

**Durham Joins Together Saving Lives
July 16, 2020
Minutes**

Co – Chairs: Dr. Wanda Boone, CEO of Together for Resilient Youth (TRY)

Wendy Jacobs, Chair of Durham County Board of Commissioners

Attending: Donna Rosser DCoDPH, Lindsey Bickers Bock DCoDPH, Katie Mallette DCoDPH, Nancy Kneepkens TRY, Karen Verhaeghe Duke Well, Larry Greenblatt Duke Population Health, Cindy Haynes Duke Population Health, Major E. Bazemore DCo Sherriff/Detention, Crissi Rainer Duke, Ryan Bell Duke Univ. , Scott Proescholdbell NC IVPB, Stephanie Eucker Duke ED, Carlyle Johnson Alliance Health, Marissa Mortiboy DCoDPH, Wanda Boone TRY, Wendy Jacobs BOCC, Pastor Earl Boone TRY, Sindhu Shamasunder NC IVPB, Ben Rose DCDSS, Jesse Battle TROSA, Pilar Rocha-Goldberg El Centro Hispano, Vera Reinstein Duke, Dr. Angeloe Burch IMA, Paula Harrington Oxford Houses, Robert Albright Collective Impact Forum, Evan Ashkin UNC Health Systems, Helen Tripp DCoEMS

	Agenda Items	Notes
5:30-5:35	Welcome and Organizational Structure - Wendy Jacobs, Task Force Co-Chair	Wendy extended the welcome and expressed concern for the status of everyone’s mental health and people’s substance misuse during a very difficult time, which makes this work particularly important.
5:35-5:45	Status of Work with UNC SOG, Durham Joins Together Final Forum August 2020 – Dr. Wanda Boone – Task Force Co-Chair	Wanda reported as follows: Approaching the end of the 2 year UNC-SOG program. Final forum will take place virtually from 8:30am-5:00pm, on August 6. Keynote speaker—Sam Quinones, author of the book Dreamland. Look for additional details in recent emails from Donna. Also reminded everyone to follow the 3 W’s: <ul style="list-style-type: none"> • Wear a mask/cloth face covering • Wait 6 feet apart and • Wash your hands often.
5:45-5:55	Committee Reports and Feedback Data – Ryan Bell and Crissi Rainer (Mental Health/Treatment Data)	Ryan reported as follows: Focus has been on collecting data for the progress report for the Community Linkages to Care grant (CLC) and collecting both quantitative and qualitative data from persons seeking services from Durham Recovery Response Center (DRRC). Initial funding cycle for which the state required data was from Jan-May and looking at clinical outcomes at the first visit, 1 month and 3 month follow-up with enrollees. To-date, one (1) enrollee has completed this requirement. Data use agreement with Duke also providing access to medical history. Additional Quantitative data on program requested: No. of Naloxone

		<p>kits distributed; types of organizations suggested for Naloxone distribution; no. unique individuals served; no. total contacts with participants; no. overdose reversals with Naloxone reported; program challenges and lessons learned. Crissi reported on qualitative data collected as follows: working on key stakeholder interviews to elicit feedback on the program. To date, has completed four (4) interviews. Put them on pause to analyze data for first progress report for the state. Also paused to allow program to normalize after COVID-19. Will resume interviews soon and encourages task force members to volunteer to be interviewed for the program. Also plans to work with Recovery International's compliance department to interview people engaged in any aspect of the program.</p>
5:55-6:15	<p>Prevention and Education –Dr. Wanda Boone and Dr. Angeloe Burch, Sr. Durham County Substance Use Report – Dr. Wanda Boone Overdose in the Black Community - Sindhu Shamasunder, MPH Epidemiologist Injury and Violence Prevention Branch</p>	<p>Wanda reported as follows: Substance Use Report for Durham County is done. Features data on substance use by adults and young people and what is happening at the community level. Together for Resilient Youth (TRY) generates this report every 2-years. The Good Neighbor Business Network list has been published. P&E Committee places a full-page add featuring this list in the newspaper each year. Committee has provided 50 medication lockboxes to assist Recovery International. Continuing work with Whole Health Ambassadors program. Since March 31, holding 3 virtual meetings weekly on COVID-19, Substance Use and Mental Health Checkups. Each meeting focuses on a different age group. Committee was highlighted by Blue Cross Blue Shield of North Carolina for its efforts in creating adds to impact Black and Latinx communities with culturally sensitive messages about COVID-19. Sindhu presented information on overdose among residents of Durham and breakdowns of the data by race and other demographics. Data presented was shown over a 5-year period (2014-2018) to provide greater reliability in county level rate estimates. Rates were not calculated for counties with fewer than 5 deaths and caution should be used when interpreting rates for counties with fewer than 10 deaths. See attached presentation for categories in which Blacks in Durham County and NC are overrepresented for overdose deaths and ED visits related to overdose.</p> <p>To join the IVP Branch's list serve and receive email notification of new reports, send an email to substanceusedata@dhhs.nc.gov</p>
6:15-6:25	<p>Treatment and Mental Health – Cindy Haynes Community Linkages to Care Grant Award– Lindsay Bickers Bock</p>	<p>Cindy reported as follows: In April, welcomed Lacie Scofield (CLC Program Coordinator) to MH/T Committee. Peer Navigator, Christine, passed away unexpectedly. Presently have 1 part-time Peer Navigator. Cindy's MH/T Committee Co-Chair, Dr. Ashwin Patkar is no longer with Duke Health System. Wish him well in his new leadership role in Addiction Medicine. Dr.</p>

		<p>Stephanie Eucker initiating a Buprenorphine Induction program in the ED at DUMC. MAT in Detention Center entered Phase II-B in July. See attached report for additional details.</p> <p>Lindsey reported as follows: At the point of the first progress report which is 6 months into a 32 month grant period. Implemented process improvements in the midst of COVID-19 to include: Work with peer support specialists on availability based on early morning shift changes in the ED; discussions about training in Motivational Interviewing and Wellness Recovery Action Planning (WRAP) as additional resources; pairing peer support specialists with community paramedics to increase no. of referrals; assembling expanded folder of print materials on available resources; continuing to think with hospitals what role can be following the pandemic; opportunities for social workers to make inpatient referrals; and ways peer support specialists can work with the Detention Center. Bright Spot: Many of these strategies were born out of changes brought about by COVID-19 and resulted in overall improvement of the program.</p>
6:25-6:45	Policy Group Update, Phillip Graham and Robert Albright	<p>Robert reported as follows: Policy Committee met in late April. There was discussion on clarifying the role of the committee. One role may involve identifying learning and progress across all committees and how to share that information with the community. Discussed types of policy DJT Task Force could possibly influence</p> <ul style="list-style-type: none"> • Big (P) policy-legislative or governmental • Little (p) policy-institutional (for example: influencing how partners use and share data). <p>Another role would be to identify sustainability opportunities for Durham Joins Together as we near the end of this phase (UNC-SOG). Next steps will involve establishing criteria for making decisions related to policy recommendations. The committee will meet again in the fall.</p>
6:45-7:00	Discussion, Questions, Feedback, Next Steps	<p>Comment (Wanda): Although our overall goal is to prevent overdose among all residents of Durham County; we have been paying particular attention to the trend in which Blacks in Durham County are overrepresented in overdose and overdose deaths due to opioids and other substances, so that we can target messaging to this population.</p> <p>Comment (Sindhu): Pointed out potential challenges in determining what changes in the data mean. For instance, if we see an increase in no. of ED visits due to unintentional overdose from one year to the next, we don't necessarily know that there are more overdoses. Instead, it could be that more people make</p>

		<p>it to the hospital. Continually looking at different data sources to find out what changes in data mean.</p> <p>Question (Major Bazemore): How can we better connect people who have experienced overdose to community resources?</p> <p>Response (Wanda, Wendy and Helen Tripp): Whole Health Ambassadors Program, EMS Community Paramedics Program and the Community Linkages to Care Program</p> <p>Question (Jesse): Is there a way to determine number of overdoses among individuals recently released from incarceration, or in SUD treatment within the past 6 months?</p> <p>Response (Scott): Some counties (including Durham), are working on data use agreements between different agencies that will allow them to collect and share this type of data on individuals. If interested in how it is done, Scott can help you make contact.</p> <p>Cindy expressed thanks to Dr. Boone and Commissioner Jacobs for their leadership. She also thanked members of the MHT Committee and colleagues from Public Health For work to find funding to sustain programs.</p> <p>Wanda echoed Cindy's commentary with regard to the Prevention and Education Committee and their efforts.</p> <p>Wendy also expressed her gratitude to each of the committee chairpersons, Major Bazemore, Lindsey and Helen. At next meeting, important to discuss vision for continuing this work.</p>
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Schedule for Durham Joins Together committees:

Treatment/Mental Health – 2nd Tuesday of each month – 3:00pm – 4:30pm – Via Webex

Prevention/Education – 2nd Wednesday 10:30am – 12:00noon – Via Zoom, 3rd Tuesday of each month – 4:00pm – 5:30pm – Via Zoom

Data – 1st or 2nd Tuesday of each month – 8:30am (day depends on the availability of members)

Policy – To be determined

Next Durham Joins Together Saving Lives Taskforce – No meeting scheduled at this time