

Durham Joins Together to Save Lives Task Force

Mental Health Treatment Committee

Minutes

July 14, 2020

Attendees: Crissi Rainer, Major Bazemore, Helen Tripp, Lacie Scofield, Marc Strange, Rasheeka Fogg, Joy Brunson-Nsubuga, Ryan Bell, Stephanie Eucker, Carlyle Johnson, Kay Sanford, Amy O'Regan, Tremaine Sawyer, Gudrun Parmer, Donna Rosser, Jesse Battle, Nathania Allen, Cindy Haynes

The group convened, Cindy welcomed everyone and began introductions.

The minutes were approved as submitted.

Alliance Health

Carlyle reported he is monitoring the COVID impact on provider network, i.e. increase in the rate of uninsured and an increased demand for services without a corresponding increase in funding. He is waiting on data to support this trend). They are also working on the budget for the new fiscal year and sources of funding (State and Federal). Carlyle is looking as well for data to support an increase in overdose rates.

Comment (Lacie/Cindy): NC Injury and Violence Prevention Branch has published documentation of an increase in rates of overdose.

Question (Major Bazemore): Is there an update concerning the request for the extension mentioned in the previous meeting?

Response (Carlyle): The state is required to submit a written request to SAMSA by the end of the month and is asking for additional information. Carlyle will work on providing them with this information this afternoon. He believes the extension will likely be granted, but they will not have an answer anytime soon.

Comment (Kay): Emphasized the importance of keeping the increase in substance use and misuse, overdose deaths (NC and National) and the strong correlation with an increase in suicide highlighted by the NC IVP Branch on the committee's radar.

Carlyle also mentioned concerns about the financial viability of providers and whether there will be a change in accessibility. Although there have been flexibilities for providers using telehealth, there are still challenges. There is also a digital divide that exposes these challenges in that not all providers have access to telehealth equipment.

Duke ED Peer Support Services

Joy reported unfortunately, there has been a setback in staffing due to the loss of Peer Support Specialist, Christine, who passed away 2-weeks ago. The RRC is still processing the loss and will need to recruit for the position. There has been an increase in calls to go out with EMS Para-Medicine. There were 15 calls for the month of June, which is the most calls the program has ever had. The program is on hold for now.

DRRC OBOT

Joy reported that Rasheeka is working with internal staff on producing a flyer featuring updated services to include outpatient induction of buprenorphine and efforts to make the OBOT a stand-alone service.

Program Coordinator (CLC Grant)

Lacie reported she has produced a concise description of the CLC program that is geared toward health professionals and new partners to the program. The document is a good summary of what the program offers. Lacie acknowledged the significance of Christine's passing, in that it was unexpected and a shock. Christine was also the only fulltime peer support. Herb, the other peer support, is part time. There is a pause on new referrals to the program until Christine's position is filled.

The state has sent the progress report survey, which is 40 pages/80 questions. Lacie, Ryan and Crissi have made plans for responding to the survey and providing the state with a synopsis of the program. The survey includes a number of questions on the justice involved component of the program. As Joy mentioned, our collaboration with EMS is going well. Referrals from Phil and Christine's efforts have resulted in a total of 6 CLC program participants and 1 enrollee. The enrollee recently took the 3-month survey and reported positive results from peer support services and MAT.

This past month, Lacie has been working to get the justice involved component of the CLC program started. She has met with Major Bazemore (Durham Detention), Mark Strange (CJRC), and Tremaine Sawyer (STAR Program). Initially, the plan was to introduce the peers to meet with people prior to their release and inside the Detention Center. However, COVID-19 restrictions make this impossible. Tremaine suggested posting flyers, which include contact information for the peer support specialists and the services they offer, in high-traffic areas in the Detention Center.

The flyer has been created and sent to the expert on justice-involved populations with the state, who gave good advice/feedback for improving the flyer. The flyer is in the approval process with the Department of Public Health. Tremaine also suggested working with the Local Re-entry Council. Case Manager, Jerome Allen, does a discharge plan with persons being released from the Detention Center and gets them an appointment with the Local Re-entry Program. The plan is for Jerome to refer newly released people to the Local Re-entry Program, who will make referrals to Rasheeka. Jerome to make direct referrals for those not interested in the Local Re-entry Program. Hopefully this will result in appointments shortly following release and quick links to Peer Navigators. This will probably begin once Christine's position is filled. Lacie provided an update on progress with Duke Regional. The meeting with Lacie, doctors Kamath, AlKhawam

and Burrows did not occur. Instead, Lacie received an email from Dr. AlKhawam explaining that due to COVID-19 restrictions in the ED, they would rather begin with inpatient referrals and expand to the ED at a later date, which is disappointing. Dr. Kamath would be the contact for initiating the inpatient program. Lacie has not been able to reach her.

Comment (Cindy): Explained that Dr. Kamath has a busy and unusual schedule. Cindy also assured Lacie that Dr. Kamath will eventually get back with her and offered to follow up with her. Lacie accepted Cindy's offer to do so.

Lacie added that the collaboration with EMS has resulted in an increase in referrals and that inpatient referrals should be helpful as well.

Announcement (Joy): RRC and another crisis center in Ashville have been chosen to receive \$75,000 in funding through Alliance for gift card incentives for client engagement with Peer Navigators. Each client is eligible to receive up to (5) \$15 gift cards for attending outreach/provider programs. These incentives will be included to enhance participation in the CLC Program.

Dr. Eucker reported she attended a meeting with DUMC, Duke Raleigh and Duke Regional to discuss more broad sweeping interventions for OUD to include Peer Support Specialists. Both Durham sites are very interested; however, COVID HAS slowed everything down. She has worked with social workers at DUMC on an integrated process to refer patients to DRRC and peer support specialists. She suggests a phone call intervention for now and thinks that this is a viable option.

Comment (Lacie): The program has been getting referrals from Shavonne, with Project COMET, which is helping to increase numbers.

Comment (Cindy): This has been a lengthy process that has required significant help from Dr. Eucker to move things along. She encouraged Lacie that all parties involved will continue working toward the success of the program.

Detention Center MAT

Major Bazemore stated he thinks it would be a good idea to invite Hattie Wood to join the committee. Hattie has agreed to co-chair the Detention facility MAT Program. He would like to have a meeting to bring Hattie up to speed on the program. He is optimistic that the meeting will happen soon. The application for the OTP program is moving very slowly. The plan was to have it completed by June 15. There are a couple sections to complete before submission.

The proposal for paying Wellpath will be heard by the Board of County Commissioners in August. The grant for the Health Care Worker/FIT/MAT position has been finalized. He received an email from Ms. Easterling, from Public Health saying that the position is on hold until an ordinance restricting employees from conducting community outreach is lifted. Major Bazemore and the Detention Team are waiting on results of the application for the grant for \$900,000 and are still optimistic concerning the results.

More interviews are scheduled for the in-house Peer Navigator position and plans to schedule another round of interviews for the in-house LCAS position. He anticipates this happening during the first or second week of August. A dry run of the Phase II-B induction began on July 1. There were 15 men and 1 woman identified during the intake process. As of July 13, there have

been 35 Suboxone and 27 Methadone, for a total of 62 participants. Presently, there are 1 methadone and 2 suboxone in custody. He thinks that the person on Methadone has a murder charge and that there are plans to step them down to Suboxone. COVID has resulted in a Plan-C INTERVENTION, WHICH HAS RESULTED IN ALL TIMELINES BEING WIPED OFF THE TABLE AND THINGS MOVING AT A MUCH SLOWER PACE.

Next steps are:

Not captured

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

***Our next committee meeting is scheduled August 11, 2020 at 3:00 PM via WebEx and phone.**