



# MILITARY TASK FORCE

Governor's Commission on Alcohol and Drug Abuse, Prevention, Intervention, Treatment & Recovery

Workgroup Facilitators: Jessica Blais, Sue Brown

December 15, 2016

9:30 – 11:30

DHHS Brown Bldg Room 460

Meeting Call in Information provided by Accenture Federal Services:

Phone number: (571) 293-3079

Conference ID: 145768139

## Agenda/Notes

**Present:** Jess Blais (Accenture/ NHNG), Sue Brown (Riverbend), Amy Pepin (Center for Excellence), Chris Neiman (Manchester VAMC), Joe Moncher (DHHS), Andrew Breuder (MOAA Board of Directors), Chris Chant (Center for Excellence), Adelaide Murray (Community Health Institute), Bobby Graham (Congresswoman Kuster’s office), Nancy Triantafyllou (Proforce)

### Goals

The mission will be accomplished by addressing the following goals:

1. Introduce, strengthen and support the “Ask the Question” Campaign among Substance Use Treatment Providers;
2. Promote and advocate for Military Culture Trainings for Substance Use Treatment Providers;
3. Coordinate technical assistance supports to Substance Use Treatment Providers on becoming Tricare Providers and Veterans Choice providers; and
4. Participate and support the Governor’s Commission on Alcohol and Drug Abuse, Prevention, Treatment and Recovery - and the Task Force (subcommittees) - on programs and issues that support and strengthen the mission of the Joint Military Task Force.

Priority Area	Lead(s)	TF Tasks/Other	Updates
Welcome and Introductions	All		
Leadership changes with PTSD/TBI commission	Jessica Blais		
Old Business		Fact Sheet Approval	Edits: <ul style="list-style-type: none"> <li>•Inclusion of information regarding families- military wives</li> <li>•Map still needs updates related to MLADC substance abuse/ mental health services               <ol style="list-style-type: none"> <li>a. Information currently taken from treatment locator</li> </ol> </li> <li>•Request for VA representative approval regarding data on SUD diagnosis               <ol style="list-style-type: none"> <li>b. Concern about proliferation of SUD diagnosis for folks who have been on high dosage of opiates and react negatively to suggestion of titration</li> <li>c. Dependency vs addiction</li> <li>d. Over reporting vs. under reporting</li> <li>e. Pull data for TBI and PTSD to overlay with the SUD data</li> </ol> </li> </ul>

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			<ul style="list-style-type: none"> <li>•Inclusion of information related to higher risk for suicide related to SUD</li> <li>•National Guard Data: concerns that self-report is low---new data will be out in the spring               <ol style="list-style-type: none"> <li>a. Discussion of panel testing and limits on drugs that are tested for</li> <li>b. Suggestion to include explanation of URI- self report</li> <li>c. Question about relevance/pertinence of this information                   <ol style="list-style-type: none"> <li>i. Is there comparable data within the state of NH - Behavioral risk factors- CDC</li> </ol> </li> <li>d. Expand collection local data to better identify gaps</li> <li>e. Discussion of approval process and timeline-share draft at Commission</li> </ol> </li> <li>•Call to Action               <ol style="list-style-type: none"> <li>a. Bullet points? Is this too wordy? Does language get lost?</li> <li>b. Simplify/combine call to action and next steps</li> <li>c. Next Steps ...                   <ol style="list-style-type: none"> <li>i. To better serve military, veterans and service members</li> </ol> </li> </ol> </li> <li>•Review of draft goals and objectives</li> </ul>
<p>NH Center for Excellence to present data</p>		<p>PowerPoint developed for:</p> <p>State wide planning process general discussion</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/>Power point developed of Joint Military Task Force</li> <li><input type="checkbox"/>Data sets that relate to military families- Young Adult Survey- have you personally served and Youth Risk Survey- family members</li> <li><input type="checkbox"/>Compared data of youth who identified military family members with those without</li> <li>•Risk Rates higher for youth who have family members</li> <li>•Statistically significant findings</li> <li>•Demonstrably higher risk population</li> <li><input type="checkbox"/>YRB analysis should inform recommendations to the commission and the governor's strategic plan</li> </ul> <p>-----</p> <ul style="list-style-type: none"> <li><input type="checkbox"/>Plan to release 3yr plan in Oct 2017- Sept 2020               <ul style="list-style-type: none"> <li>- Focus on all substances</li> <li>- Highlight specific populations</li> </ul> </li> <li>•CFE spear heading effort               <ul style="list-style-type: none"> <li>- Commissions</li> <li>- Task Force</li> <li>a. Time to work on template through April</li> <li>b. Chairs will present templates (priorities/strategies suggestions) for plan in</li> </ul> </li> </ul>

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		<p>Draft in early September with release in October</p> <p>Membership List – not just distribution but active participants</p> <p>Data Dashboard for Governor’s Commission</p>	<p>early may</p> <p>c. Include both strategic recommendations for state wide needs that individual task force can’t accomplish (i.e. expansion of veteran behavioral tracks) and goals that will be accomplished by task force</p> <p>- Enforcement</p>
Opioid Crisis			<p>Overdose incidents (not deaths) have continued to rise, but rate is slowing</p> <p>Narcan administration is going down but most likely due to dissemination efforts and increased individual access to narcan (i.e narcan being administered prior to ems arrival)</p> <p>Collected data related to charges and diversion, understand consequences of incarceration</p> <p>20% of incarcerated individuals (only sorted by top charge) are drug related</p> <p>50% of DCYF cases had drug/alcohol related risk factors</p> <p>Prevalence of alcohol and prescription drug use have statistically significantly decreased- YRBS— correlates with prevention efforts</p>
Funding Request			
Wrap Up and What’s Next			

**Next Meeting: TBD**

**All meetings will be held in the DHHS Brown Building room 460 from 9:30-11:30.**

A call in number will be provided at the top of each agenda.