



Preparing to Launch the OCC Intervention, Treatment and Recovery Committee: Insights and Reflections

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www.healthvermont.gov/opioid-coordination-council

Drivers of Systemic Improvement

Prevention: A “firewall of resilience.”

Intervention: Maximize opportunities for connection to treatment and recovery.

Treatment: Timely, affordable, effective.

Recovery:

- Beyond abstinence: health, relationships, productivity.
- Sustained, wraparound supports: employment, housing, transportation, engagement.

Enforcement: Supply reduction, alternatives to incarceration. Public safety, policing, courts, prosecution practices, corrections. Includes harm reduction.



Intervention:

Meeting people “where they are” is key to transitioning those with SUD into treatment and recovery.

3 Expand & reinforce intervention & harm reduction statewide.

- Syringe services programs
- Human bridge of intervention to engage people at critical moments:
 - Screening, Brief Intervention and Navigation to Services (SBINS)
 - Rapid Access to Medication-Assisted Treatment (RAM)
 - SUD & MH professionals embedded with state & local LE
 - Recovery coaches for just-in-time transitions to treatment & recovery resources



Treatment:

4 **Support and expand a statewide system of treatment that ensures timely accessibility to comprehensive care.**

Evaluate, improve & increase capacity in the Hub and Spoke system:

- outcomes
- capacity and scope of services

Continue implementing expansion of medication-assisted treatment (MAT) in correctional facilities.



Recovery:

5 **Build and support the Recovery Bridge: Integrate recovery services across Vermont to ensure access to robust recovery supports is available to all in need.**

- Recovery-Friendly Housing
- Employment in Recovery
- Recovery Coaching & Recovery Coach Academy
- Transportation



Intervention → Treatment → Recovery: The Nexus

If Vermont is successful with its intervention strategies, demand for treatment and recovery services will increase as those with addiction are connected to services. (Building Bridges report)



Intervention → Treatment → Recovery: How Programs and Connection Help Sustain Recovery

Andrew Gonyea

Director of Operations

Vermont Foundation of Recovery



From Intervention to Treatment: *It's all about human connection*

Resources that help:

- Syringe Services Programs
- Naloxone
- Rapid Access to MAT (RAM)
- Low-barrier buprenorphine
- Social workers/MH professionals embedded with law enforcement/first responders
- Recovery coaches
- Screening (SBIRT/SBINS)



From Intervention to Treatment: Programs in Action

Rapid Access to Medication-Assisted Treatment (RAM)

Chris Lukonis, MD, Gifford Addiction Medicine

Katherine Higgins, Health Support Navigator, Central Vermont
Medical Center Emergency Department

Low-Barrier Access to Buprenorphine

Grace Keller, Program Coordinator, Safe Recovery Syringe Services
Program, Howard Center



Treatment and Recovery

There can be no wrong door ...

First day of treatment is the first day of recovery

- Hub and Spoke
- Residential Treatment
- Intensive Outpatient Treatment Programs
- Corrections Department Care Coordination



Treatment and Recovery: Care Coordination In and Beyond Corrections

Mike Touchette, Commissioner, Department of Corrections

Annie Ramniceanu, Director of Addiction and Mental Health
Systems, Dept. of Corrections



The Recovery Bridge: A Home, a Job, and Human Connection

- Recovery Residences
- Employment and Recovery-Friendly Workplaces
- Recovery Coaching
- Transportation



Housing: A Critical Link to Recovery

Assessment of Need for Recovery Residences in VT

Eileen Peltier, Director, Downstreet Housing; OCC member



Discussion: OCC Member Guidance for the ITR Committee Launch

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