

MEETING MINUTES

01/27/2022

Members Present:

x	Craig Allen		Brynna Blackson	x	John Hamilton	x	Gabriela Krainer	x	Sandrine Pirard
x	Robyn Anderson		Barbara Cass		Kim Hougabook		Chad McDonald		Hilary Felton-Reid
	Herb Boyd		Wende Cooper	x	Mark Jenkins		Kathleen O'Connor		Dan Rezende
	Maria Brereton	x	Deborah Daniel	x	Heide Kapral	x	Gerard O'Sullivan		Julienne Girard
x	Carl Schiessl	x	Danielle Warren-Dias	x	Maria Coutant-Skinner		John Simoncelli	x	<i>Colette Anderson</i>
	Tara Kerner	x	David Borzellino		Kristie Scott	x	Melissa Sienna	x	<i>Cheri Bragg</i>
x	Luiza Barnat		Ally Kernan				Allyson Nadeau	x	<i>Chyrell Bellamy</i>
						x	<i>Jeremy Wampler</i>	X	<i>Yashira Pepin</i>

Guests are indicated by italics.

TOPIC	DISCUSSION	ACTION ITEMS
Welcome	Guests: Jeremy Wampler, Colette Anderson, Chyrell Bellamy, Cheri Bragg	
Review of minutes		Approved
Announcements	<ul style="list-style-type: none"> CHA Webinar will be re-broadcast on CT-N, review of 4 workforce reports DHMAS Town Hall on Monday on Peer Certification Process AUD Forum MAT Map for adolescents and adults 	
Recent School Events	<ul style="list-style-type: none"> <u>Gather data on access and barriers</u>: Has there been a gap analysis conducted recently to scan access to substance use services for adolescents. Revisit prior gap analysis studies and update it as needed. <u>Many strong prevention programs - Are they getting into all of the schools?</u> Are we taking all of the opportunities we have to screen youth for risky substance use? A lot of opportunities are not being fully utilized. Prevention and early intervention is where we want to be. <u>Lack of knowledge</u>: Not a good appreciation of the risks substances pose to developing brain. <u>Messaging and meeting kids where they're at</u> – no use/harm reduction – different messages for different audiences (receptivity) and communities. Cannabis is normalized, what should the messaging be to deter use? Lack of knowledge about addictive substances, and the pathway from adolescent use to early adulthood opioid addiction. Should develop best practices around the messaging to engage youth. Messaging must be informed by focus groups with youth to use their language. Have to keep messaging broad, not get too focused on any one drug/substance. 	<ul style="list-style-type: none"> Conduct/update adolescent SUD gap analysis/needs assessment Establish a Youth SUD Services Clearinghouse Recommend a broad rollout of A-SBIRT to screen and identify early (pediatricians, other community places, etc.). Include MH. Increase prescribers in pediatric practices. Naloxone messaging – DPH, DMHAS

	<ul style="list-style-type: none"> • <u>Difficult to find resources for children, no good Clearinghouse</u> where services are listed. DMHAS has done a better job of publishing information about services (residential bed site was mentioned) than the child system. Have we gone too far with in-home programming? Sometimes not a good match. Don't know where to send kids for outpatient substance use services (e.g., Milford area). • <u>Engage peers</u> to talk to youth. • <u>Programs need to fit the bigger/larger issues happening in the communities.</u> Must invest resources in things we know work. • <u>Concern about media coverage of fentanyl and the message it sends</u> – any exposure could be fatal. Public may be reticent to provide care during an OD if they worry that doing so could kill them. Mixed messages from credible sources about what kinds of exposures may be dangerous, and when the danger is present. Frame the message carefully. 	
Trauma Responsive System	Colette Anderson (Connecticut Women's Consortium) provided information about resources and trainings available for trauma treatment: TREM, Beyond Trauma, Seeking Safety, EMDR, etc. Trauma Toolkits also are available – systems change products for organizations. Bi-monthly Trauma and Gender learning collaborative and Trauma Matters newsletters are available/open to the public. Call for Proposals for Fall Trauma Conference is open now. Free trainings are available on You Tube.	.
Gambling Implications for OUD Providers	Jeremy Wampler, DMHAS Problem Gambling Services , provided an overview of their services. State is seeing a large influx of revenue from online/sports betting since recent legalization. Calls to Helpline have quadrupled since October, but there isn't a comparable increase in treatment admissions. Better Choice gambling treatment programs are available statewide. Treatment offered to both "affected persons" and the person with the gambling problem. Gambling co-occurs frequently with other conditions, DMHAS has an integration service to help agencies build capacity for gambling interventions when persons present for treatment for other problems. A lot of marketing for gambling on TV and radio, with few restrictions/regulations. Youth Media Project - educate groups of kids on gambling harms, they create PSAs to share in their communities with their peers – due in March 2022. During March the videos will be showcased.	<ul style="list-style-type: none"> • Recommend a Full Council presentation on this topic.
Peer Recovery Certification Process	DMHAS is rolling out the Peer Support Certification process and is soliciting feedback from a broad group of stakeholders such as providers, community members, and peer support staff to develop the credential. Next feedback session is on Monday 1/31. Will have an Advisory Committee to help with decision-making, and a Subject Matter Expert committee to develop a standardized test tool. Desire to collaborate with the Governor's Peer Support Task Force which is still forming.	
NEW BUSINESS	<u>Keep on future radar:</u> <ul style="list-style-type: none"> • Guidance on directing opioid settlement • MAT for alcohol use disorder: forum • Gambling implications for OUD providers 	

	<ul style="list-style-type: none"> Implementing peer support services in treatment settings under new Medicaid rules; define roles, family peer support recommendations; supervision issues, how are they going to be integrated into treatment setting. 	
UPCOMING MEETINGS	<p>Treatment Subcommittee: February 24, 1:00-2:30p</p> <p>ADPC Full Council: February 15, 10a-12p</p>	