

ADPC Treatment Sub-Committee Minutes 5/28/2020

In attendance: Lauren Siembab, Melissa Sienna, Charles Atkins, Craig Allen, Maria Coutant-Skinner, Mark Jenkins, Bill Halsey, Paige Fanolis, Dave Borzellino, Erin Leavitt-Smith, Melissa Weimer (guest, Yale physician), Kim Haugabook, Melanie Flaherty, Ann, Bill Halsey, Colleen Harrington, Kathy OConnor, Laurene Gomez, Harsha Duvi, Barbara Cass, Marcia DuFore

TOPIC	DISCUSSION	ACTION ITEMS
BARRIERS TO CARE		
<p>Transition of Hospital Patients on Medication Assisted Treatment to Nursing Homes Dr. Weimer, Yale New Haven Hospital</p>	<p>A number of hospital patients with substance dependence also have significant physical health conditions that require long-term ongoing care in a skilled nursing facility (SNF).</p> <p><u>Key barrier(s):</u> facilitating hospital discharge to SNFs or short-term rehab facilities for patients who may need IV antibiotics or other medical rehab for several weeks, and who are on methadone or buprenorphine. COVID has highlighted SNF access limitations, made the social vulnerabilities of patients with SUD more apparent. Some patients are unable to go to SNFs when they need these longer-term treatments due to the provision of MAT as part of their care (in particular methadone and Buprenorphine). DPH/DMHAS have been working with SNFs to accommodate these patients. For SNFs not providing MAT, currently methadone clinics are delivering take home bottles to SNFs, or patients are required to pick them up. There also may be confusion among various providers about the state and federal regulations governing MAT. Melissa has spoken to SNFs, DPH (Barbara Cass), etc., there are some ways to improve access for patients on MAT. There has been an existing workgroup working on this. Suggestion to employ a “navigator” to assist with transition from hospital to SNF. Willingness is varied among SNFs to take patients on methadone, and beds are limited.</p>	<p>Lauren will invite Melissa Weimer to upcoming meeting with DMHAS, DPH, and SNFs; and send her the SNF guidance document</p> <p>Consider resolution of this barrier as a recommendation to ADPC Full Council</p> <p>Provide clarity on state and federal MAT regulations</p>
COVID Updates	<p>Yale New Haven Hospital –surge of patients in severe alcohol withdrawal or relapse, reduction of harm reduction services like sterile needles distribution in New Haven resulting in an increase in infections</p> <p>Hartford Health Care– also seeing an increase in alcohol problems; the medical examiner’s data has shown an increase in overdose deaths so far in 2020, Fentanyl and Xylazine are included in overdose deaths</p> <p>Greater Hartford Harm Reduction Coalition – increased outreach efforts during COVID, anecdotally have seen a spike in ODs. Greater Hartford products are widely available, may be some supply shortage in Torrington area (may have temporarily created increase in alcohol and crack use). Going through a lot of syringes, running 2 shifts of needle exchange in Greater Hartford.</p> <p>Zero Suicide workgroup: increased acuity among young people and adults, reticence to access ED, people are not amenable to inpatient MH/addiction treatment – trying to make-do with a screen based IOP but</p>	

	engagement is difficult. People with high acuity cases may be slipping. 30% drop in EMS calls in two months (interpret cautiously due to a drop in EMS reporting compliance to poison control). Look like behavior trends due to fear of virus.	
OVERDOSE DATA	The sub-committee reviewed the recent overdose death data released by DPH and the Office of the Chief Medical Examiner. The data is showing an increase of opioid related deaths over last year at this time. Fentanyl continues to be high, over past couple of months exceeded 90% of deaths involving Fentanyl. Increase finding of Xylazine being present. Use of stimulus checks to support/continue substance use may be a factor.	See latest DPH overdose report; Continue to track on OCME opioid overdose death data
STATE OPIOID RESPONSE GRANT UPDATE	Lauren Siembab gave an update on the SOR grant that is due to end in September. DMHAS has submitted an application for continuation of this grant for potentially 2 more years. The 3 target populations for this grant are: active users of opioids, people involved with the criminal justice system and families. It's potentially a \$14m grant with many of the proposed initiatives being continuations from the current grant.	
DSS 1115 WAIVER OVERVIEW	Colleen Harrington did an overview of the waiver that is currently being discussed. The definition, role and rate for peer recovery specialists/coaches was requested to be part of the next conversation.	Put on agenda for next meeting.
TELEHEALTH REIMBURSEMENT	Providers are finding success with the use of telehealth in their various programs. An update on the status of this practice continuing will be forthcoming during the next meeting.	Put on agenda for next meeting.
UPCOMING MEETINGS	ADPC meeting: 6/16/20 (Virtual) Treatment subcommittee meeting: 6/25/20	