## MEETING MINUTES 10/28/2021

## Members Present:

Х	Craig Allen	Brynna Blackson	Х	John Hamilton	Х	Gabriela Krainer	Х	Sandrine Pirard
	Charles Atkins	Barbara Cass		Kim Hougabook		Chad McDonald		Hilary Felton-Reid
	Robyn Anderson	Wende Cooper	Х	Mark Jenkins		Kathleen O'Connor	Х	Maria Coutant-Skinner
	Maria Brereton	Deborah Daniel	Х	Heide Kapral	Х	Gerard O'Sullivan		Julienne Girard
	Carl Schiessl	Danielle Warren-Dias		Paige Fanolis	Х	John Simoncelli		Melissa Sienna
	Tara Kerner	David Borzellino		Kristie Scott	Х	Herb Boyd		Dan Rezende
Х	Luiza Barnat	Ali Kernan	X	Peter Canning	Х	Allyson Nadeau		

Guests are indicated by italics.

TOPIC	DISCUSSION	ACTION ITEMS
Welcome	Guest: Peter Canning	
Review of minutes	September minutes reviewed	Approved
Announcements	DMHAS is hosting a webinar series on CT response to opioid crisis Harm Reduction conference will take place on May 20, 2022	Informational
Mapping Opioid ODs	Naloxone reversals by EMS are meant to be reported to Poison Control; EMS has new database to track how many reports are being made. Some towns do better than others and compliance issues may need to be addressed by local health departments. Areas have been identified that are not doing that well. Compliance rates are increased when there is an organized community response.	Need for organized responses to make the data actionable. Invite Susan Logan for group to present this information to DPH.
MOUD: Kloxxado discussion continued	Kloxxado is an 8mg nasal spray formulation of Naloxone —Peter Canning of EMS joined to provide input on EMS perspective. Mr. Canning is not in in support of a high dose naloxone formulation. It has not been proven that higher doses are needed to reverse fentanyl overdoses and the high dose is more likely to cause unpleasant withdrawal symptoms. A high dose may also impact behavior between those who use as someone might be hesitant to use on a friend. There are harm reduction strategies that need to take place when a reversal takes place.	Data is not supporting the use of high dose naloxone at this time. Revisit in six months as data becomes available.
Medication for Alcohol Use Disorder Education Seminar	Continuing to plan. Speakers are secured. Topics will include COVID and AUD, spectrum of use; best practices including medication; panel discussion; flyer will come out soon and will be sent to this group and shared widely	Hold: Wed., December 8 <sup>th</sup> 1-4:30 pm
Peer Support Services in Treatment Settings	deferred	
Trauma Responsive System	Enhance work built by TAG initiative; discussed several speakers who could present in CT.	Recommendation to include speakers in Harm Reduction conference

	Liz Evans can present on safe injection sites, Gabor Mate presents on trauma work. Could Gabor Mate present in standalone training?	Should reach out to Women's Consortium and invite Collette to next meeting.
Mobile Services for Narcotic Treatment	deferred	
SHORTAGE OF NALOXONE	According to NGA presentation on Oct 18, there is a shortage of injectable naloxone; CT has not been using a lot of the intramuscular product	Informational
New Business	Workforce issue: discussed some of the stigma associated with being on methadone and ability to get recovery coaching jobs. Also, physicians are not able to be on MAT while practicing.  Keep gambling issues on our radar	Invite Jeremy Wampler to talk about gambling
UPCOMING MEETINGS	Treatment Subcommittee: November 18 <sup>th</sup> 1:00 - 2:30pm  ADPC Full Council: December 21 <sup>st</sup> , 10a-12p  Hold: December 8 <sup>th</sup> – 1 PM education session on Medication for Alcohol Use Disorder	