

# BARNSTABLE COUNTY REGIONAL SUBSTANCE ABUSE COUNCIL

## MEETING SUMMARY

Date: October 1, 2015    4:00 PM	MEETING PLACE: Harborview Conference Room, Barnstable County Complex
NEXT MEETING: December 3, 2015, 4:00 PM, Harborview Conference Room, (top of the hill in the County Complex)	RECORDING: Kathie Callahan, Barnstable County Human Services
<p><b>MEMBERS PRESENT:</b> Beth Albert, Roger Allen, Karen Cardeira, Dennis Cunningham, John Fortes, Chris Greeley, Elizabeth Griffin, Linell Grundman, Lisa Guyon, Vaira Harik, Paul Hilton, Sheila House, Randy Hunt, Samantha Kossow, Sheila Lyons, Jessica McHugh, Donna Mello, Patty Mitrokostas, Andrew Nelson, Heidi Nelson, Edye Nesmith, Ruth Provost, Kathy Quatromoni, Brian Robbins, Sean Sheehan, Sam Tarplin, Gail Wilson, Regina Yaroch</p> <p><b>Unable to attend:</b> Deirdre Arvidson, Mary LeClair, Sue Rohrbach</p> <p><b>Guests:</b> Greg Battles – Franey Medical Laboratories, Helen Bresnahan – League of Women Voters &amp; CC Commission on the Status of Women, Deborah Heavilin – Gandara, Denise MacFarlane – Sandwich resident, Brian Mannal – State Rep., Barbara Milligan – United Way, Cape Cod, Patty Watson – Barnstable County Human Services,</p>	

- **Welcome and Introductions:** Beth Albert facilitated the meeting. Introductions were made by individuals.
  
- **Minutes of September 2015 Meeting:** Motion by **Sheila House**, seconded by **Kathy Quatromoni** to accept the September 3, 2015 minutes as written, unanimously approved.
  
- **Legislative Update, State Representative Randy Hunt & Andrew Nelson, District Representative for Congressman Keating:**
  - Randy:**
    - **Chapter 258** was passed last session, goes into effect October 1, 2015. Requires MassHealth and commercial insurers to cover detoxification and clinical stabilization services for up to 14 days. Also created a Drug Formulary Commission, responsible for creating a list of tamper resistant drugs that will be substituted at pharmacies. Emergency Scheduling: Legislation filed where the Commission of DPH could place harmful synthetic drugs on an emergency schedule. There are many synthetic drugs sold in convenience stores that are extremely harmful. Before this legislation was passed it was a long process to get these substances off the shelves. Now the Commission will be able to “emergency schedule” a substance when it is reported to be harmful and it is taken off shelves, analyzed and determined whether it is truly a harmful substance and should be permanently placed on a schedule.
    - **Sober Homes Legislation:** Legislation filed and passed in the FY15 budget. Creates voluntary accreditation program for sober homes. Only those accredited will get referrals from the state. DPH will keep a monthly updated list on their public website of all accredited sober homes. DPH is working on the regulations/guidelines for the accreditation process.
    - **FY16 budget:** DPH got an additional \$6 million dollars in funding. An outside section created a pilot program to administer extended-release injectable naltrexone (Vivitrol) at the Clinical Stabilization Services (CSS) level of care. An outside section required MassHealth to provide coverage for all FDA approved Medication Assisted Treatments at the CSS level of care. \$250,000 was added to the Bureau of Substance Abuse Services (BSAS) for a pilot program for young adults ages 17-25 to address the high prevalence of addiction in this age group. An additional \$3,000,000 was allocated for adding new Clinical Stabilization Services beds.

- **Attorney General Maura Healey:** Announced two weeks ago that the pharmaceutical company that makes Narcan (a drug that reverses the effects of opioid overdoses) will pay approximately \$325,000 to a new trust fund to make Narcan more affordable to cities and towns. This trust fund was created in the FY16 budget.
- **Governor's Opioid Working Group:** Governor Baker put together a working group to identify the issues surrounding the opioid epidemic in the Commonwealth. He had meetings, listening sessions, and met with experts regarding the issue and solutions. In June, the Governor released the recommendations. In July, the Governor filed a supplemental budget which included \$27 million in funding for several of his recommendations including: Strengthening the Prescription Monitoring Program (PMP) to monitor physicians who are high opiate prescribers; Plan to move individuals under Section 35 from MCI Framingham (last year 8,000 individuals were admitted through Section 35 via a court order); Prescriber education on effective pain management, identifying high risk patients and counseling patients on side effects. The Governor held a press conference in early September where several medical school directors and the Commission of DPH announced that they will be working together to create a curriculum around safe prescribing that will be taught to medical students. Mass Hospital Association agreed to protocols regarding prescribing by Emergency Room doctors.

**Andrew:** Four major pieces of legislation on a federal level

- **STOPP Act:** Deaths related to drug abuse are on the rise. Time-released characteristics of powerful opioids are compromised when crushed or dissolved resulting in the full potency of the drug being released all at once and studies have shown that drug abusers tend to crush or otherwise break down time-released products into a form that can be snorted or injected for a more intense high. The STOPP Act is the first federal legislation that directs pharmaceutical manufacturers to invest in research and production to formulate tamper resistant drugs in order to compete with drugs of a similar nature that already employ tamper resistant technologies. If their application does not include information that the new drug is tamper resistant the FDA must refuse approval of the application. The bill also grants the FDA a waiver authority for drugs that are absolutely critical and experiencing drug shortages for the period in which those drugs are in high demand and there is no tamper resistant alternative.
- **Protecting Our Infants Act of 2015:** This Act would direct federal agencies to collect and disseminate strategies and best practices to prevent and treat maternal opioid use and abuse, as well as provide recommendations for diagnosing and treating babies suffering from withdrawal. The bill authorizes the CDC to provide technical assistance to states to improve the availability and quality of data collection and surveillance activities regarding Neonatal Abstinence Syndrome.
- **The Recovery Enhancement for Addiction Treatment Act (TREAT Act):** This Act increases the number of patients a provider is initially allowed to treat from 30 to 100 patients a year. It allows certain nurse practitioners and physician assistants to treat up to 100 patients per year under special provisions. It allows certain physicians, after one year, to request removal of the patient limit under certain provisions. "Qualified practice settings" are named in the legislation and include clinical settings that have defined oversight, performance metrics, or quality review, or that are part of systems serving populations with high need. It requires the GAO to examine changes in treatment availability and utilization; quality of treatment programs; integration with routine healthcare services; diversion; impact on state-level policies and legislation; and use of nurse practitioner and physician assistant prescribers.
- **Request to the U.S. Department of Health & Human Services for a Surgeon General's Report:** to highlight the seriousness of the opioid epidemic public health crisis and spur national efforts that can assist communities most in need.

➤ **RSAC updates – Samantha Kossow, Coordinator:**

- The RSAC staff are continuing to develop fact sheets and information such as the Chapter 258 fact sheet distributed today. This information is available on the RSAC website and is pushed out via social media and the RSAC e-newsletter.
- A paper substance use resource guide is being developed for use and distribution among a number of groups, including ED departments, police and fire, and other community resources. This will work to compliment online resources such as the Behavioral Health Web Portal.

- Working with HRiA and MasTAPP, there is work to bring coalition trainings to the South East and Cape Cod on topics like capacity building and sustainability for local coalitions.

➤ **Next Steps: RSAC Structure & Working Groups, Beth Albert:**

- **RSAC Co-chairs:** Following adoption by the RSAC on 9/3/15, co-chairs Beth Albert, Cheryl Bartlett and Ray Tamasi were appointed by the Barnstable County Commissioners. Co-chairs will work to create a leadership structure including defining structure and roles. Several new stakeholders were added to the RSAC membership. Working groups will be created around Prevention, Treatment & Recovery. RSAC will switch to a bi-monthly meeting schedule with working groups meeting bi-monthly on the opposite months. Working groups participation will be opened to individuals outside the RSAC membership. The Prevention working group will be co-chaired by Lisa Guyon and Patty Mitrokostas. The Treatment working group will be co-chaired by Heidi Nelson and Vaira Harik as interim co-chair. Need to pull together Recovery working group and identify co-chairs.
- **Prevention Work Group:** Lisa Guyon and Patty Mitrokostas distributed and reviewed the Prevention/Intervention Overview document, noting that this is the initial concept for this working group. The purpose of this work group will be to build a cross-sector working group to address and implement prevention and intervention action steps as outlined in the RSAC Action Plan 2015-2020. The goal is to coordinate work as a region, develop a strong plan and well-position the RSAC for future funding. The format of the group will be a larger work group with sub-groups focused on four key areas of activities related to the action plan: Comprehensive School-based Initiative, Media Campaign, Harm Reduction & Education. Meetings will be held every other month alternating with RSAC membership meetings with on-going communication between meetings, sub-groups meeting as frequently as needed. Co-chairs will report back to the RSAC. The composition of the work group will include coalition representatives, schools, court officials, community organizations, MOAPC & SAPC grant members and others with work/interest that aligns with prevention elements of RSAC Action Plan. Cheryl Bartlett has 11 of 14 school districts on board for a school-based initiative that is in its concept phase. Brian Mannal, State Representative, suggested contacting the Barnstable Youth Commission for collaboration.

➤ **Updates from Representatives:**

- Lisa Guyon: Cape Cod Healthcare will collaborate with Boston University School of Medicine to offer two more SCOPE of Pain trainings on October 21<sup>st</sup> (Cape Cod Hospital) & 22<sup>nd</sup> (Falmouth Hospital). SCOPE of Pain is a series of continuing medical education/continuing nursing education activities designed to help healthcare professionals safely and competently use opioids, and to manage patients with chronic pain. The Third Annual Behavioral Health Summit will showcase "Models of Promise" - connecting behavioral and physical health services across a continuum from collaboration to full scale integration of services. The Behavioral Health Summit will be held on Friday, October 2, 2015 from 8:00 AM - 4:30 PM at the Hyannis Resort and Conference Center, 35 Scudder Rd. in Hyannis.
- Sean Sheehan: using data and information from the Dept. of Human Services baseline assessment, a \$900,000 grant was received for use by the Barnstable Drug Court under the direction of Judge Julian for case managers, peer support, and a part time drug court clinician.
- Jessica McHugh, MOAPC update: Submitted strategic plan to the state in August. State sent back comments and after suggested revisions were made the plan was accepted and is now in the implementation phase. SAPC grant key individuals will be invited to attend MOAPC review of the strategic plan meeting. The Prescription Drug Take Back Day on September 26 was promoted via media outlets and other means i.e. the Barnstable County Human Services e-newsletter. Police Dept's across the Cape hosted drop-off locations and were offered free disposal of all collected drugs.
- John Fortes: Reviewed a list from the Massachusetts Organization for Addiction Recovery (MOAR) of legislative proposals of interest relative to addiction prevention, treatment, and recovery.
- Brian Robbins: The Hyannis Peer Recovery Center is up and running and has started several peer-led groups.

- Deb Heavilin: Mother's & Infants Recovery Network, Inc. holds Mothers Helping Mothers support groups; Mondays in Hyannis from 5:30 – 7:30 PM at the Federated Church and on Tuesday in Falmouth at the John Wesley Methodist Church from 6:30 – 8:00 PM. Free childcare is available.
- Sam Tarplin: working on a new film profiling individuals in the homeless population.
- Ruth Provost: Teen programs up and running at the Boys & Girls Club.
- Kathy Quatromoni: The District Attorney's office is continuing work with the schools via "Keep Them Coming" (truancy prevention), regularly scheduled Community-based Justice mtgs. (school safety), Cyber Awareness presentations (digital citizenship), and with the Trial Court and our Juvenile (7-18) and Youthful (18-21) Diversion programs.
- Edye Nesmith: Distributed "A Clergy's Guide to Substance Abuse and Recovery Resources" produced by the Cape Cod Council of Churches.
- Roger Allen: Working to enhance the family re-integration program prior to inmate release. Working on connecting to support services in the community and sites that provide support groups so inmates can be connected to services prior to release.
- Sheila House: A partial snapshot of data from the 2014 Youth Risk Behavior Survey was shared with Monomoy School Committee members. The superintendent is planning a public presentation of the data to parents, students and community members with a panel Q & A following. Additionally, Sheila has been working with Patty M. from Gosnold and Chatham Human Services, to bring a clinician to the Harwich area who can see Chatham youth. This program will begin during the month of October.
- Donna Mello: The AIDS Support Group of Cape Cod doors are still open and the agency continues to provide medical case management to clients.
- Chris Greeley: The YPCAT DAC (Yarmouth Police Community Advisory Team Drug Awareness Committee) appeared before the Board of Health last month and will appear before the Board of Selectmen on October 20th. At that time the committee will transition from an arm of the YPCAT and be named the Yarmouth Drug Awareness Committee answering to the BOS as part of their annual goal #6 which addresses the opioid epidemic in the town. The committee now has a 29 person membership from a broad cross-section of the community and town departments.
- Regina Yaroch: A production of Balm in Gilead by Lanford Wilson, dealing with issues of drug addiction at Cape Cod Community College is scheduled for November 12, 13, 14, 19, 20 & 21 hopes to be a launching point for community discussion. The theater department asked START for assistance in planning a post-show conversation between the audience, the cast and crew, and perhaps some community experts. Anyone with interest/ideas/knowledge of addiction can join us at a brainstorming session on Tue., Oct. 6, at 5 pm in the Tilden Arts building.
- Gail Wilson: Jessica McHugh and Beth Albert will speak to Mashpee Cares group on October 20<sup>th</sup>.

➤ **Adjournment:** -The meeting was adjourned at 5:30 PM.

➤ **Next meeting scheduled for December 3, 2015 @ 4 PM in the Harborview Conference Room in the County Complex**

Respectfully submitted: Kathie Callahan