



# TREATMENT TASK FORCE

## Governor's Commission on Alcohol and other Drugs

Task Force Co-Chairs: *Stephanie Savard & Shanna Large-Reusch*

November 6, 2020

### Meeting Minutes

<p><b>Welcome &amp; Introductions</b></p>	<p><b>Participating Members:</b> Steve Noyes, Jake Berry, Sara Cleveland, Shanna Large-Reusch, Stephanie Savard, Dianne Pepin Castrucci, Suzanne Thistle, Emily Robbins, Susan Latham, Monica Edgar, Danni Bultemeier, Elizabeth Zarka, David Mara  <b>Participating Non-Members:</b> Paul Kiernan, Amy Daniels, Steve Wade, Gina Redford, Susan McKeown, Joe Lindbeck, Kent Thompson, Donna Harbison, Krystal Sieradzki, Tonoka Batts-Settles, Brooke Holton, Teddy Rosenbluth, Mary Beth LaValley, Dawna Jones, John Karikas</p>	
Agenda Item	Discussion	Action Steps
<p><b>Review of September Minutes</b></p>	<ul style="list-style-type: none"> <li>• Dianne Castrucci recommended that the September minutes be edited to clearly state that a Task Force member that was present for role call was not present for the vote on involuntary civil commitment.</li> <li>• Shanna Large-Reusch motioned to approve the minutes with Dianne’s edit. Sara Cleveland seconded the motion.</li> <li>• The treatment task force voted unanimously to approve the September minutes with Dianne’s edit.</li> </ul>	<ul style="list-style-type: none"> <li>• CHI will post the edited minutes on the Center’s website.</li> </ul>
<p><b>New Business &amp; Announcements</b></p>	<ul style="list-style-type: none"> <li>• Chair Stephanie Savard asked Shanna Large-Reusch to be the Treatment Task Force Co-Chair. Shanna accepted. This designation was approved by Patrick Tufts.</li> <li>• Stephanie was asked on behalf of the Treatment Task Force to create a 10 minute presentation for the NHADACA annual meeting on behalf of the Treatment Task Force. The following topics were suggested by Task Force members as potential areas to cover:             <ul style="list-style-type: none"> <li>○ The quick transition to telehealth and the challenges that emerged in response to COVID-19</li> <li>○ Differences in treatment needs and challenges for different regions of the state</li> <li>○ Workforce exhaustion</li> <li>○ Lessons learned and strategies for 2021</li> <li>○ Impact of COVID-19 on recovery housing</li> <li>○ Impact of COVID-19 on areas with low socio-economic status</li> <li>○ Increase in methamphetamine usage</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Stephanie will take the listed topics into consideration when creating the presentation for the NHADACA annual meeting.</li> </ul>

<p><b>Presentation from Krystal Sieradzki and Steve Wade from the Brain Injury Association of New Hampshire</b></p>	<ul style="list-style-type: none"> <li>○ Involuntary civil commitment</li> <li>● The Brain Injury Association of New Hampshire has collaborated with experts across the country to understand how detected and undetected anoxic and hypoxic brain injuries can lead to difficulties for patients in substance use treatment.</li> <li>● A Brain Injury Task Force was created by the commissioner of the New Hampshire Department of Health and Human Services. Actionable items that have been completed or are in development by the task force include creating a community of practice to train providers on best practices for addressing treatment needs for patients with traumatic brain injuries, training and education for first responders, screening assessments, raising public awareness, providing more support for families and communities dealing with the issue, and distributing overdose kits that include information about traumatic brain injuries.</li> </ul>	<ul style="list-style-type: none"> <li>● Treatment Task Force members are encouraged to reach out to Krystal (<a href="mailto:krystal@bianh.org">krystal@bianh.org</a>), Steve (<a href="mailto:steve@bianh.org">steve@bianh.org</a>), or Director of Programs and Services Erin Hall (<a href="mailto:erin@bianh.org">erin@bianh.org</a>) if they have questions.</li> </ul>
<p><b>State Plan and Specific Treatment Task Force Priorities</b></p>	<ul style="list-style-type: none"> <li>● The Task Force is prioritizing supporting practice change to integrate SUD services with mental health services in general healthcare settings including emergency. The Task Force brainstormed the following action items to support this strategy: <ul style="list-style-type: none"> <li>○ Helping providers see themselves as part of a larger healthcare system instead of just as an individual provider.</li> <li>○ Providing more services in the Concord region.</li> <li>○ Conducting a survey to better understand inpatient and SUD services provided by hospitals.</li> <li>○ Conducting a survey to identify gaps in subprovider services.</li> <li>○ Identifying experts in SUD and healthcare to provide consultations in the healthcare setting.</li> <li>○ Collaborating with the Healthcare Task Force.</li> </ul> </li> <li>● The Task Force is prioritizing increasing specialized treatment services for specific populations (veterans, youth, pregnant/parenting women and families). The Task Force brainstormed the following action items to support this strategy: <ul style="list-style-type: none"> <li>○ Collaborating with the Perinatal Task Force to identify ways to increase knowledge for SUD providers about safe care plans for parenting or pregnant women.</li> <li>○ Encouraging treatment providers to advocate for family planning.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>● The Treatment Task Force will prioritize some of these action items at the January 2021 Task Force Meeting.</li> </ul>

	<ul style="list-style-type: none"> <li>○ Pushing for increased collaboration between Certified Recovery Support Workers, SUD providers, and homeless shelters.</li> <li>○ Supporting schools in increasing SBIRT training.</li> <li>○ Conducting research on how to deliver culturally sensitive care.</li> <li>○ Supporting providers in delivering care for younger and older-aged patients as well as patients with issues that are compounded with isolation, medication misuse, trauma, and more.</li> <li>○ Promoting the use of ASAM level 3.3 for brain injuries and developmental disorders.</li> <li>○ Promoting prevention tactics to break the cycle of children being affected by family members with SUD.</li> <li>● The Task Force is prioritizing providing training to all providers and service professionals related to Trauma informed best practices and harm reduction strategies. The Task Force brainstormed the following action items to support this strategy: <ul style="list-style-type: none"> <li>○ Creating a fact sheet that covers harm reduction, trauma, and SAMHSA-recognized best practices.</li> <li>○ Creating trainings on how to use ACES data in providers' communities.</li> <li>○ Collaborating with the Opioid Task Force to broaden needle exchange programs.</li> <li>○ Collaborating with the healthcare task force to identify ways to broaden understanding of harm reduction strategies.</li> <li>○ Ensuring the training that future professionals are getting at colleges and universities meets the needs that New Hampshire faces.</li> </ul> </li> </ul>	
<b>Policy Updates</b>	<ul style="list-style-type: none"> <li>● Jake Barry reminded the Task Force that the results of the 2020 federal and state elections may lead to Task Force members needing to change their advocacy approach. There will be financial limitations due to COVID-19, and there may be the need to defend Medicaid reimbursement increases, investments in prevention and treatment infrastructure, and workforce development.</li> </ul>	
<b>Closing Remarks</b>	<ul style="list-style-type: none"> <li>● Shanna Large-Reusch motioned to adjourn. Suzanne Thistle seconded the motion.</li> <li>● The Treatment Task Force voted unanimously to adjourn.</li> </ul>	

**Next Meeting:** Friday January 22, 2021, 9am-11am (Virtually); **Zoom Information:** <https://jsi.zoom.us/j/819262402>;

**Call-In Information:** 646-558-8656; **Meeting ID:** 946 1611 3705; **Passcode:** 989557