OCC Intervention, Treatment and Recovery Committee

April 24, 2019

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

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

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

• Drug treatment courts
• Expansion of non-pharmacologic approaches to pain management and recovery
• SUD and mental health workforce
• Sustainable investment models for intervention and recovery
Intervention, Treatment and Recovery
2019

Cynthia Seivwright, Megan Mitchell and Lori Uerz
Public Health Approach

- Focuses on population and individual health

- Using data to understand consumption and consequence patterns

- Understanding the nature and impact of the problem to set priorities for policy, access, and infrastructure
# State Services

## VDH/ADAP
- **Treatment** Preferred Provider Oversight & Quality
- **Prevention** – Community, School-Based Services, Prevention Consultants
- **Intervention** – PIP, IDR, School Health, VPMS, Naloxone, Rocking Horse
- **Treatment** – Preferred Provider Outpatient, Intensive Outpatient, Residential
  - Hub – Medicated Assisted Treatment, Halfway/Transitional Housing
- **Recovery Services** – Recovery Centers, Peer Support, Specialty Programs

## DVHA
- **Care Coordination** – Team Care, VCCI, Spoke Staff
- **Treatment** – Private Practitioner Outpatient, Hospital Detoxification, Spoke/Physician Services, Pharmacy/Medication
- **Support Services** – Laboratory, Transportation
- **Analytics & Evaluation**

## Other State
- **DCF/Reach Up & Lund Screening**
- **DOT – Impaired Driver Prevention**
- **DOC Screening and Treatment**
- **DOC Therapeutic Communities**
- **Pre-Trial Services**
- **Court Screening**
- **DMH Co-Occurring**
- **DMH Elder Care Clinicians**
- **DAIL – Screening**
- **AOE – School Based Health Services**
- **DLL – Regulation & Training**
Vermont’s Services

Recovery Services are Available to Those at All Service Levels

- Prevention Services
- Intervention
- Outpatient Treatment (OP)
- Intensive Outpatient Treatment (IOP), Hubs
- Specialty (Res)

Hospital Detoxification

Physician (spoke) OP Services, Private Practitioner/DMH OP, DOC Medical Services

Fewest Number of People

Largest Number of People

Highest Level of Care

Lowest Level of Care
Actions to Address Alcohol and Drug Misuse

**Prevention**
- Community-based mobilization, education and capacity building
- Youth and community leadership
  - Media campaigns
  - School-based services
  - Training and technical assistance
  - College Symposium

**Intervention**
- Substance misuse screenings
- Prescribing practice improvement
- Impaired driver rehabilitation
- Prescription drug monitoring system
  - Drug disposal

**Treatment**
- Outpatient
- Intensive outpatient
- Hub and Spoke
- Residential

**Recovery**
- Recovery centers
  - Housing
- Peer-recovery supports
- Recovery coaches
Prevention Services

- Community-based mobilization, education and capacity building
  - Youth and community leadership
    - Media campaigns
  - School-based services
  - Training and technical assistance
  - College Symposium
Substance misuse screenings
Prescribing practice improvement
Impaired driver rehabilitation
Prescription drug monitoring system
Drug disposal
Treatment

- Outpatient
- Intensive outpatient
- Hub and Spoke
- Residential
• Recovery centers
• Housing
• Peer-recovery supports
• Recovery coaches
Discussion

1. Within and between the three drivers:
   • What are the pinch points (gaps, challenges)?
   • What opportunities can we take advantage of to address them?

2. Charge Statement

3. Working Groups

4. Other Next Steps

5. Wrap-up
   • Community updates
   • Next meetings (alternate 4th Wednesdays)

www.healthvermont.gov/opioid-coordination-council