

CCOA Meeting Notes

Treatment Access and Recovery Supports Action Team Meeting

4/21/2017

Opening: Time Keeper: Ken Johnson Note taker: Jess Kirby

Amy Boyd Austin shares about the Catamount Recovery Program:

- Helps to connect students with a recovery community on campus typically after a slow introduction back into a college campus environment
- Provides support through a peer network; fellowship, sharing of stories, etc.
- Provides recovery housing
- Received seven new referrals in the past week

Introductions and welcoming visitors Jackie Corbally from CommStat, Amy from United Way and Sam and Toby students visiting from Champlain College.

Update from Jackie Corbally: Informs the group of 27 overdoses in the past two weeks, from 5 police districts in Vermont. Highest rate of overdoses in any two-week period. Reports of Fentanyl laced with methamphetamine.

Report Out:

Cathy:

- Grant was submitted for MAT Navigator position.
- We should hear back in May.
- We need to brainstorm a title for this position as there could be confusion with the MAT Navigator for the MAT Integration Project.

Survey Update:

- Grant approved for gift cards and flyer/ mailing costs
- Cathy will purchase 100 ten dollar gift cards from CVS
- Cathy will verify that gift cards do not allow alcohol and tobacco purchases
- Hopes to finalize survey Friday 4/21/17
- Tom and Jess: editing and mailing of two flyers; one to display at chosen sites and one to mail to those on the waitlist.
- Surveys will be available for those on the waitlist to fill out at: Safe Recovery, Turning Point, Lund Family Center (Alice) and UVMCC's ATP program.

Team Discussion on Final Survey Edits

- Suggestion: separating question eight into two questions, and taking out "while you wait" as it could imply that Vivitrol and Naltrexone are not viable options for treatment other than just while you wait for other MAT treatment.
- Suggestion: Add "none" as an option to questions three and five.
- Suggestion: On Question 6 "Are you aware that you can engage in counseling while you wait?" Extend to "while you wait for MAT."

Action Steps: Discussion on how to build treatment capacity.

Results of team survey on where to focus our efforts to increase treatment capacity

Five Areas from survey results

1. Awareness of clinicians who work with individuals that are engaging in use.
2. Navigator position focused on getting stable patients out of hub to spoke
3. Creating programs to support people who are maintaining suboxone illicitly
4. Extended brainstorm and planning for a roadmap to end the wait list. How H.275 would be implemented? Get to same day access!
5. UVM counseling master's students doing a harm reduction drop in hours

Group decision to take number two off the list as there is already a focus in this area.

Jackie Corbally: expresses concern that the five survey options do not address treatment without delay with the sense of urgency required. She encourages us to consider this and to reaffirm our focus if treatment without delay is of primary focus to our group as a whole.

Open discussion:

What does treatment without delay mean? MAT, Inpatient, other treatments if appropriate.

Catherine S. reminds the group that when St. Albans HUB opens 110-125 clients from the Chittenden Clinic will go to St. Albans for treatment. This will take enormous strain off the waitlist and increase treatment capacity at the Chittenden Clinic.

We decide that Option four from survey most closely aligns with focusing on treatment without delay.

We vote and unanimously decide to focus our efforts on treatment without delay and option four.

Tom:

- It's challenging for people to envision what same day access will look like, and how H.275 would be implemented.
- People wonder are there other ways? Won't it be very expensive?
- He suggests that we consider these questions. Develop a structure, provide people with a map of how we get to treatment access within 24 hours.
- We need buy in from people, participation.

Cathy: Suggestion to split into two groups for 20 minute discussion on short term strategies our group can achieve.

Group One: Brandon, Jim, Andrew, Bill, Amanda, Beth, Amy, Catherine H.

Ideas:

Developing a mobile multi-disciplinary response team. Team would be called when someone requests treatment or is in crisis related to opioids or other substances and could benefit from resources and learning about treatment options.

If a person comes forth to any provider and is in need of help with substance use issues an appropriate team member(s) will respond and coordinate care (emergency sober housing, coordinate inpatient care or interim dosing, etc).

They also discussed having one place that people are directed when struggling with substance use and/or opioids. Possibly Safe Recovery?

Group Two: Jess, Tom, Alice, Debra, Catherine S., Ken

Ideas:

Discussed the possibility of ED doctors have the ability and perhaps obligation to prescribe Suboxone right in the emergency room when appropriate and then transitioning client to ATP or Safe Recovery for follow up treatment. There would be a NP or physician at Safe Recovery could continue the suboxone bridge until the person gets into treatment. ATP would assess the level of care needed. Big question: Does ATP have the capacity to do this??

Another idea: a HUB based model, does same day help with medication and then triages to decide if they need HUB, spoke, etc.

Another idea: Extending the medi-wheel process (stacy Sigman study). Could be done by offering a provider space at safe recovery to prescribe with the medi-wheel.

When our subgroup has ideas for addressing treatment without delay we could bring them forth to the steering committee. Doing this in a more formal way then we are now.

Wrap up:

Cathy: requests that if anyone has access to published studies or articles that highlight ideas for treatment without delay or any of the ideas discussed to please forward them to the group.

Reminder about Drug Take Back Day: April 29th 10a.m- 2 p.m.

May event is on the 16th only at the Davis Center. Check email for details.

Tom and Jess have flyers done by 4/29 so that they may be mailed to clients a.s.a.p

Start next meeting with a CommStat Update.

Attended	First Name	Last Name	Organization
Yes	Amy Boyd	Austin	Catamount Recovery Program/UVM/Living Well
Absent	Lauryn	Crutchfield	BRC
Yes	Tom	Dalton	Safe Recovery/Howard Center
Yes	Andrew	Gonyea	VT Foundation of Recovery
Yes	Beth	Holden	Howard Center
Yes	Amanda	Hudak	UVMMC/ATP
Yes	Bill (co-chair)	Keithcart	UVM MC, DayOne Program
Yes	Jessica	Kirby	Champlain College
Yes	Alice	Larned	Lund
Absent	Anthony/Erin	Folland/O'Keefe	ADAP
Yes	Brandon	Olson	ADAP
Yes	Catherine (co-chair)	Simonson	Howard Center
Yes	Deborah	Wachtel	UVM Appletree Bay Pry Care
Yes	Jim	Wilkins	Essex Alliance Church

Other attendees:

Jackie Corbally

Amy Carmola

Catherine Hinojosa