



## QUESTIONS & ANSWERS

### Spring Roundtable 04-29-2026

During the Opioid Abatement Fund Council (OAFC) Spring Roundtable on April 29, 2026, program staff provided updates on the OAFC's work and included resources on how to engage with the program. Additionally, participants heard a presentation from Rise Recovery on its work funded by the 2025 Short-term Community-based Opioid Recovery Effort (CORE) grant.

Below are the questions asked during the roundtable accompanied by the most accurate answers. Please note that there are two sections of this document: (1) Questions regarding OAFC updates answered by OAFC program staff, and (2) Questions regarding Rise Recovery's presentation answered by Rise Recovery.

#### **Questions for OAFC:**

- 1. Is it possible to get a breakdown of spending areas reported for each political subdivision and hospital district?**
  - a. Yes, please email [oafc.subdivision@cpa.texas.gov](mailto:oafc.subdivision@cpa.texas.gov) with your specific request. OAFC may ask you to file an open records request.
  
- 2. As a political subdivision, we are looking to spend our funds on a specific program. How do we know if it would be an allowable use of the funds?**
  - a. The best resource for allowable uses of the opioid settlement funds is the OAFC revised version of "Exhibit E." This document is an exhibit to the nationwide settlement agreements that provide the funds the political subdivision has received. These settlement agreements require the settlement funds to be used for opioid remediation (i.e., programs that specifically address opioid-related harms), such as the evidence-based or evidence-informed opioid strategies listed in this document. As long as the settlement funds are used to address opioid-related harms, such uses generally are permitted by the settlement agreements.

It will be up to your city/county's legal counsel to decide if a specific program would be a justifiable opioid abatement strategy.

**3. Will the Spring 2026 grant for the criminal justice system be awarded to one organization to implement statewide or to various organizations in different areas?**

- a. The O AFC has not yet finalized the Notice of Funding Opportunity (NOFA). The number of awards will depend on the applications received. The Council's 2026 Grant Issuance Plan allocates \$25 million for this opportunity and specifies that "There are no regional allocations nor statewide expectations and applicants are encouraged to propose projects with any geographical scope that would best address needs of the criminal-justice-involved population across the state. The requested award amount must be at least \$250,000 and may not exceed \$2,500,000. Applications that meet requirements will be awarded on a competitive basis as available funding allows". All applications will go through internal administrative and peer review processes, and final award decisions will be made by the Council.

**4. What is the best way to refer people to UT Health Houston's Recovery Housing program?**

- a. O AFC has not yet finalized UT Health Houston's grant agreement. Once the agreement is executed, UT Health Houston will begin implementing their program, and O AFC expects they will then make referral resources and instructions available.

**5. What is the estimated date to hear back for the 2025 Long-term CORE grant award selections?**

- a. O AFC anticipates that the Council will vote on awards within the next two months. Applicants selected for funding will be notified shortly after the Council's decision; applicants who are not selected will be notified after the grant agreement execution process is completed at a later date.

[Rise Recovery](#), who was awarded a 2025 Short-term CORE grant, presented at the 2026 O AFC Spring Roundtable and answered questions from participants. The answers to participant questions below were provided by Rise Recovery.

### **Questions on Rise Recovery's Work:**

- 1. In terms of staffing shortages and retention issues, are there specific position types or services that Rise Recovery has struggled with filling or retaining?**
  - a. Rise Recovery's primary staffing challenges have been with RSPS (Recovery Support Peer Specialist) and LCDC (Licensed Chemical Dependency Counselor) positions. These roles have been particularly difficult to retain. As a nonprofit, salary limitations play a significant role, and the field is highly competitive. This is especially challenging because we rely heavily on grants, which often include salary stipulations that limit our flexibility.
  
- 2. Can you give examples of the social activities Rise Recovery does with clients?**
  - a. Rise Recovery offers a wide variety of social activities, both off-site and on-site. Off-site activities include trips such as bowling and visits to the zoo. On-site activities include events like sober prom, movie nights, crafting activities, and other activities which sometimes reflect the local San Antonio community. We place strong emphasis on incorporating fun into recovery, as many individuals struggle with understanding how to enjoy themselves without substances. Our goal is to show that fun is absolutely possible in recovery and to demonstrate what that can look like. Rise Recovery typically hosts social activities every Friday.
  
- 3. Is Rise Recovery a Clinical Training Institution (CTI) site?**
  - a. Yes, Rise Recovery is a CTI site. They accept LCDC interns and also operate a training institute that welcomes practicum students and interns at all levels, including bachelor's and master's, as well as volunteers. There are a variety of opportunities for involvement.
  
- 4. Describe Rise Recovery's sustainability plan and the implementation process to remove barriers for participants.**
  - a. Rise Recovery's sustainability plan is multi-faceted. They do not charge fees for any of their services, so insurance is not a barrier. They provide telehealth services as well as transportation whenever possible for in-person services by using their limited number of company vehicles for staff to pick up participants. They also offer many services directly in the community. For example, the community ISD program provides services within school campuses. Students in

partner schools can receive services during the school day at their school location, without needing to travel to Rise Recovery. Lastly, there is no specific length of stay in Rise Recovery programs. Participants can remain in services for as long as they would like, even for multiple years. All these strategies help remove as many barriers as possible for participants.

**5. With the trauma-informed care training and implementation for your organization, what lessons have you learned that you wish you had known at the start?**

- a. Rise Recovery's one key lesson is that you should assume almost everyone has experienced some form of trauma. At times, staff may expect that individuals will disclose their trauma, and then trauma-informed practices can be applied. However, it is safer and more effective to assume that most people have experienced trauma, especially given the high prevalence within the population Rise Recovery serves. It is not necessary to know whether someone has or has not experienced trauma in order to apply trauma-informed care. These practices should be used consistently with everyone. We have reinforced this mindset with our staff and ensure that all team members are trained in and utilize trauma-informed care from the beginning.