



# OPIOID TASK FORCE

Governor's Commission on Alcohol and other Drugs

Task Force Chair: Seddon Savage

October 10, 2019

Meeting Minutes

<p>Welcome &amp; Introductions</p>	<p><b>Participants:</b> Jonathan Ballard, James Boffetti, Helen Pervanas, Alex Casale, Seddon Savage, Paula Mattis, Rekha Sreedhara, Alyssa Carlisle, Joe Hannon, Jacqui Baker, Jeffrey Stewart, Jennifer Lynn  <b>By Phone:</b> Andrea Meier, Ryan Nix, Kathy Bizarro</p>	
Agenda Item	Discussion	Action Steps
<p>Naloxone Training by Project FIRST  <i>Jeffrey Stewart, Project FIRST Director, Concord Fire Department</i></p>	<ul style="list-style-type: none"> <li>Project FIRST conducted a naloxone training for Task Force members including JSI staff and distributed naloxone kits.</li> </ul>	<ul style="list-style-type: none"> <li>Naloxone kits for attendees who joined training by phone may be picked up from CHI.</li> </ul>
<p>Presentation on Harm Reduction Services in Kentucky  <i>Jonathan Ballard, Chief Medical Officer, NH DHHS</i></p>	<ul style="list-style-type: none"> <li>Jonathan Ballard presented on his experiences as the KY state epidemiologist. He reviewed the KY state statistics of overdose deaths and shared the progress of the KY Syringe Service Program, particularly in rural counties. Key lessons learned from their program: 1. having a uniform network to engage in services is helpful; KY has numerous counties, each with a public health office; they used these as the SSP sites/infrastructures. 2. Having well know local community members involved was important. 3. Biggest selling point was the opportunity to engage people in treatment over time.</li> <li>Task Force members discussed a SSP approach for NH. The State funds harm reduction programs, but SSPs must be operated by a non-profit. The Task Force has previously looked at two models in NH (HIV Resource Center SSPs in the Upper Valley and NH Harm Reduction Coalition SSPs on the Seacoast and in Manchester).</li> <li>Jeffrey Stewart suggested working with the EMS as that is a 501c3 that is located in every county and has training on handling sharps and making referrals. Potential partnerships could be initiated by attending a NH EMS Board meeting.</li> <li>Task Force members decided to facilitate a meeting on the topic. Potential attendees are Justin Romanello (Bureau Chief) or Vicki Blanchard (Captain, Clinical Systems) at the Bureau of EMS, Beth Daly (Chief) at the DHHS Bureau of Infectious Disease Control, Joe Hannon from the Harm Reduction Coalition, and Don Hunter at the Doorways.</li> </ul>	<ul style="list-style-type: none"> <li>Task Force to facilitate a meeting with BIDC, Bureau of EMS, and Doorways.</li> </ul>
<p>NH Drug Monitoring Initiative – August 2019</p>	<ul style="list-style-type: none"> <li>Questions on the July DMI were answered by a representative from the DMI (Ryan Nix):               <ul style="list-style-type: none"> <li>1. On pages 2 and 3, the task force recommends using a dotted line to connect to</li> </ul> </li> </ul>	



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	<p>previous years' data since data for 2019 are incomplete.</p> <ul style="list-style-type: none"> <li>▪ Response/discussion: Ryan stated that the dotted line is the mandatory formatting on the graph, but this leads to confusion as it suggests a downward trend. Need to add an asterisk on Page 2 line-graph to explain this more clearly. Will remove the line for projected data and only use data points.</li> <li>○ 2. On page 4, why isn't cannabis included in the table? Is this a tested substance?             <ul style="list-style-type: none"> <li>▪ Response/discussion: Cannabis is not included in this data. Stopped testing cannabis if it is not a violation level offense. Discussion of whether cannabis should be included on graph on page 4 of report. Ryan will send the raw data on cannabis to the task force to review at next meeting.</li> </ul> </li> <li>○ 3. On page 10, for the opioid use visits in emergency departments data, why did Sullivan County's data increase from 0.91 in May 2019 to 8.68 in June 2019? Is this discrepancy related to the data reporting or was there an actual increase in the number of emergency department visits related to opioid use?             <ul style="list-style-type: none"> <li>▪ Response/discussion: Valley Hospital started reporting ICD-10 data in April leading to this increase in the number of visits.</li> </ul> </li> <li>● Discussion on the August DMI report included:             <ul style="list-style-type: none"> <li>○ Ryan shared that on the table on page 13 of the report, in the future they will include data on where people are traveling from to seek services at the Safe stations in Manchester and Nashua.</li> </ul> </li> </ul>	<p>Ryan to report back on rationale for Cannabis exclusion</p>
<p>Review September Meeting Minutes</p>	<ul style="list-style-type: none"> <li>● Review of September meeting minutes was deferred to November meeting.</li> </ul>	
<p>Other Business &amp; Sector Updates</p>	<ul style="list-style-type: none"> <li>● No updates were shared.</li> </ul>	

**Next Meeting:** November 14, 2019 – 9:00AM-10:30AM // Community Health Institute, 501 South Street, 2nd Floor, Bow, NH

**Call-In Information:** Call-In Number: 719-284-5949 // Pin: 55982