and Education	Marci Young, Psy.D., L.P. HOPE Director	www.suspenders4hope.com www.wichita.edu/HOPE	Focus areas include promoting mental wellness, and the prevention of suicide, sexual violence, and substance misuse/overdose.	Suspenders4Hope™, a program developed at Wichita State University, is a comprehensive, strategic approach to promoting mental health wellness, preventing suicide, substance misuse, and sexual violence. Showcasing real stories of hope, help-seeking and resiliency, Suspenders4Hope aims to increase connections and end the stigma surrounding mental health. HOPE Services utilizes a multidisciplinary approach to empower the Shocker community via wellness promotion through education, action and collaboration with on and off campus partners. HOPE Services focuses on the promotion of health and wellness as well as prevention of suicide, sexual violence, and substance misuse.	State funding, student fees, and grant funding. Several grants ending, and additional funds could be utilized to sustain and increase programming.	We provide free education and resources to the general public and collaborate with other organizations to increase reach and scope.
Overdose Response Strategy	Public Health and Public Safety	DJ Gering, MA; Public Health Analyst; dgering@midwest-hidta.gov	https://orsprogram.org/	Public health and public safety partnerships, data analysis, overdose prevention, and equity. We are statewide.	Post-overdose outreach, deflection / pre-arrest diversion, overdose fatality review boards, targeted naloxone distribution, suitability analysis to place naloxone vending machines, naloxone leave-behind programs, naloxone saturation estimates, public health and safety teams (PHAST), and handle with care.		We are a nationwide program and are well connected to the innovative programs happening around the country. We provide data visualization and technical assistance for free.
Hope and Wellness Resources	Behavioral Health	Christina Boyd, LCSW, LCAC; strengths4u@msn.com; 970-567-2722		Provide training and consultation on prevention and treatment	Expertise: SBIRT, Co-Occurring Disorders (MH and SUD), Behavioral Health Integration, Clinical Supervision, Ethics and Behavioral Health Practice, rural Behavioral Health, Interventions (Motivational Interviewing and CBT)	Expert Consultant for the Opioid Response Network which enables related trainings and consultation to be provided through this funding at no cost to the requester.	Based out of Dodge City, KS
Opioid Response Network	Opioid Response Technical Assistance	Sherrie Watkins, watkinssh@umkc.edu, 913-710-8894 (Regional Coordinator)	OpioidResponseNetwork.org	SAMHSA-funded Opioid Response technical assistance	general, targeted, intensive technical assistance for broad opioid response needs by anyone	training and TA at no cost	Regional Coordinator based at Univ of Missouri and serving region that includes Kansas

Steadman Group	Social Services Consulting	Rhiannon Streight Rhiannonstreight@steadmangroup.com Burke Fishburn burkefishburnburn@steadmangroup.com	steadmangroup.com	Behavioral health, opioid response, governance, strategic planning, facilitation, program planning, and management, organizational development	
Valley Hope	Treatment and Recovery	Amber Barnes: amberbarnes@valleyhope.org	valleyhope.org	Substance use treatment	Valley Hope has five drug and alcohol rehab facilities across the state providing addiction treatment including Kansas City, Wichita, and northwest Kansas. These evidence-based Kansas addiction treatment services include residential, medical detox, MAT - medication-assisted therapy, and flexible outpatient programs
Safe Streets	Overdose prevention and harm reduction	Aonya Barnett: aonya@safestreetswichita.org	https://www.safestreetswichita.org/	Harm reduction	
Healthcore Clinic	Healthcare	Dr. Daniel Warren: Daniel.Warren@ctcprograms.com	https://healthcoreclinic.org/	Integrated healthcare clinic with medical, dental, behavioral health, and pharmacy services all under one roof.	
Seth Dewey	Recovery	seth.dewey@renogov.org		Recovery; lived experience to substance use; ORN consultant and health educator	
DCCCA	Social services; behavioral health including treatment and prevention	Donna Gorman: dgorman@dcca.org	https://www.dcca.org/	Social and behavioral health services including residential treatment, outpatient treatment, peer support and prevention including the Kansas Prevention Collaborative	
Mirror Inc.	Treatment and prevention	Jason Greever: jgreever@mirrorinc.org	https://www.mirrorinc.org/	Substance use treatment and prevention	Residential, inpatient, outpatient, peer mentoring, youth treatment, support for dual diagnosis
Substance Abuse Center of Kansas (SACK)	Treatment, prevention and recovery	Chad Harmon: chad@sackkansas.org	https://sackkansas.org/	Substance use treatment and recovery services for uninsured people	SACK Crossover Recovery Center, detox, peer support, early intervention
HumanKind Ministries	Social services	Dawn Shepler: dawn@humankindwichita.org	https://www.humankindwichita.org/	Social services, housing, connections to care	Provide 360° wraparound supportive services anchored with case management in all facilities—from shelter to permanent supportive housing. Programming includes street outreach, shelters, supportive housing and wrap around services
United Way of the Plains	Social services, funding	Steve Burt: sburt@unitedwayplains.org	https://unitedwayplains.org/	Health, Education, Financial Security, basic needs	Provide grants to health and human service programs
Judge Jennifer Jones	Judicial services	Judge Jennifer Jones: JLJones@wichita.gov		Justice system and substance use intersection	
ComCare	Behavioral health care	Rena Cole: Rena.Cole@sedgwick.gov	https://www.sedgwickcounty.org/comcare/	Certified Community Behavioral Health Clinic (CCBHC) and Licensed Community Mental Health Center (CMHC)	offers a comprehensive range of mental health and substance abuse services to support individuals across all age groups
	Public health program implementation, evaluation, quality improvement		https://kumc.info/d945k335.html	Public health program implementation, evaluation, quality improvement	
KU Medical Center/Dulcinia Rakestraw		Dulcinia Rakestraw: drakestraw@kumc.edu			