

Durham Joins Together to Save Lives Task Force

Mental Health Treatment Committee

Minutes

February 9, 2021

Attendees: Helen Tripp, Donna Rosser, Katie Mallett (phone), Marc Strange, Carlyle Johnson, Larry Greenblatt, Catherine Sanford, Major Elijah Bazemore, Lacie Scofield, Rod Jenkins, Tremaine Sawyer, Gudrun Parmer, Amy O'Regan, Karen Verhaeghe, Stephanie Eucker, Joy Brunson-Nsubuga, Nathania Allen, Susan Kornett, Cindy Haynes

The group convened, Cindy welcomed everyone and began introductions.

Cindy informed the group that Donna said she was unable to capture all of the minutes and it is hard for her to facilitate the meeting and take minutes. So she asked the group to please review to see if everything was captured correctly, or if something was misspoken, please let her know. A correction noted for "Stepping Up Initiative". While reviewing the minutes Rodney Jenkins, Health Director asked for permission to speak to the group.

Cindy granted permission. Mr. Jenkins stated it important as Health Director to say members of his team walked away from last meeting feeling dejected and borderline disrespected. He stated this committee is not a part of their regular duties and they are volunteering because they care for the community. As Director Jenkins reviewed meeting minutes, he saw things he found unsavory. Jenkins wanted to make it known for the record he was briefed on committee activities several months into a pandemic. There was staff who were dedicated to this endeavor previously; however, participation waned due to lack of direction. Director Jenkins met privately with Ms. Haynes who brought him up to speed on all activities.

Since then, they have been in contact even when he was unable to attend meetings and thought it best to let her know why. Jenkins stated Public Health is not holding up any of the committee's activities but the committee needs to provide Public Health with what is needed from them. He informed the group that Public Health is more than happy to partner on things committee needs them to do. As leader, Mr. Jenkins felt it important to speak out when team members collectively express concerns about their treatment during meetings. Public Health is here to help but cannot ignore that there is a global pandemic that requires their focus now.

Cindy thanked Mr. Jenkins for making her aware of concerns. Offered apology to anyone offended during the last meeting. Ms. Haynes informed Mr. Jenkins and his team that if they had a concern, as the Chair of this committee, he and the team should have reached out to her with a concern and allowed her the opportunity to facilitate a process to resolve the issue outside of this meeting. She stated that she has never given any member of this committee the impression that she is not approachable and if there was a problem it should have come to her first. Ms. Haynes also informed Mr. Jenkins and team that she has always acknowledged that we are in the midst of a pandemic and has thanked Mr. Jenkins for his services to keep the Durham community safe. She further explained that this is a phenomenal group that has done an

amazing job and has always worked well together. The committee has never had any issues. As Chair of the committee, she would like to have had the opportunity to discuss concerns with the Public Health staff involved. Cindy said she thinks the committee can continue to work well together due to combined interest in serving the community. The point of meetings are not to make anyone feel uncomfortable but to find the best way to serve members of our community living with substance use disorder. Mr. Jenkins said based on feedback from several, Public Health is willing to assist and wants to know exactly what the committee needs them to do—what the expectations are.

Cindy said she and Lindsey had some discussion about expectations for Public Health and she is getting more information from group to respond to question. She asked Carlyle and Major Bazemore to chime in if needed. We are thinking about how Public Health can support funding for medical component of Detention Center MAT program and we continue to look at other funding opportunities as well.

Major Bazemore addressed Mr. Jenkins and said there is a need for collaboration and partnership, which is what committee is working toward. He understands we are in a global pandemic but it is important to continue this work to prevent overdoses in community. Major continued to say if he has offended anyone in Public Health, he sincerely apologizes for that.

Carlyle mentioned the funding agreement for Sheriff's office has now gone back to Public Health to submit. Mr. Jenkins informed the group that the agreement can't be done by the Sheriff's office it was sent back to Alliance attorney to go to the Sheriff's budget. MAT I and MAT II have been included in the RFP. The contract RFP is in legal for vetting. Because the funding is >\$100,000 and it's not a part of an existing contract it had to go back. Everything that the Sheriff asked for has been included. Carlyle stated that Alliance doesn't have the information to get the budget established, should we have a side meeting to discuss. Major Bazemore will schedule a meeting to include Public Health and the Sheriff's office along with their finance officers work this out. Carlyle added that the Durham County Commissioners are in favor of adding MAT services as a standard of care.

Cindy said reason for discussing sustainability to identify what we need and from whom; followed by action steps moving forward to address the task at hand, which is to serve the community.

Director Jenkins apologized for taking up time during meeting but felt necessary for sake of his team to bring matter to forefront.

Cindy restated moving forward if there is an issue and/or concern, that information should come to her as the Chair so that she can facilitate a process to resolve the issue outside of this meeting.

Cindy transitioned the group to updates. She informed the group that she had not acted on the request for the name change of the committee, as the focus with Commissioners was on the attending the work session and she forgot to discuss the request. Cindy said that she will be sure to reach out to Wendy and Wanda for their thoughts regarding the change.

The minutes were not approved.

Alliance Health

Carlyle reported that Alliance continues to receive additional funding. State Opioid Response funds called SOR-1 and SOR-2, which overlap. At both Federal and State level, increase in opioid overdose and stimulant use. Alliance will receive additional funding to treat stimulant use disorders. Ties in with original plan for Durham to address substance use and not opioids alone. Also mentioned State transformation in which most Medicaid patients moving to standard plan. Alliance hoping to become tailored plan which involves management of pharmacy medical and behavioral health for members. State in process of expanding array of SUD services in community. Carlyle willing to provide updates as they become available. Stephanie mentioned that many patients seen in the Emergency Department have stimulant use disorders and wonders if they can tie this in with peer support, with extra funding to support it as another intervention. Also thinks outpatient options would be good.

Carlyle said his hope is to move system toward less categorical funding. Because many patients have co-occurring mental illness and using more than one substance. He thinks peer support is good option.

Kay said looking at national data, Carlyle right on target--harm reduction wise looking at polysubstance use and many in harm-reduction community pressing to make sure not to focus singularly on opioids but to recognize, acknowledge and support what is occurring. Thinks having peers who are aware of these issues in the community is a good way to start.

Cindy added that although the initial charge from NCACC was to address opioids, Durham's Leadership Forum included a focus on all substances.

Karen asked what is categorized as a stimulants.

Carlyle replied from state's perspective, looked at DSM-5 and said any drugs falling in this category included.

Kays said she thinks focus should be broader to include benzodiazepines and alcohol and pointed out synergistic effects as problematic.

Duke ED Peer Support Services

Susan excited that they have been able to meet with Stephanie and team to discuss overcoming barriers related to COVID-19 and meet patients face-to-face while in hospital. Recording short videos that Duke can play for patients who can benefit from PSS. Offering services to patients at various levels. Can offer services from harm reduction to residential treatment.

DRRC OBOT

Cindy asked Joy to let Dr. Browning know that he is missed. Joy reported that Dr. Browning has taken on more national CMO responsibilities, but she will let him know. Susan reported the OBOT program is growing. We are still able to work with EMS who is doing great job with opioid response. Excited that everything taking off with Big Duke and Duke Regional and that collaboration is moving along. Joy commended Susan because in the short time since taking over the OBOT program at end of September, there has been significant growth to justify hiring

another clinician. Very happy with the progress of the program. Cindy extended congratulations to Susan. Joy announced that RI has taken notice of Durham's work with MAT projects and OBOT and expanded these services to other facilities in NC, to their Delaware sites and to Louisiana site coming online this week.

Program Coordinator (CLC Grant)

Lacie asked if Susan would be interested in sharing anecdotes. Susan said Brittany could share better anecdotes. Susan excited that one of their guests is serving as panelist with lived experience for CLC Provider Training Initiative. This individual is formerly incarcerated and doing excellent job of rebuilding life. We also have guests who are unhoused and we are working to get them more stable housing. We are still continuing to engage in services (peer support and OBOT). It's nice to know that people are getting better. At last meeting, people expressed interest in stories about CLC program and Lacie asked Brittany and Susan to share. Brittany out sick and unable to attend today but may be able to share at next meeting. Susan added Brittany has wonderful way of communicating how work is done and can provide more detail in heartwarming way.

Karen asked if Community Paramedics program still able to operate despite pandemic.

Helen responded that the program has not been suspended at all and that the partnership with Community Paramedics and peer navigators has been successful. Cindy added that Helen and the Community Paramedics have been with us from the very beginning. We are grateful for Helen and her team's work in serving our community.

Lacie screen shared table and reported on number of contacts made during cold calls with Community Paramedics and peer navigator. She also reported on referrals from Duke Main to include individuals having experienced overdose and those diagnosed with SUD. Walk-ins to DRRC, to include referrals to the Crisis Unit from Duke Regional are included in report as well. In total, 12 participants and 10 enrollees. No referrals from Detention Center. Lacie said she was told that Detention Center beginning induction phase of MAT program. Hopes that they will get referrals once program up and running. Collecting data on all program participants. Initially, data plan focused on enrollees, whether started on MAT and continuing with DRRC. Ryan and Krissi developed a new survey tool to collect data on all participants and all services accessed through peer navigators. Lacie screen shared new survey launched this month. Also launching survey to collect qualitative data. Krissi will administer survey to all enrollees.

Cindy asked if Lacie could share the documents with group.

Lacie will send out the surveys and the summary of participants to date. Lacie reported that contract with Dr. Wanda Boone completed. Wanda is working on Substance use Disorder Resource Guide. Anyone wanting to assist with it should reach out to Wanda via email. Lacie is still revising the Housing table shared at last meeting. Gudrun and Demetrius have sent additional resources to add. Others are welcome to do so.

Donna provided update on plans for the Duke Hospital Provider Training. This is a multi-disciplinary training for CME credit. The training will include 3-sessions totaling 90-minutes and including both didactic and panel discussion. The training will be offered as live webinar during last 3 weeks in May 2021 and offered as a recorded option. The training facilitator is Andrea

Winkler, with Duke AHEC. Carlyle is seeking funding for the training through a contract between Alliance and Southern Regional AHEC.

Major Bazemore offer point of correction. Phase 2 MAT (induction) has not started in Detention Center. It's not projected to start before July 1, 2021. Lacie apologized for the error.

Detention Center MAT

Major Bazemore reported that related to strategic plan, excited about meeting with Board of County Commissioners (BOCC) to inform them about work of this committee to get MAT program up and running in Detention Center. Phase 1 data: To date, 53 Suboxone, 35 Methadone for total of 88 participants. 53-Suboxone (36-male, 17-female) and 6 having returned to custody. Of 35-Methadone (24-male, 11-female) and 2 having returned to custody. As of Feb 8, 2-Suboxone users (1-male, 1-female) in custody. For Phase 2 data: During intake process, 14 identified as eligible (12-male, 2-female).

Next steps are:

- Provide Public Health with what is needed from them to support efforts
- Major Bazemore will set up meeting with Public Health and Sheriff's office and the finance team to resolve contract concerns
- Lacie to share referrals and survey information presented to the group
- Cindy to follow up with DJT Task Force Chairs, Commissioner Wendy Jacobs and Dr. Wanda Boone about name change of the committee
- Prepare presentation for the March 1st County Commissioner's Work Session agenda

Please note our meeting will convene from **3:00 PM - 4:30 PM** Virtually.

***Our next committee meeting is scheduled March 9, 2021 at 3:00 PM via WebEx and phone.**