



HEALTHCARE TASK FORCE

Governor's Commission on Alcohol and other Drugs

Task Force Co-Chairs: Seddon Savage and Lindy Keller

Thursday, April 25, 2019

Meeting Minutes

Participants: Seddon Savage, Lindy Keller, Anna Ghosh, Hannah Lessels, Kate Frey, Rebecca Sky, Krystal Sieradzki, Rachel Eichenbaum, Peter Ames, Gerard Hevern, Cynthia Cohen, Jeanne Ryer
On the Phone: Leena Joshi, Andrea Meier, Kerry Nolte, Susan Latham

Agenda Item	Discussion	Action Steps
Welcome and Introductions	<ul style="list-style-type: none"> Seddon motioned to accept minutes from March. Minutes accepted. 	
Doorways Overview Russell Keene	<ul style="list-style-type: none"> The Doorways was formerly known as the Hub and Spoke model. Russell Keene distributed a map of the nine Doorways in New Hampshire. Doorways are located where no one has to travel more than one hour to reach one. Grant expires in September of 2020. 2-1-1 is included in the contract. There is a team at DHHS to manage the SOR Grant funding for the Doorways There are three major components of the model: 211, On-Call/Doorways, and Spokes/Community Providers. <ul style="list-style-type: none"> 211 <ul style="list-style-type: none"> 24/7 info and referral Multilingual Warm transfer to Doorways if needed Connection to emergency services if needed On-Call – Dartmouth-Hitchcock <ul style="list-style-type: none"> Crisis Stabilization Screening and immediate needs assessment Connection to emergency services when appropriate Connection to client’s chosen Doorway Doorways <ul style="list-style-type: none"> Screening and crisis stabilization Evaluation and care planning Facilitated referral 	<ul style="list-style-type: none"> Hannah will distribute the Doorway Activity Statistics. Please reach out to Russell Keene with any additional questions. Russell.Keene@dhhs.nh.gov

	<ul style="list-style-type: none"> ▪ Continuous recovery monitoring ▪ Administrative services: <ul style="list-style-type: none"> • Naloxone purchase and distribution • GPRA data collection • Flexible needs funds • Centralized database of SUD services • Needs assessment and service development ▪ Seven of the Doorways are connected with hospitals, not all are co-located with the hospital. ○ Spokes/Community providers <ul style="list-style-type: none"> ▪ Clinical and peer recovery support services ▪ Services to address social determinants of health: domestic violence, sexual violence, nutrition etc. • Process Flow <ul style="list-style-type: none"> ○ Access points <ul style="list-style-type: none"> ▪ 211, Dartmouth overnight, hospitals, primary care, self-referral, family and friends, community partners, probation and parole ○ Rapid Services <ul style="list-style-type: none"> ▪ Screening, clinical evaluation, individual and group therapy, assessment of needs and level of care, Naloxone distribution, client-centered referrals ○ Referral to services <ul style="list-style-type: none"> ▪ Mental health, substance use, primary care, housing and shelter, crisis services, MAT, PRSS, social services, employment • Russell Keene distributed a Statistical Summary of Doorways activity. <ul style="list-style-type: none"> ○ 1,409 individuals served since January 2019. These were not all opioid related visits. • Commonality among all Doorways and emphasis on local care are major goals. <ul style="list-style-type: none"> ○ Barriers the Doorways have encountered: <ul style="list-style-type: none"> ▪ Workforce capacity. Doorways continue to hire and recruit. ▪ Development of the referral network. Doorways continue to reach out to referral partners. • Doorways will be launching a public relations campaign in May called Anyone Anytime. 	
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	<ul style="list-style-type: none"> ○ The campaign launch will likely increase volume at Doorways. ● Questions <p>Q: There is a lot of emphasis on low barrier access to MAT, are Doorways looking to increase rapid access?</p> <p>A: Yes. We are also looking to expedite the process of referrals.</p> <ul style="list-style-type: none"> ▪ Task Force members expressed that MAT should be in the Rapid Services Column of the Hub and Spoke Flow graphic. <ul style="list-style-type: none"> ● Many of the Doorways are connected to hospitals that can provide rapid MAT induction. <p>Q: Hospitals may dispense buprenorphine in the ER without a waiver. Can the Board of Pharmacy be involved in educating providers about rapid ER induction?</p> <p>A: New Hampshire currently has six hospitals that do this. By July, NH will have 14 ERs that do this.</p> <p>Q: How many of these hospitals are also Doorways?</p> <p>A: Not known, but within six months, all Doorways will do this. Doorways team is planning to begin working with all NH hospitals around this issue.</p> <ul style="list-style-type: none"> ● Barriers include increasing ER providers' comfort in administering rapid MAT and clarifying their role in the care of OUD. ● Clear workflows around MAT administration in the ER would help with this process. <p>Yale has put out guidance/protocols around this.</p> <p>Q: Related to sustainability, Task Force members raised concerns that facilitated referral to SUD treatment and recovery services should be the function of all hospitals. Is the ultimate goal to keep these nine Doorways to serve this role or to have all hospitals serve this role?</p> <p>A: This is currently unclear as we are still in the early stages.</p> <p>Q: How does Naloxone distribution work?</p> <p>A: Nothing has changed except that Doorways are distributing to the Public Health Networks. If there are issues with this, please let the Doorways team know. All who have received it in the past should still be able to receive it.</p> <p>Q: The Seacoast has distributed around \$300,000 in past years, but the budget for</p>	
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	<p>Wentworth Douglas was only \$75,000. Are there plans to increase funding? A: Yes, the Doorways team will be requesting for an increase in funds for Naloxone and for Flexible Funds.</p> <ul style="list-style-type: none"> • SOR has awarded an additional \$11 million so far. <p>Q: What effect could the Doorways have in reducing the Naloxone copays for people with insurance? A: Co-pays are a problem even at the level of care and assessment at the Doorways. The Doorways team is working with MCOs to address this.</p> <p>Please reach out to Russell Keene with any additional questions.</p>	
Legislative/Policy Updates	<ul style="list-style-type: none"> • Redcap Bill HB 359: <ul style="list-style-type: none"> ○ The Medical Society has decided to remain silent due to conflicting opinions on the matter. <i>(note: A week subsequent to this meeting the NHMS elected to support the bill)</i> ○ NH Nurses Association has supported the bill. ○ Public Health has also chosen to remain silent. • Cannabis Bill HB 281: <ul style="list-style-type: none"> ○ The Concord Monitor has remained silent in reporting the concerns of healthcare professionals despite their significant presence at hearings though they have published OpEds & letters opposing cannabis from healthcare community. ○ Public Health has submitted written testimony to the legislation. ○ When it was discussed at the Governor’s Commission, Healthcare spoke in opposition to the bill, but this was also not reported. ○ MA had a public awareness campaign on the risks of young people using marijuana. ○ There is not a veto-proof majority, but it may not even pass the Senate. • SB 87 allowing DHHS to support syringe service programs <ul style="list-style-type: none"> ○ Moved to the House, hearing was on Tuesday. Looks like this will pass. 	
Priority List	<ul style="list-style-type: none"> • Task Force members reviewed the “Roles for Healthcare” handout. • Task Force members reviewed and clarified activities for the priority map. • PACT-MAT ECHO began last week. They will be able to offer quality improvement coaching for MAT implementation to about half the 18 sites. 	<ul style="list-style-type: none"> • We will post the priority map on the Healthcare Task Force webpage and ask the public for updates.

	<ul style="list-style-type: none"> ○ Practices involved must have at least one waived provider in order to participate. ○ 14 psych NP certificate students and family practice ARNP students who will graduate, ready to be waived. ● Prison MAT Project <ul style="list-style-type: none"> ○ Still live, has not been awarded yet. Will launch in the fall. This is for community corrections settings. Lead will be Josh Lee from NYU. ● The Department of Corrections (DOC) has received SOR money to initiate MAT inside prisons. Yesterday 15 medical practitioners from DOC attended waiver training. Receiving the waiver after the training, can be a wait of up to 8 weeks. <ul style="list-style-type: none"> ○ Will this include the women's' prison? Yes. 	<ul style="list-style-type: none"> ● Hannah will send the link to the Task Force. ● Next meeting we will review priority areas 3 and 4.
<p>Updates and Group Sharing</p>	<ul style="list-style-type: none"> ● Rebecca Sky: there are Communities of Practice through the American Hospital Association that are still open for enrollment. ● Harm Reduction Coalition (Kerry Nolte) <ul style="list-style-type: none"> ○ The coalition has received calls and referrals from Manchester saying that pharmacies in Manchester no longer sell syringes. Reports that HIV positive people are selling used syringes. ○ The coalition has moved forward with an outreach-based model for syringe services. We were asked to hold off but have moved forward with it anyways. We have registered and began Queen City Exchange with a call in number. ○ We do not have a place for scheduled outreach, but we will be doing one-on-one outreach. ○ Kerry Nolte will be reaching out for help with fundraising in the near future. 	<ul style="list-style-type: none"> ● Gerard Hevern will prepare talking points to discuss opioid prescribing for next meeting ● Kerry Nolte requests that Task Force members reach out to their networks in the Manchester Public Health Department or Government in order to show support for Syringe Services. ● Please provide patient feedback on syringe access. ● Rebecca will circulate information on the Communities of Practice offered through the AHA.

Next Meeting: June 27, 2019, 9:00am – 10:30 am 125 Airport Road, Concord.

Call-In Information: Dial in Number: Dial-in number (605) 313-4427 Access code 197873