

Treatment Access and Recovery Support Action Team

Turning Point Center, 191 Bank St #2, Burlington – September 15, 2017, 8:30-10:30 am

Goal #1: Identify barriers and strategies to create seamless, efficient and **immediate** access to appropriate treatment and recovery supports.

Goal #2: Develop specific recommendations for policy reform and systems change.

Topics	Notes	Discussion/Action Steps
Opening	<ul style="list-style-type: none"> • Group Check-In: Two sentences about what you're currently doing and/or why you're a part of the work • Note Taker- Tori Houston 	<ul style="list-style-type: none"> • Group responses: <ul style="list-style-type: none"> •The Vermont Foundation of Recovery is in the process of hiring a manger to oversee a dedicate women only house. •More data requests of the Alliance have been made within the community and State. •In this work to stop the cycle of death of people committing crime. The overdoses in our community are out of control. •Focused on outreach resources within the emergency room, and reaching out to individuals' there. •With the news of the elimination of the waiting list, excited about visible progress and motivated to continue the change. Energy in community around MAT in correctional facilities is strong. •ATP has no waitlist, provide capacity has increased with understanding it will only continue to increase. Staff retreat next week to determine the next strategic direction for ATP. •Day One will have an open house to recognize 30 years operation. •Chittenden Clinic Client Advisory Board – meeting regularly with strategic goal setting. Leadership has been sure to involve the board. Noticing more people talking about interest in accessing

		<p>treatment, now that knowledge of waiting list elimination is out.</p> <ul style="list-style-type: none"> •No waiting list across the state is another step towards solving this issue. Encouraged by finally looking at breaking down stigma and beginnings of conversations societally. • Working on anti-stigma project at the airport – will continue conversation in DC conference with College Presidents addressing substance use disorders.
<p>Recovery Month</p>	<ul style="list-style-type: none"> • What is happening throughout Recovery Month in our area? How can Action Team members help spread the word about Recovery Month? 	<ul style="list-style-type: none"> • What is happening throughout Recovery Month in Chittenden County? <ul style="list-style-type: none"> •Step Into Action Recovery Walk <ul style="list-style-type: none"> • Family-friendly, all-day event • Gathers at First Unitarian Universalist Society at 9 AM, ends at same place with rally, raffle, Zumba, food & face painting. •Turning Point Center is distributing blue ribbons to raise awareness. • How can Action Team members help spread the word and participate? <ul style="list-style-type: none"> •Show up at the Recovery Walk and participate with your families/friends. •Still looking for volunteers to help out on the day of – shifts will start at 7AM. •Help with Community Engagement by hanging posters, making a social media posting or through word of mouth. • Ask Health Department/ADAP to help use Klout to generate interest in community/awareness events like Recovery Walk <ul style="list-style-type: none"> •Promote a destigmatizing message about what recovery is and what opportunities community members might have to provide support?
<p>Triage Team &</p>	<ul style="list-style-type: none"> • What's the latest update? 	<ul style="list-style-type: none"> • Triage Team

<p>VDH/ADAP CURES Grant</p>	<ul style="list-style-type: none"> • Potential role for Action Team 	<ul style="list-style-type: none"> ○ Jen Lyons-Horn, SAMHSA Navigator, is getting folks into treatment quickly by calling providers directly. System seems to be working smoothly. ○ All providers in the Hub & Spoke model are doing similar work and have formed connections. ○ Further messaging for public “who to call when I need help” still needed • VDH/ADAP CURES Grant <ul style="list-style-type: none"> ○ Ask ADAP to provide CURES grant update at next meeting. ○ Group felt that regular participation by an ADAP representative at the Action Team meeting is important. ○ Some members inquired about a visit from Cindy Thomas, Director of ADAP, attending a meeting in the future • Role for CCOA Action Team <ul style="list-style-type: none"> ○ Action Team could provide the messaging for the State in bringing awareness and taking the implementations of a grant to the next step. ○ Being clear about the need is and how broadly it needs to be addressed. ○ Brian Lowe from Mayor’s office is contact for legislative topics. ○ Ideas for Prevention Action Team: <ul style="list-style-type: none"> ▪ Messaging for children that are younger than 12 years old – friends have families that are using, v. few resources for parents to have that
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		<p>conversation.</p> <ul style="list-style-type: none"> ▪ School districts are similarly concerned. Have children in school who’s families are using, does not feel equipped in how to work with families.
<p>Sober Housing</p>	<ul style="list-style-type: none"> • Vermont Recovery Foundation • Sober Living Options for Moms/Children/Families 	<ul style="list-style-type: none"> • Vermont Recovery Foundation (VFOR) has received \$55k from ADAP – to be used to acquire a new property/location. <ul style="list-style-type: none"> ○ In process of identifying communities/areas of State in most need. ○ Currently having housing options in Waterbury, St. Albans and across Chittenden County. • Sober living options for Moms/Children/Families <ul style="list-style-type: none"> ○ VFOR has high demand for women’s only housing options. Currently looking to hire a female-identifying manager for house, should make offer within the next week. ○ FamilyStat initiative from City of Burlington. <ul style="list-style-type: none"> ▪ DCF would like to facilitate reunification with young children and mothers, but no where for reunification to take place. ▪ Kids are languishing for 6 mos – 1 year because of lack of sober housing. ▪ If reunification with children was on the table, would more people seek treatment?

<p>Safe Station Update</p>	<ul style="list-style-type: none"> • CommStat Team Update • Data Update 	<ul style="list-style-type: none"> ○ BFD concerned with individuals seeking treatment coming into station and receiving a call that needs response. What to do with individual then? ○ BPD pushing back on BFD that need an alternative and safe place for folks to seek treatment that isn't UVM Medical Center (Emergency Department) • Data Standpoint <ul style="list-style-type: none"> ○ BFD is perhaps the least important part of the model. Key to success of Safe Stations is the innerweb of partner agencies that fill existing gaps. ○ Currently, some of the biggest gaps facing Chittenden County: <ul style="list-style-type: none"> ▪ Residential treatment opportunities ▪ Sober Housing ▪ Transition between detox facility and treatment facility ▪ Volunteer drivers to transport those seeking treatment ▪ Treatment capacity?
<p>Wrap up & Agenda Items for Next Meeting</p>	<p style="text-align: center;"><i>Next meeting date- October 20th, 9:00 AM – 10:30 AM, Turning Point Center</i></p> <p>Action Items:</p> <ul style="list-style-type: none"> • Amanda – Update about Sanchit/ATP Retreat • Amy – Update about UVM/ResLife meeting, any National Guard follow-up? • Brandon/Ken – VT CURES Update <p>Agenda Items:</p> <ul style="list-style-type: none"> • UVM/CHCB partnering to propose hospital pilot program – OD arrivals receive 3 days of Bup after ATP assessment, with follow-up plan for access to treatment. • Safe Station Progress • Faith-based community role in transitional housing 	

