**OPIOID ABATEMENT ADVISORY COMMISSION OFFICIAL PUBLIC MEETING**

**MINUTES (DRAFT)**

**July 30, 2025**

The Opioid Abatement Advisory Commission was held at District of Columbia Hospital

Association, 1152 15th Street, NW, Suite 900, Washington, DC 20005 on Wednesday, July 30, 2025. Members of the public were also invited to attend in-person and virtually via WebEx.

Recording of the meeting can be found at the following link:

<https://dcnet.webex.com/dcnet/j.php?MTID=m8ea4da4bf4017a9e7b0d4a67891ab5cd>

**ATTENDEES**

Present

1. Clover Barnes, MD as designee for Ayanna Bennett, Ph.D., Director, DC Health
2. Barbara Bazron, Ph.D., Director, Department of Behavioral Health
3. Christina Okereke, Representative of the Attorney General of the District of Columbia
4. The Honorable Christina Henderson (Marcia Huff as the Designee), Chair, DC Council Committee on Health
5. Jacqueline Bowens, Chief Executive Officer, District of Columbia Hospital Association
6. Michael Pickering, District of Columbia Behavioral Health Association
7. LaVerne Adams, DMin, Chief Executive Coach, Total Life Consultancy LLC (virtual)
8. Demetrius Jones, Certified Peer Recovery Specialist, Wards 7 & 8 DC Prevention Center/DC Recovery Community Alliance
9. Larry Gourdine, Program Manager, Psychiatric Institute of Washington
10. J. Chad Jackson, MS, CEO, Ardan Community Living, LLC
11. Beverlyn Settles-Reaves, PhD, Program Manager, Howard University
12. Juanita Price, M.Ed, Chief Executive Officer, Hillcrest Children and Family Center
13. Senora Simpson, PTMPH, DrPH
14. Melisa Byrd, Senior Deputy Director, DC Department of Health Care Finance
15. Patricia Quinn, Designated Representative, District of Columbia Primary Care Association (virtual)
16. Nnemdi Elias, MD, MPH, Addiction/Internal Medicine

Absent

1. Alexis Squire, Designee, Deputy Mayor for Public Safety and Justice
2. Larry Bing, Certified Peer Recovery Specialist, Leadership Council for Healthy Communities
3. Franciso Diaz, MD, FACP, DC Chief Medical Examiner
4. Ciana Creighton, Deputy Mayor for Health and Human Services

**Welcome and introductions**

* Commissioners did introductions in person and virtually.

**Call to Order**

* Chair J. Chad Jackson called the meeting to order at 9:15 AM.

**Quorum Declaration**

* Chair Jackson conducted a roll call for quorum declaration.

**Approval of Minutes**

• Chair Jackson presented the minutes for the April 10 and April 30, 2025, Commission meetings.  
• The minutes from the previous meetings were reviewed and approved unanimously with no objections.

**DC Council Proposed Changes**

* **Presented by Councilmember Christina Henderson**
* **Key takeaways:**
* Councilmember Henderson joined virtually due to personal obligations and a scheduled Council hearing.
* Budget allocations from the Opioid Abatement Fund were finalized and shared via email in June.
* The allocations were consistent with previous years and included targeted outreach grants in Wards 1, 5, 7, and 8.
* Continued funding was provided for the illicit drug surveillance program at the Department of Forensic Sciences and Office of the Chief Medical Examiner.
* The total number of Commission members was reduced from 21 to 15 by eliminating vacant seats.
* The Mayor and DC Council will each appoint three members to the Commission.
* Multiple agencies were moved to advisory roles, including the Deputy Mayors for Health and Public Safety, the Department of Human Services, and the Office of the Chief Medical Examiner.
* The Budget Support Act established qualifications for the Commission Chair or Co-Chairs.
* The Act also set two-year term limits for Commission leadership positions.
* **Discussion:**
  + Chair Jackson referenced funding for reopening the Mental Health Urgent Care Clinic in the courthouse.
  + Dr. Bazron explained the clinic was cut due to budget constraints, with DBH prioritizing youth assessment services per court input.
  + Councilmember Henderson stated it is not the intention of the Committee on Health to permanently continue funding the clinic through the Opioid Abatement Fund.
  + She clarified the clinic was originally funded with recurring dollars, but those were converted to one-time funds by the Council Chair.
  + Councilmember Henderson emphasized that recurring funding is preferred, and the current approach is not meant to be ongoing.
  + Chair Jackson acknowledged the clarification and stressed the need for long-term funding consistency.

**Executive Order**

* **Presented by** **Dr. Barbara Bazron**
* **Key takeaways:**
* Presidential Executive Order signed by President Donald J. Trump on July 24, 2025, promotes civil commitment of homeless individuals with substance use or mental illness.
* Limits federal support for harm reduction programs such as safe consumption sites and syringe exchange.
* Seeks to end “Housing First” policies unless individuals are in treatment.
* Requires federal grantees to collect health-related data and prohibits services that permit drug activity.
* Consolidation of federal grants into a single block grant will reduce flexibility and likely funding.
* SAMHSA’s staff and budget were cut by 50%, impacting future grant support.
* **Discussion:**
  + Co-chair Jacqueline Bowens raised concerns about legal and due process implications for involuntary commitments.
  + She warned of the executive order’s potential to impact philanthropic funding and the Commission’s harm-reduction priorities.
  + Dr. Bazron confirmed syringe exchange programs will not be allowed under the new order; Narcan may still be permitted.
  + Demetrius Jones questioned how the changes affect the Good Samaritan Law; Dr. Bazron said no implementation guidance has been issued yet.
  + Dr. Senora Simpson suggested redefining committee roles and called for thoughtful definitions of terms like “harm reduction.”
  + She emphasized evaluating what past policies worked, rather than rejecting all elements of the order.
  + Patricia Quinn made a comment online that another executive order redefining public benefits, which could limit access to health centers.
  + Co-chair Jacqueline Bowens proposed engaging legal partners to host a webinar on executive order implications.
  + Chair Jackson confirmed the issue will be escalated to the Steering Committee to form recommendations and possibly a working group.
  + He noted that although the Commission manages settlement funds, it must remain proactive in monitoring federal threats to harm reduction.
  + Dr. Beverlyn Settles-Reaves added that any response should center around maintaining quality of care.

**Needs Assessments**

* **Presented by Dr. Orlando Barker**
* **Key takeaways:**
* Additional needs assessments were conducted internally and under the SOAR program, including one in July 2024.
* Dr. Barker recommended compiling all needs assessments and sending them to subcommittees for review.
* Subcommittees will use the data to update or revise recommendations and actions.
* Follow-up meetings will be scheduled to address new priorities based on the current data.
* **Discussion:**
* Senora Simpson asked if this ties into the 13 Pew recommendations; Dr. Barker confirmed many of the recommendations were already being included orin process to be addressed in District policy, especially via Live.Long.DC initiatives.
* Dr. Simpson noted some Pew recommendations may conflict with the new executive order.
* Chair Jackson emphasized that substance use disorder is a moving target and past assessments must be evaluated against current conditions.
* He stressed aligning spending decisions with both real-time needs and updated legislative changes.

**Reports from the Office of Opioid Abatement**

1. **Financial Report**
   * + As of April 2025, $28.1M has been received in opioid settlement funds from OAG.
     + $15M has been certified by OCFO; $14.4M of that is obligated, leaving under $1.2M unallocated.
     + Unspent certified funds roll over and become available by January of the following fiscal year.
     + Funds for FY26 are preloaded into a dedicated account to allow for faster access and execution.
     + Purdue settlement funding ($21M) is expected in early FY26.

* **Discussion:**
* Dr. Bazron clarified that preloading funds avoids delays from programming and ensures immediate access.
* Co-chair Jacqueline Bowens reiterated that 85–90% of certified funds have been obligated and noted the importance of tracking the difference between certified and obligated amounts.
* Co-chair Jacqueline Bowens also requested a future slide to include funds "in the pipeline" and all outstanding obligations to improve transparency.
* Chair Jackson emphasized that the commission is entering Phase 2—supporting existing programs and considering large infrastructure projects.
* Christina Okereke noted that Purdue settlement funds are still pending, expected early next year.

1. **Grantee Progress Reports**

Note: Due to time constraints, this presentation was abbreviated during the meeting. The full report is available on our website.

* Data covered performance baselines from October to May 2025 for current grantees.
* Two faith-based organizations—St. Matthew’s Memorial Baptist Church and CenterPoint Baptist Church—conducted 47 trainings reaching over 650 participants.
* Trainings addressed opioid education, Narcan use, harm reduction, and parent communication.
* A “train-the-trainer” approach was implemented to support sustainability beyond the funding period.
* Focus expanded beyond opioids to include other substances impacting the community.

1. **Schedule of FY26 Grantmaking**

Note: Due to time constraints, this portion of the presentation was not presented during the meeting. The full report is available on our website.

**Grantee Presentations**

1. **Red Sprinkle (Sober + Chic)**

* Empowers young women ages 18-24 impacted by opioid use through creative industry job training.
* Provides workforce development in resume building, digital content creation, and entrepreneurship.
* Hosts glam pop-up events offering Narcan, HIV testing, health screenings, and beauty services.
* Collaborates with peer recovery specialists to reduce stigma and expand service access.
* Emphasizes harm reduction and wellness using a trauma-informed approach.

**B. Federal City Recovery Services**

* Operates the Helping Young People Perform, Excel, and Recover (HYPPER) program, a residential SUD treatment initiative for DC youth (ages 12–25).
* Delivers therapy, counseling, academic support, and recreational activities.
* Utilizes a multidisciplinary team including medical and mental health professionals.
* Partners with Children’s National Hospital to support youth recovery holistically.
* Provides 24/7 structured, therapeutic supervision.
* **Q & A:**
* Dr. Bazron inquired about the grantee’s location, ward, operational status, and Medicaid billing.
* JaVon Oliver (FCRS) responded that the program is located in Southeast, DC near the Maryland border (Ward 8). Services are anticipated to begin in mid-August, starting

with a capacity of 24 youth in a residential program.

* FCRS plans to bill Medicaid and is finalizing youth per diem rates and contracts with managed care organizations. The current grant supports startup costs, including salaries.

**C. The Nehemiah Project**

* Supports individuals with lived experience through recovery housing and job training.
* Conducts peer support, recovery coaching, and job readiness workshops.
* Applies a trauma-informed care model to address root causes of substance use.
* Offers stable housing for individuals reentering society post-incarceration or treatment.
* Strengthens partnerships to deliver wraparound services.
* **Q&A:**
* Dr. Bazron asked about the grantee’s sustainability plan post-funding.
* Xavier Justice (TNP) stated they are seeking foundation and community-based funding and are working to implement Medicaid billing as a revenue stream.
* Dr. Bazron emphasized the urgency of sustainability planning given the upcoming fiscal year.
* Demetrius Jones asked about obstacles to securing Medicaid. Justice noted that internal leadership changes initially delayed infrastructure efforts, but TNP is now focused on expanding services and Medicaid compliance.
* Jacqueline Bowens raised concerns about the impact of changing federal Medicaid eligibility.
* Ralph Williams (TNP) clarified that TNP is in the process of becoming a Medicaid provider and is submitting required documents. TNP is not requesting additional funding from the Office and is actively pursuing alternative funding to continue operations beyond the grant period.

**D. CompuRecycling (Level Up Against Opioid Epidemic)**

* Focuses on increasing awareness and prevention of opioid misuse through digital media, peer education, and creative outlets.
* Implements a curriculum that trains youth ambassadors to lead workshops and awareness campaigns.
* Promotes safe, stigma-free conversations among youth regarding mental health and substance use.
* Uses hands-on projects such as podcasting, video PSAs, and visual art to build youth engagement.
* Includes youth-led and youth-created educational games as part of its outreach and prevention strategy.
* Operates under the “Level Up Against the Opioid Epidemic” initiative targeting Ward 7 and 8 youth.
* **Q&A:** 
  + Senora Simpson asked whether the grantee has a podcast, TikTok, or an app.
  + Genita Finley (CompuRecycling) responded that while there is no TikTok, a podcast is in development. The organization is exploring app development and is seeking an app developer who can work collaboratively with youth.

**Public Comment**

* Judy Ashburn provided public comment.
* Mark Johnson provided public comment via Webex.
* Gordon Simmons provided public comment via Webex**.**

**Adjournment**

* Chair Jackson adjourned the meeting at 11:16 A.M.