Alcohol and Drug Policy Council Prevention, Screening and Early Intervention Subcommittee

Meeting Summary

Meeting Date/Location:	Monday, January 22, 2018, 1:00PM-3:00PM- @ CT Valley Hospital, Page Hall, Room 213		
Participants in Attendance	In Attendance: M. Painter, S. Rao, A. Fulton, A. Sigler, I. Gillespie, J. Stonger, K. Opozda, S. Newgass, L. McPhue, S. Bouffard, C. Meredith, R. Marriott, A. Chin, A. Harris Guest: C. Volcy		
ΤΟΡΙϹ	DISCUSSION	ACTIONS / DECISIONS	
Welcome & Introductions	The meeting was convened at 1:00 PM and began with introductions and review and approval of minutes.	Minutes were approved with no revisions.	
Identification of Activities & Measures for Policy Recommendations	Review potential recommendations (see attachment) to determine if this sub-committee will move forward to full February ADPC as recommendation: Group to also ad barriers to recommendation. Policy Rec #1: mandate specific age appropriate, EBP opioid education in public schools k-12. Discussion: Barriers: 1) Cost associated with any mandate that is made (developing staff skills, training, identifying appropriate EBPs) 2) Varying level of commitment by school districts, especially below the high school age level. 169 school districts. 3) There is no catalogue of which schools do/do not do this. (HEAT presenters have data on who is having HEAT presentations.) Suggest that recommendation expand to include all prescription medication. Discussed implementation of recommendation: voluntary versus legislatively mandated (health education, safe climate legislation already exists), phased implementation (such as offer recommended curricula, guidance document). Consider workforce development of required training of certain staff (such as 1 CEU on substance use). NIDA principles has information on developmentally appropriate prevention messaging.	Recommendation to be made at February full ADPC council. This group to research and Identify suitable developmentally appropriate curricula for school systems. Reference NIDA, other sources for rationale. C. Meredith to revise recommendation document language to reflect discussion as appropriate.	
	Recommendation #1 and action steps approved.		

Policy Rec #2: Require the stocking and reporting of Naloxone use in schools. Discussion: guidance letter to superintendents has been drafted. Survey monkey went to colleges through Wheeler Clinic. Results: 85% have naloxone on campus, 50% have protocol in place for naloxone. Replicate for school districts, adding questions on workforce training (lots of available free training in CT).	 S. Newgass to get update on status of guidance letter, share with sub- committee for review. J. Stonger will send survey to sub-committee to review, then to principals upon receipt of list of all school principals from S. Newgass.
Recommendation #2 and action steps approved.	Identify reporting mechanism of naloxone use by these systems.
Policy Rec #3: Expand Narcan education and availability. Discussion: change language from Narcan to opioid antagonist. Identify and target priority high risk populations, such as formally incarcerated, in treatment for Opioid Use Disorder. Look to other states (NY has mobile prescribing to friends/families of those who are incarcerated).	R. Marriot has guidance document on alternative language to Narcan that he will share when he is able to. Generate list of high risk populations, and who has oversight of them. Share with all 3 other sub-
Approved with change of language for high risk populations, Narcan to change to naloxone or opioid antagonist.	committees for shared effort on this recommendation.
Policy Rec #4: Develop a policy for responders or healthcare providers to safely dispose of a person's opioids upon death.	C. Meredith & M. Painter
Discussion: Barrier to medication disposal is DEA which does not allow for anyone else than the authorized owner of the medication to possess someone's medication. Automatic refills may be problematic. "Cancel out Rx" is a program that can be sent directly to pharmacy to cancel	to bring request for answers to questions from Insurance commission, potential presentation.
medication, may be helpful. Some insurance plans authorize 90 day prescriptions.	Gather information on CT hospice practice.
Gather information to better inform appropriate recommendation.	Gather information on other state practice. Workgroup to continue to work on this and update this group.

	Policy Rec #5: Mandating blister/unit packaging.	
	Discussion: statewide workforce on this, there is an identified barrier of pharmacy storage regulations. Group considering pilot project. Recommendation to be removed from this sub-committees recommendations for February ADPC meeting.	
State & Local Opioid	-February ADPC meeting will have presentation on state agency	If aware of any campaigns,
Awareness	campaigns. Want to acknowledge other campaigns going on in	please forward any
Campaigns & Member Updates	CT. -Change the Script update: 2 trainings coming up, expect to see media on this soon. Statewide campaign effort continues. -DPH has delay in their campaign, will be coming out shortly. -State Targeted Response (STR) grant prescriber education- Regional Action Councils/local prevention councils sharing information. -DPH workgroup update at next meeting. -Law Enforcement conference on 4/5/18 will focus on opioids. Registration will open soon. -Connecticut Clearinghouse update: Opioid Education kits available for Law enforcement agencies. Healthy Campus Initiative 13 campuses funded specifically for opioid education, prevention and other activities. CROSS initiative funded 8 agencies (10 awards) for Alternative Peer Groups (APGs), Smart Recovery groups for youth, and Family & Friends groups. Opioid Education and Family Support Groups - 5 groups across the state. Remembrance quilt continues to be at various locations. HOLD the DATES: 5/14 and 5/19 for National Prevention Week events. (5/14 – Health and Wellness Fair and press conference at State Capitol; 5/19 - "Prevention and Health Promotion" night at the Hartford Yard Goats where 3 contest winning PSAs will be shown at the game). Governor's prevention partnership: submitting application for VISTA program -AmeriCorps Prevention effort -DMHAS STR grant Year 1: Narcan distribution. RACS available to do more training. 2,000 doses available statewide for those who cannot afford it. Call 2-1-1 for local referral information. -2 more locations have integrated EHR software with the PMP.	campaigns going on in CT to C. Meredith.
Next Monthly	th	
Meeting	February 26 th 1:00PM-3:00PM, CVH Page Hall, 217 (Next full ADPC meeting - February 20, 2018 10:00AM-12:00PM, Legislative Office Building - location TBD)	