

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

Meeting Summary

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| Meeting Date/Location: | Monday, March 20, 2017, 1-3PM- @ CT Valley Hospital, Page Hall, Room 217 | |
| Participants in Attendance | Present: J. Stonger, C. Meredith, R. Allen, K. Opozda, A. Chin, K. Granatek, S. Lang, S. Wolfe, S. Newgass Present by phone: N. Turner, I. Gillespie, M. Grossman, B. Brex, N. Rickles, R. Marriott | |
| TOPIC | DISCUSSION | ACTIONS / DECISIONS |
| Welcome & Introductions: | | |
| DMHAS Prevention Grants | <p><u>State Targeted Response to the Opioid Crisis (STR) Grant</u> The grant was submitted by DMHAS on February 17th and clarification and revisions have already been requested by SAMHSA. The proposed prevention activities fall into five strategies: public awareness, education and training, naloxone purchase and distribution; storage and disposal, and tracking and monitoring. DMHAS will work with its existing infrastructure to implement these activities. The anticipated start date for the grant is May 1st.</p> <p>Regarding the naloxone purchase and distribution, there was discussion around: 1) the distinction between the product and the kit. The latter includes a carry case and other inserts; 2) tracking the distribution and use of the nasal sprays with the existing DPH forms; and 3) the availability of a volume discount for the nasal spray. The STR grant proposes that distribution will occur through the RACs in conjunction with current distribution resources. At the appropriate time, Carol will pull together a subset of the group to develop and document the process for distribution.</p> <p><u>Partnership for Success (PFS) 2015</u> This grant funds 8 community coalitions across the state to utilize the Strategic Prevention Framework (SPF) planning model to reduce alcohol use rates among 12-20 year olds and opioid misuse rates among 12-25 year-olds. This 5-year grant began 10-01-15 and will end on 09-30-2020. The PSEI subcommittee is the oversight body for the grant and will provide advice and guidance during the quarterly presentations.</p> <p><u>Strategic Prevention Framework for Prescription Drugs (SPF Rx) Grant</u> A plan for using the first year of funding is still awaiting approval by SAMHSA. If approved funds will be used to support the EHR/PDMP integration pilots, prevention conferences and workshops, any expenses incurred from the redesign of the website and a consultant to develop a statewide opioid education strategy that can be customized to address population, culture and context. A federal meeting of grantees is scheduled for the first week of April.</p> | <p>Shawn shared the existing protocol for naloxone distribution developed by the DPH.</p> <p>Carol will include an update on the next agenda from the PFS project director and evaluator.</p> <p>Once the contract is in place, the education plan consultant will be required to get feedback from subcommittee members for input into the plan.</p> |

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| <p>Update on Recommendations</p> | <p><u>EHR Integration</u> DCP heard from 4 parties interested in working with Appriss to integrate their HER systems with the CPMRS. The CT Children’s Medical Center pilot is still in the testing phase which is the next step after signing on. Eventually the goal is to assess whether the integration improves compliance with the legislation that requires the review of a patient’s record in the PDMP prior to prescribing more than a 72-hour supply of a controlled substance.</p> <p><u>Website</u> A mock-up of the opioid website has been sent to the agency administering the ct.gov website. For now the focus is on opioid but will be expanded in the future to include other drugs.</p> <p><u>Naloxone availability for School Personnel – OD Prevention</u> The Bd. Of Regents are open to the idea of having Narcan but resistant to RAs administering it. There is a need to normalize having Narcan on hand since it is usually associated with people who use needles and not those prescribed opioids. There was discussion regarding having Narcan in schools and the barriers encountered.</p> <p><u>Core Competencies</u> There was discussion on the convenience sample being conducted of physicians at UCONN to assess their opinion and utilization of the CPMRS. Dr. Feillin from Yale has expressed an interest in the survey and the group discussed the possible low response rate if the 12 core competencies developed by Dr. Tobin were added to it.</p> | |
| <p>Other Updates</p> | <ul style="list-style-type: none"> • Rod Marriott is working on getting a physician with a standing order. There will be 2 naloxone prescribing events on March 28th in Hartford and April 8th in New Britain. This will allow pharmacists to prescribe in a group setting. • The CCAR Recovery coaches have been in Manchester for 3 weeks and are poised to go into Lawrence & Memorial and Hartford Healthcare. Patients consent before the coach is called and of the 20 people engaged, 13 went into detox. There are some snags that are being addressed. • Prevention week is May 15th through the 19th. • An Opioid Use Disorders Prevention and Recovery Conference is being planned for July 18-19th at the CT Hospital Association in Wallingford. There will be workshops focused on women and adolescents. • The quilting project is moving ahead with several groups across the state. Press coverage is scheduled when the squares are complete and displayed at an event. A display is planned for the Prevention Week Conference on May 15th. • Judith is on the training subcommittee of the Integrative Health Group and they are in agreement that lower level pain alternatives should be explored before considering prescriptions. They are discussing having insurance companies pay for these alternatives. • 5 Benzodiazepine conferences are planned through the RACs for the end of March to April. • Ingrid shared information on a pilot in Vermont that is looking at time managed Suboxone for reversals. Yale is also doing something similar. • Susan shared the OCME 2016 accidental overdose death data. • The Women’s Consortium completed their first SBIRT training and Alyse will follow up to see how they are using it. | |
| <p>Wrap-up & Next Steps</p> | <p>The meeting adjourned at 2:54PM. The next meeting is on April 17th from 1-3PM in Page Hall, room 217.</p> | |