

BARNSTABLE COUNTY REGIONAL SUBSTANCE ABUSE COUNCIL

MEETING SUMMARY

Date: June 7, 2018 3:30 PM	MEETING PLACE: Harborview Conference Room, Barnstable County Complex	
NEXT MEETING: September 6, 2018, 3:30 PM, Harborview Conference Room, County Complex	RECORDING: Kathie Callahan, Barnstable County Human Services	
<p>MEMBERS PRESENT: Jamie Binienda, Shaun Cahill, Elizabeth Griffin, Lisa Guyon, Suzie Hauptmann, Judge John Julian, Mary LeClair, Patty Mitrokostas, Heidi Nelson, Sean O’Brien, Katie Riconda, Robin Wallace, Regina Yaroch</p> <p>Unable to attend: Judy Scarafile, Edye Nesmith, Kathy Quatromoni, Ruth Provost</p> <p>Members of the public: Ronnie Gullette, Bill Gullette, Shannon Ridge, Amy Doherty, Daniel Fencer, Justin Campbell, Corrie Vilsaint, Michael Leach, Lauren Whelan, Mary Linehan, Barbara Prindle Eaton</p> <p>DHS Staff: Beth Albert, Vaira Harik, Kim Slade, Gioia Persuittie</p>		

- **Welcome and Introductions:** Vaira Harik chaired the meeting. Introductions were made by individuals.
- **Business:**
 - **Minutes of May 3, 2018:** Regina Yaroch motioned, seconded by Sean O’Brien to accept the May 3, 2018 minutes as written, unanimously approved.
 - **Review of Leadership Team Meeting, May 16, 2018:** The leadership team will be focusing on building the RSAC membership, tracking indicators and collecting data for analysis. The team would like to see the value of Recovery work being done as a more prevalent part of the work of RSAC. Will also look at work around stigma issues of addiction.
 - **Summer Meeting Schedule (RSAC and RSAC Leadership Meeting):** Vaira Harik recommended that the Regional Substance Use Council not meet in July and August and resume again on the first Thursday in September – September 6, 2018. She also noted that the Leadership Committee continue to meet over the summer and the work groups as they deem necessary. There was a general consensus to follow this proposal from Vaira.
 - **Duffy and Behavioral Health Innovators:** The Heidi Nelson reported that Duffy and the Behavioral Health Innovators plan to invite BSAS Director Allison Bauer to visit their programs on/about September 6, 2018. It was suggested to reach out to Allison to attend the September RSAC meeting join in the conversation of what is being done here in our region. Will reach out to DPH who compiled a bed capacity report 2 years ago.
- **Work Group reports:**
 - Patty Mitrokostas reported that Gosnold is looking at a new campus on Jones Road in Falmouth with 44 new treatment beds. Lisa Guyon reported that BSAS funding for the Moms Do Care program will end on 7/31/18. Cape Cod Healthcare will continue funding the program for 2 years. Suzie Hauptman, Falmouth Human Services reported that the Town of Falmouth has awarded a \$20,000 grant to WellStrong to expand their program. Patty Mitrokostas reported that the Gosnold Lecture Series will reach out to both the

public and clinicians. Regina Yaroch reported that the Recovery Work Group will be collaborating with other community organizations this to host the Recovery Fest. Recovery month across Cape Cod will also be held.

➤ **Presentation by Corrie Vilsaint, PhD, Prevalence and Pathways of Recovery from Drug and Alcohol Problems: Mapping Course of Illness onto Treatment and Recovery Services:**

Dr. Vilsaint described the research group with which she works, the Recovery Research Institute (RRI) at the Mass General Hospital/Harvard Medical School Center of Addiction Medicine, and then reviewed the results of two studies which directly relate to the RSAC’s recovery work: the National Recovery Study and a study to validate the Brief Assessment of Recovery Capital (BARC-10) tool.


The development and improvement in a person’s “recovery capital” is predictive of their success in recovery.

National Recovery Study (NRS)

Kelly, Bergman, Hoepfner, Vilsaint, & White, 2017

Objective:
Estimate prevalence.....


1. People who have successfully resolved an AOD problem and their primary substance.
2. People who identify as being, ‘in recovery’.
3. Used assisted (e.g., formal treatment/mutual-help) vs. unassisted pathways (e.g., “natural recovery”).
4. Abstinent vs. non-abstinent problem resolution.



The screenshot shows the article title "Prevalence and pathways of recovery from drug and alcohol problems in the United States population: Implications for practice, research, and policy" by Kelly et al. (2017). It includes the journal name "Drug and Alcohol Dependence", the volume and issue information (175, 2017, 102-110), and the abstract text.

Results: National Recovery Study

1. 9.1% of the US population has resolved a former AOD problem (22,551,000).
2. Just under half (46%) self-identified as being in recovery.
3. 46.9% had resolved without use of any treatment, mutual-help, or other recovery support services.
4. 51.6% had resolved using an abstinent pathway.



The signpost is a wooden post with three horizontal arrows pointing to the left. The top arrow is labeled "CLINICAL PATHWAYS", the middle arrow is labeled "SELF-MANAGEMENT PATHWAYS", and the bottom arrow is labeled "NON-CLINICAL PATHWAYS". The signpost is set against a background of green grass.

Biaxial approach assessing improvements in initial pathology and improvements in Quality of Life and Recovery Capital

Brief Assessment of Recovery Capital

- 10 item measure (Vilsaint et al., 2017)

Assessment of Recovery Capital

- 50 item measure (Groshkova et al., 2013)

REC-CAP Assessment and Recovery Planning Tool

- (<http://www.recoveryoutcomes.com/rec-cap/>)



Summary

Science informing Recovery Advocacy and Policy

- RSSs open up new pathways to recovery and can enhance and extend the effects of professionally-delivered care by...
 - Helping change social networks towards those that model and support recovery in the communities in which people live
 - Helping build resilience, buffer stress, and increase recovery coping, confidence and motivation over the long-term
 - Help individuals build further “recovery capital” by providing supports in high risk educational environments like colleges/high schools, providing linkages to employment opportunities, and health/social services
 - Providing ongoing recovery-specific support at little cost reducing burden on professional health services while enhancing remission rates, thereby reducing health care costs, and appear cost-effective and worthy of investment

➤ **Adjournment:** Meeting adjourned at 5:00 PM.

➤ **Next meeting:** Scheduled for September 6, 2018 @ 4 PM in the Harborview Conference Room in the County Complex.

Respectfully submitted: Kathie Callahan, BCDHS