



## Healthy Connecticut 2020 State Health Improvement Plan

### Mental Health and Addiction Services ACTION Team Meeting AGENDA & NOTES

Date: February 1, 2017

Time: 1:00 – 3:00 p.m.

Location/Conference Call Number: DPH Conference Room K - 4<sup>th</sup> Floor

Attendees: Janet Storey, Cathy Sisco, Joan Ascheim, Chantelle Archer, Erica Garcia, Jason Cohen, John Frassinelli, Maureen McIntyre, Nydia Rios-Benitez, Susan Wolfe, Susan Logan, and Tiffany Reid

Agenda Items	Discussion	ACTION Items and person responsible
<b>Welcome</b>		
<p><b>Objective MHS 1 - Decrease by 5% the rate of mental health emergency department visits</b></p>	<p><b>Strategy: Increase knowledge and implementation of behavioral health screening by primary care providers for adults over 18 and for youth 12-17 yrs. of age.</b></p> <ul style="list-style-type: none"> <li>• Erica discussed her work on behavioral health education and the dissemination of health information. <b>(Action a)</b> <ul style="list-style-type: none"> <li>○ Person Centered Medical Homes (PCMH): serves over 700,000 people, focuses on dedicated primary care providers.</li> <li>○ Community Health Networks (CHNs) are exploring ways to reach providers with education.</li> <li>○ In December 2016, CHN held a 2-day conference for providers; experts were brought in (i.e. psychiatrists). There may be evaluations for follow-up.</li> <li>○ CAGE: is an assessment tool used to help providers identify concerns with patients.</li> <li>○ DSS will be conducting a third webinar on the integration of behavioral health into primary care setting.</li> </ul> </li> <li>• Joan questioned whether we should be thinking more about educating providers on behavioral health. <b>(Action b)</b></li> <li>• John discussed the <u>Juvenile Justice and Policy Committee</u> <b>(Action c)</b></li> </ul> <p>The youth service bureau coordinates with community-based providers. The police can refer to the bureau for screening</p>	<p>Erica will find out how many providers attended the CHN conference</p>

Agenda Items	Discussion	ACTION Items and person responsible
<p><b>Objective MHSA 5 - Reduce by 5% the non-medical use of pain relievers across the lifespan (12 and older)</b></p>	<p><b>Strategy: Educate and inform consumers regarding the risks and benefits of regulated products using strategies appropriate to culture, language, and literacy skills (e.g., prescription drug safety and side effects, public health alerts, general information about state and appropriate medication).</b></p> <ul style="list-style-type: none"> <li>• The drugfreeCT link was put on the website for the drop box location. <b>(Action c)</b></li> <li>• DCF is working on a project for substance-exposed infants</li> <li>• It was noted that it would be good to have the AARP link available on the Department of Aging website. <b>(Action f)</b></li> <li>• In regards to increasing awareness of prescription drug abuse and opioid overdose prevention among care givers of older adults, Maureen noted that AARP has engaged with caregivers, but their priority is not prescription medications. <b>(Action g)</b></li> <li>• There was discussion on the Harm Reduction Model, which is a clinic-based model; it's a high school educational curriculum looking to serve 35 kids.</li> </ul> <p><b>Strategy: Promote adoption of opioid prescribing guidelines, such as SAMHSA's in-person continuing education course, <i>Prescribing Opioids for Chronic Pain</i></b></p> <ul style="list-style-type: none"> <li>• There was discussion that there is no standardized training that is user friendly for providers.</li> </ul>	<p><b>Jason</b> will update on work being done with pharmacists in promoting proper medication storage to customers/patients when dispensing opioids. <b>(Action e)</b></p> <p><b>Maureen</b> will a link to the NPR article about a former attorney in Arizona who went to rehab because of an opioid addiction. <b>(Action f)</b></p> <p><b>Cathy</b> will send information on the National Takeback Event that will be held in April. <b>(Action i)</b></p> <p><b>Susan</b> will check on barriers to improve prescribing practices <b>(Action a)</b></p> <p><b>Susan, Tiffany, Joan, and Marianne</b> will look at how DPH activities can be integrated in MHSA.</p>
<p><b>Objective MHSA 8 - Increase by 5% trauma screening by primary care and behavioral partners</b></p>	<p><b>Strategy: Determine baseline level of trauma screening in primary care and behavioral health.</b></p> <ul style="list-style-type: none"> <li>• There was discussion on adding children screened by DCF.</li> <li>• It was mentioned that there are no codes for Husky for trauma screening.</li> </ul>	<p><b>Janet</b> will check with Tim on the number of kids that have been screened by primary care and behavioral health providers.</p>
<p><b>SHIP Dashboard</b></p>	<ul style="list-style-type: none"> <li>• There was discussion on adding childhood adverse event to the dashboard.</li> </ul>	
<p><b>Next Meeting:</b></p>	<p><b>May 3, 2017</b>  <b>410 Capitol Avenue, Hartford CT 06106</b>  <b>DPH Conference Room K-4<sup>th</sup> Floor</b>  <b>1:00pm-3:00pm</b></p>	