



WASHOE COUNTY

Integrity Communication Service

www.washoecounty.gov

STAFF REPORT

BOARD MEETING DATE: December 9, 2025

DATE: December 9, 2025

TO: Board of County Commissioners

FROM: Lauren Beal, Grants and Community Program Analyst
lbeal@washoecounty.gov

THROUGH: Kate Thomas, Interim County Manager

SUBJECT: Recommendation to approve Washoe County Opioid Use Needs Assessment 2026–2029 (Needs Assessment) and the Washoe Opioid Abatement and Recovery Fund (WOARF) Plan (Funding Plan) for 2026–2027. The Needs Assessment outlines the current strengths, gaps, and needs in the community related to opioid use. The WOARF Plan provides the priority strategies based on the Needs Assessments, funding mechanisms, anticipated outcomes, and potential community impacts of funding these initiatives. This item does not constitute funding or budget approval for any of the components of the plan; any such funding, expenditures, or budget authority necessary to implement individual components of the plan will be brought before the Board for approval as necessary. (All Commission Districts.) **FOR POSSIBLE ACTION**

SUMMARY

The Washoe County Opioid Use Needs Assessment (Needs Assessment) identifies the strengths, needs, and gaps in addressing opioid use disorder (OUD), prevention, treatment, recovery, and risk reduction services in Washoe County. NRS 433.742 requires the County to conduct a Needs Assessment every four years using community-based participatory research (CBPR) as a methodology. The Washoe Opioid Abatement and Recovery Fund (WOARF) Plan (Funding Plan) indicates the priority funding strategies based on community guidance and feedback. All proposed actions are outlined in the attached documents.

Key findings of the Needs Assessment:

Treatment Access & Navigation

Washoe County faces barriers to opioid use disorder (OUD) treatment at every point in the care continuum. The immediacy of access is critical, yet delays in assessments, stabilization, or treatment often cause people to miss their short window of readiness for change. Long waitlists, insurance denials, and lack of real-time navigation discourage individuals and reinforce hopelessness.

Many residents are unaware of available services, who qualifies, or how to access these critical services. This is compounded among people who are houseless. Survey respondents were concerned about people's ability to access services but felt that services

AGENDA ITEM # _____

were accessible, suggesting greater concern about coordinating and navigating people to appropriate services than expanding services. Community outreach workers have been successful in connecting disconnected populations to care, but funding for these positions ended in October 2025. Once individuals enter treatment, they often lack ongoing navigation or coordination support across systems, leading to relapse and disengagement from care.

Housing & Recovery Stability

Lack of stable housing undermines all treatment efforts. Washoe County has insufficient housing, particularly for low-and middle-income households. Interview participants emphasized that recovery cannot begin or be sustained without a safe and stable place to live. Housing was identified as the number one funding priority. Without it, individuals face instability, stress, and relapse even after treatment. Recovery-friendly and low-barrier housing options are limited, leaving many to return to unsafe environments that jeopardize progress.

Behavioral Health Workforce

Washoe County's ability to provide sustainable quality substance use treatment is undermined by challenges with recruiting and retaining quality professionals. The behavioral health workforce is strained by low pay, burnout, and limited professional development. Staff frequently experience secondary trauma and receive few supports for their own mental health. Providers reported gaps in training—particularly around trauma-responsive care and approaches for “treatment-resistant” individuals. Peers with lived experience are underpaid, undertrained, and often trapped in entry-level roles without clear career advancement pathways.

Minimizing Morbidity and Mortality

Washoe County continues to experience overdose rates higher than state and national averages, between March 2024 and February 2025 179 people died of an overdose death.¹ Despite strong community support for minimizing morbidity and mortality associated with opioid use and clear evidence of its effectiveness, recent funding changes have created service gaps in harm reduction services. Stigma and discrimination from healthcare providers and community members further deter people who use opioids from seeking help or treatment. As one mother shared, “they can’t seek recovery if they’re dead.”

Family & Youth Supports

Substance misuse in Washoe County is intergenerational, often rooted in family trauma and instability. Participants stressed the need for whole-family treatment approaches, noting that addressing parents without engaging children perpetuates the cycle. Youth in the County have higher-than-average substance misuse rates and limited access to pro-social activities and mental health supports. Prevention education in schools is

¹ Centers for Disease Control and Prevention. (2025, September 5). *Mapping injury, overdose, and violence dashboard*. U.S. Department of Health and Human Services. <https://www.cdc.gov/injury-violence-data/data-vis/index.html>

inconsistent and outdated, relying on abstinence-only models that youth perceive as irrelevant or untrustworthy.

Systems Coordination

Systemic barriers—such as fragmented services, low reimbursement rates, loss of Medicaid coverage, and competition among providers—create disjointed care. Participants identified a lack of collaboration and shared data across agencies, which prevents coordinated case management and hinders service quality. Furthermore, the absence of program evaluation data makes it difficult to identify effective programs or guide referrals, perpetuating inefficiencies and missed opportunities.

Intercepting Justice Involvement

Community members with OUD are often routed through the criminal justice system rather than treatment. Each month, an estimated 130 people with OUD will have their treatment in the community interrupted (by being arrested?). Among individuals who receive services in the jail, lack of a coordinated reentry process will disrupt any progress gained. Delays in treatment, lack of coordination with community providers, and inadequate reentry supports lead to relapse and repeated justice involvement.

WOARF Funding Plan:

To develop the initial list of potential strategies WOARF staff used the information in this report, the approved Use of Funds for opioid remediation and abatement according to the litigation settlements and Nevada Revised Statute. The strategies were then presented to the Steering Committee for further refinement and to ensure no critical strategies were missing.

The lists of potential strategies were related by three separate bodies to identify the strategies to prioritize in the next two years. The Steering Committee used a Likert model to rate the strategies on four qualities: Impact, feasibility, urgency and equity. The LEAB voted for their top 5 strategies based on whether we could do it and whether we should do it. Last, a Community Meeting was held where community members discussed the pros and cons of each strategy and then voted for their top two strategies. The ten highest-ranked strategies from each advisory group were reviewed and compared. Feedback from participants was incorporated to further refine the outreach and housing strategies, ensuring alignment with multiple top-ranked approaches. The top prioritize strategies are below:

Prioritized Funding Strategies:

- Conduct targeted outreach to disconnected communities to connect people to existing resources, coordinate care, and provide navigation support throughout the continuum of care
- Expand housing services to support people with OUD across the continuum of use that include comprehensive wrap-around and tenancy supports
- Evaluate the effectiveness and outcomes of existing programs and services for people who use substances

- Provide mobile health care clinics that include comprehensive health and dental care for people who use or are at risk of using opioids
- Create peer-led mental health supports to prevent burnout among peer workers, providers, and professionals working in the field
- Use a multidisciplinary approach to providing overdose prevention, outreach, and education, inclusive of under resourced communities.
- Implement child welfare best practices for supporting families impacted by substance use.

Washoe County Strategic Objective supported by this item
Vulnerable Populations

PREVIOUS ACTION

September 16, 2025 - the Board approved the de-obligation of previously approved allocations of Washoe Opioid Abatement and Recovery Funds (WOARF) non-bankruptcy funds through the One Nevada Agreement in the amount of [\$442,716] for the Northern Nevada Harm Reduction Alliance Building Communities of Support project that no longer needs the previously approved levels of funding and to approve allocation of Washoe Opioid Abatement and Recovery Fund (WOARF) non-bankruptcy funds through the One Nevada Agreement, in the total amount of [\$442,716].

August 19, 2025 - the Board approved the Settlement State of Nevada and Alvogen, Amneal, Apotex, Hikma, Indivior, Mylan, Sun, and Zydus in the opioid litigation in the amounts of \$8,787.01 (Alvogen); \$58,817.81 (Amneal); \$29,955.70 (Apotex); \$49,847.74 (Hikma); \$34,358.42 (Indivior); \$139,024.95 (Mylan); \$14,578.44 (Sun); and \$6,989.66 (Zydus).

August 19, 2025 - The Board approved the proposed settlement in the bankruptcy proceeding of Purdue Pharma/Sacklers individuals and execute the "Subdivision Participation and Release Form" pursuant to the One Nevada Agreement on Allocation of Opioid Recoveries ("One Nevada Agreement") previously agreed upon for participation in settlements (entered into on July 27, 2021). Under the proposed settlement between Purdue Pharma/Sacklers and the State of Nevada, the State of Nevada is estimated to receive the gross amount of \$57,941,815.03. Pursuant to the One Nevada Agreement, Washoe County will receive an estimated net allocation of \$2,223,475.54.

September 10, 2024 - The Board approved allocation of Washoe Opioid Abatement and Recovery Fund (WOARF) non-bankruptcy funds through the One Nevada Agreement, in the total amount of [\$4,009,786], to government entities or nonprofit organizations created for charitable, religious, or educational purposes; approve associated resolutions and authorize the County Manager to sign necessary award documents, for six projects.

August 20, 2024 – The Washoe Opioid Abatement and Recovery Fund has received \$6,933,405.05 in distributions from the Opioid Litigation Settlements in accordance with the One Nevada Agreement since August 23, 2022.

January 23, 2024, - the Board approved the creation of one new full-time Grants and Community Program Analyst position, pay grade 16 (Office of the County Manager),

upon evaluation and approval by the Job Evaluation Committee (JEC); and authorize Human Resources to make the necessary changes; 100% funded by Opioid Settlement funds [Estimated annual costs \$125,687; Fiscal Year 2024 impact \$62,844].

For all Board of County Commissioner actions related to the Washoe Opioid Abatement and Recovery Fund visit the Washoe County [WOARF Website](#).

BACKGROUND

Washoe County collaborated with the State of Nevada and other jurisdictions across the State to litigate against pharmaceutical companies and other distributors of opioids that participated in the opioid epidemic. Through this partnership, under the [One Nevada Agreement](#), Washoe County will receive approximately \$31 million over the next 17 years to address the opioid epidemic through evidence-based, strategic initiatives in alignment with community needs and NRS 433. The funds are to be recognized as funds received from pharmaceutical organizations that have filed bankruptcy and those that have not filed bankruptcy and will be disbursed through the Washoe Opioid Abatement and Recover Fund (WOARF) managed by the Office of the County Manager, Community Reinvestment Division.

In 2022, Washoe County completed a Needs Assessment to provide guidance to the County on the opioid abatement and recovery priorities for 2023-2025. The Needs Assessment identified [five priority goals](#). In 2025, the WOARF team conducted the 2026-2029 Needs Assessment and developed the Washoe Opioid Abatement and Recovery Fund (WOARF) Plan (Funding Plan) 2026-2027. The plan identifies the top strategies that correspond with NRS 433.742 and the opioid settlement's use of funds strategies, which dictate the dollars must be used for OUD and the impacts of opioid misuse, and address the findings of the Needs Assessment. The Needs Assessment and Funding Plan ensure that settlement funds are directed toward the most urgent and impactful priorities

Washoe Opioid Abatement and Recovery Fund

The Washoe Opioid Abatement and Recovery Fund (WOARF) is a Special Revenue Fund established to separately track and record all revenue and expenditures associated with opioid settlement payments. WOARF offers funding to eligible County departments and agencies, nonprofits, and businesses that provide services in Washoe County that are aligned with the Funding Plan and in accordance with Opioid Litigation Settlement Documents Use of Funds and NRS 433.742. The County will request proposals for projects or programs to help the community recover from and abate the opioid epidemic, aligned with the priorities of the County Needs Assessment, and further the County's strategic goals.

FISCAL IMPACT

There is no fiscal impact to adopting the Washoe Opioid Use Needs Assessment 2026-2029 (Needs Assessment) or the Washoe Opioid Abatement and Recovery Fund (WOARF) Plan (Funding Plan). In accordance with Washoe County policy, WOARF grants will be brought to the Board of County Commissioners for approval.

RECOMMENDATION

Recommendation to approve Washoe County Opioid Use Needs Assessment 2026–2029 (Needs Assessment) and the Washoe Opioid Abatement and Recovery Fund (WOARF) Plan (Funding Plan) for 2026–2027. The Needs Assessment outlines the current strengths, gaps, and needs in the community related to opioid use. The WOARF Plan provides priority strategies based on the Needs Assessments, funding mechanisms, anticipated outcomes, and potential community impacts of funding these initiatives. This item does not constitute funding or budget approval for any of the components of the plan; any such funding, expenditures, or budget authority necessary to implement individual components of the plan will be brought before the Board for approval as necessary. Manager’s Office. (All Commission Districts.)

POSSIBLE MOTION

If approved, a possible motion might be:

“Motion to approve Washoe County Opioid Use Needs Assessment 2026–2029 (Needs Assessment) and the Washoe Opioid Abatement and Recovery Fund (WOARF) Plan (Funding Plan) for 2026–2027. The Needs Assessment outlines the current strengths, gaps, and needs in the community related to opioid use. The WOARF Plan provides priority strategies based on the Needs Assessments, funding mechanisms, anticipated outcomes, and potential community impacts of funding these initiatives. This item does not constitute funding or budget approval for any of the components of the plan itself; any such funding, expenditures, or budget authority necessary to implement individual components of the plan will be brought before the Board for approval as necessary. Manager’s Office. (All Commission Districts.)”