

**Vermont Governor's Opioid Coordination Council
Meeting Minutes 06/11/2018 Approved**

Location and Time: 1:00 – 3:00 p.m. Waterbury State Office Complex, Sally Fox Conference Center, Cherry (2nd Floor)

Present: Chairs: J. Leddy. Members: J. Berry Bowen, M. Bucossi, S. Byers, Clarence Davis (for A. Gobeille) L. Genge, C. Herrick (for T. Anderson), M. Levine, P. Mallary, C. Nolan, D. Ricker, K. Sigsbury. Staff: J. LaClair, R. Gowdey, E. Springer (VISTA)

Absent: Chairs: A. Gobeille (see designee), T. Anderson (see designee). Members: D. Allaire, L. Augustyniak, A. Bunting, K. Black, S. DiSanto, T. Donovan, B. Grearson, R. Marcoux, S. Thompson

Visitors: H. Bradshaw, T. Hauck, C. Boyd, J. Broughton, C. Thomas, D. Derby, J. Rex, L. Keenan, T. Wright, K. Aja, C. Maley, L. Cassea, C. Bell, C. Johnson, J. Worland, J. Sudhoff-Guerin, K. Veller, K. Van Haste

Agenda Item	Discussion	Action/ Next Steps
Opening of Meeting 1:04	Chair Jim Leddy. Opening Comments, introductions	Quorum not reached
Director's report (J. LaClair) 1:08	<ul style="list-style-type: none"> • Recovery housing summary – a culmination of a year and half of work • Next Recovery Strategy Committee will meet on Thursday, June 24 <ul style="list-style-type: none"> ○ Criminal Records Expungement ○ Employment in recovery • VDH's Youth Risk Behavior Survey (YRBS) and CDC Vital Signs report highlighting suicide prevention • Commissioners Levine and Anderson are working to help OCC align prevention strategies with both VADAC and Marijuana Advisory Council • Data interoperability strategy promoted by VDH and ADAP's recent application for Department of Justice grant to work together to make our data available • S.166 MAT in Correctional Facilities was signed by governor, a big win for OCC and interested groups • Chiropractic Copay Bill still pending, which aligns with our discussion around integrative healthcare and alternative forms of treatment and pain management • Lamoille County Youth Prevention Forum: 16 students presented on their attendance at national youth leadership training on opioids. Youth perspective • Congressman Welch's upcoming Opioid Roundtables in Springfield and Barre • No OCC meeting in July 	
Jason Broughton, Assistant State Librarian for Library Advancement 1:22	<ul style="list-style-type: none"> • Libraries are community-centered and positioned for intervention <ul style="list-style-type: none"> ○ Front lines of societal impacts: homelessness, hunger, government benefits. People come to their public libraries for computer access, reference, etc. • VT Lib Top 6 Actions are confirmed in terms of statewide services <ul style="list-style-type: none"> ○ Also have oversight with correctional and institutional (schools, academic, private libraries) 	

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	<ul style="list-style-type: none"> ○ Training library staff on use of Naloxone, stigmatization, resilience. Some trainings will be open to public. 	
Commissioner Mark Levine 1:34	<ul style="list-style-type: none"> ● Update on 1115 waiver process to have appropriate things covered by federal health programs has been submitted (Cindy Thomas) ● Our three residential treatment facilities are considered institutes of mental disease, so will not be able to use Medicaid to reimburse this level of care starting in 2021, but until then we have a waiver to use Medicaid to pay for treatment, effective July 1 ● Jolinda: “Barrier for payment is an incredible obstacle to treatment” 	
Approval of Minutes	No Changes. Motion to approve: Sara Byers. Second: Ken Sigsbury. Quorum reached	Approved unanimously voice vote.
Bob Bick: Howard Center Conference: Opiates: Scientific, Political, and Social Perspectives (May 22) 1:38	<ul style="list-style-type: none"> ● Intention was to “bring in three national speakers who have some significant level of prominence... and who have espoused some views that don’t necessarily neatly line up with the more mainstream viewpoints that we’ve adopted here in Vermont”. ● Highlights that one speaker rejected the 12-Step outline, another talked about political and racial implications 	
Strategy Development Topic: Recovery Strategy Development		
Moderator: SaraByers	<ul style="list-style-type: none"> ● Quoting Peter Mallary: The first day of treatment is also the first day of recovery -- Identifying the nexus 	
Overview and Context		
Hugh Bradshaw, Department of Disabilities, Aging, and Independent Living, Division of Vocational Rehabilitation	<ul style="list-style-type: none"> ● Post-sobriety recovery can be traumatizing because of isolation ● There are many grandparents in Vermont now raising grandchildren to keep them from going to foster care, not solely because of but exacerbated by opioid crisis ● Social connectedness is key: social isolation, unemployment, lack of housing ● Of working age men disconnected from work, 20% are because of substance abuse <ul style="list-style-type: none"> ○ This is a workforce issue 	
Connecting Needs and Services to Support Recovery: Recovery Center Perspective – Programs and supports, recovery coaching in correctional facilities, housing		
Recovery Centers: <ul style="list-style-type: none"> ● Tracie Hauck, Turning Point Center of Rutland 	<ul style="list-style-type: none"> ● Disconnect between the 12-Step program and MAT, even a stigma between the two that prevents people on MAT from participating in 12-Step meetings <ul style="list-style-type: none"> ○ Taking the 12-step meetings into a new format to be accessible for those in MAT. Trying to add other groups: MARA (Medicated Assisted Recovery Anonymous), may be one at the prison ● Have funding to develop the correctional program to offer recovery coaching at the prison. Thinking about narrowing down to people who are close to release 	

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<ul style="list-style-type: none"> Cindy Boyd, Kingdom Recovery Center, St. J. 	<ul style="list-style-type: none"> Talking to people in the communities, Transportation is maybe the biggest issue because they have no way to get to the centers, and they're not eligible for Medicaid transportation Outreach is the most important piece: meeting people and seeing them repeatedly in different places Personal story is powerful – St. Johnsbury community is very collaborative, and includes the library. Some people on MAT feel that is their treatment and do not seek additional recovery supports 	
Building Community Relationships via Intervention: Law Enforcement & Street Social Workers/St. Albans		
<p>St. Albans:</p> <ul style="list-style-type: none"> VSP Lt. Maurice Lamothe NW Medical Ctr: Nick Tebbetts, Melinda Lussier 	<ul style="list-style-type: none"> Increase in police calls for mental health service over past two decades, sparking conversation for embedded case worker to enhance ability to deal with people in mental health crisis Street social worker embedded with State Police barracks 40 hours/week from Northwest Medical Center; mental health and SUD expertise Includes follow-up Benefits – troopers on the scene for less time per situation (worker helps to de-escalate). Increased referrals and access to help Challenges – one FTE – could use more (night shift) Act 49 seed funding Development of Thrive empanelment: a number of services and centers that can share information about an individual to provide services as a suite (individual signs release) 	
Building Community Relationships through Intervention: Law Enforcement and Street Social Workers ... South Burlington and Surrounding Communities		
<p>South Burlington:</p> <ul style="list-style-type: none"> City Manager Kevin Dorn Police Chief Trevor Whipple 	<ul style="list-style-type: none"> Chittenden County Community Outreach – about partnership – local communities with Howard Center and AHS Increase in calls for social services needs (mental health, drug abuse, etc.), which was starting to take a mental/emotional toll on service providers Started program for 4 full time embedded social service workers. Now that the program exists, there is abundant need for the outreach workers This is the start of a county-wide program <ul style="list-style-type: none"> Training and resources Full access to databases (law enforcement and mental health) Utilized in a variety of ways Available to go out on calls, including calls where officers are not needed. 	
Alcohol and Drug Abuse Programs, Vermont Department of Health		
<p>Cindy Thomas, Director</p>	<ul style="list-style-type: none"> Prevention, Intervention, Treatment and Recovery. ADAP's role is to provide Funding, Oversight, Compliance, and Technical Assistance to Build and Strengthen the systems we have 	

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	<ul style="list-style-type: none"> • Several project underway using federal opioid funding (STR) – recovery coaches in emergency departments, employment services in recovery centers and hubs Development of a centralized call center (via 211)	
	Discussion: Demand reduction, prevention, referral to treatment, and recovery	
	<ul style="list-style-type: none"> • What about statewide programs to embed outreach workers? What vehicle could bring together these partners to talk to and learn from each other. Can the Council facilitate this? • Franklin County model is State Police – expansion would be at state level initiative, if deemed effective and funding/community partnership found (each community would be somewhat different). Training pilot needed • Refer to Acts 280 and 283. • Need to find a way to do this without dependence on payers. • Re Fentanyl – Pilot testing program shows 10% pure fentanyl on streets, 70% pure heroin, 20% mix. • Street encounters with fentanyl and testing results may be different • Re Drug courts: <ul style="list-style-type: none"> ○ evolving quickly, as the drug trade evolves. Key to success lies in working with the right population. Needs to be the only possible measure left before jail is only option. ○ Local variations: Numbers up in Barre, with full-time coordinator. Chittenden court thriving – more accountable. Almost 70 people. Rutland fell back, and now numbers up again. ○ Proposal in Supreme Court for Chittenden family treatment court ○ Potential benefit of a judicial master with enough authority to operate juvenile court principles in docket. Take a regional approach and go county to county to implement early treatment and monitoring. ○ More judges being sent for drug court training • How/why do extreme cases – with 35 convictions including felonies – end up in treatment court (not jail)? • Only 3 enforcement strategies in the Council’s recommendations. Need more emphasis, more legislative buy-in. How can OCC support convening a statewide forum to bring together the embedded model operators in state and local police? 	
Public Comment	It is hard to tell the personal stories. Thank you for doing so.	No remarks
Closing remarks. Adjourn	Motion to Adjourn: Bob Bick at 3:27 p.m. Next meeting Monday, June 11, 2018	