

Durham Joins Together to Save Lives Task Force

Mental Health Treatment Committee

Minutes

May 11, 2021

Attendees: Donna Rosser, Lacie Scofield, Larry Greenblatt, Gudrun Parmer, Carlyle Johnson, Tremaine Sawyer, Joy Brunson-Nsubuga, Marc Strange, Jason Tatreau, Kay Sanford, Katie Mallette, Sheriff Birkhead, Jessie Battle, Stephanie Eucker, Nidhi Sachdeva, Elijah Bazemore, Lindsay Bickers-Bock, Cindy Haynes

The group convened, Cindy welcomed everyone and began introductions.

The minutes were approved with the said correction of Ms. Terry's last name (Terry not Taylor)

Strategic Planning for Program Sustainability (Group)

Cindy revisited discussion on SB 607 and possible letter from Committee. She asked Nidhi to share what the group at Duke is doing.

Nidhi shared efforts to rally against bill which is still in Rules Committee. Crossover scheduled for afternoon of May 13th. If not moved by then, should be fine for this session. Syringe Services Speak-out held in Raleigh on 5/10. Nidhi report there are letters from clinicians, with 167 signatures. There is also letters for researchers, service providers and frontline providers, NC Association of Local Health Directors, NC Healthcare Association, and Duke Health Lobbyists. The idea for bill came from a Neighborhood Association out of West Ashville who didn't want the syringe exchange program in their community. Nidhi also mentioned a bill that made it to the House is the Improvements to Good Samaritan's Law (HB 852). This is a good bill for us to get behind. Nidhi suggested calling/emailing your House Representative. There was a news conference today at 1:00 PM at the Legislature Building in Raleigh. Kay suggested tracking this down and seeing what else we can do to support.

Cindy said she reached out to Spencer Bradford with Durham Congregations in Action. Out of office until 5/14. She asked him to make contact when he returns so that she can schedule meeting to discuss MAT and housing. Asked if Lacie had meeting with Dr. Kamath and Susan to discuss embedding peer support in hospital.

Lacie said working to schedule meeting with Compliance Officer for Duke Regional (hopefully next week).

Dr. Tatreau said by next meeting, should know more about progress. Thanked Lacie and Susan for helping move things forward.

Cindy also asked if Lacie and Lindsey met to discuss increasing hours for Katherine.

Lacie reported they are still working on it. The extra funds for next fiscal will not cover the cost of increasing hours. We reached out to Carlyle to see if Alliance can assist. Lacie reported Carlyle said that it is a possibility since we are already working on setting up housing assistance

program. Lacie said if peers are administrators, it will increase the workload and a need for compensation. Carlyle is discussing the details with Joy.

Joy stated internally for RI we have to work out logistics for handling smaller pools of funding and it has to be reimbursed. Susan is overseeing the program.

Cindy asked if Lacie was able to get statement from Board of Health in support of MAT. Lindsey stated the second Thursday in June is the BOH next meeting. We will discuss support at that meeting and report back. Nidhi suggested using settlement funds for advocacy around improving housing options for persons on MAT.

Major Bazemore asked about possibility of housing for people on MAT can be managed within CJRC? Requested that housing be a standing agenda item.

Gudrun says CJRC does a lot with housing and agrees it needs to be with one agency. Not sure it should be CJRC.

Mark added it is a matter of coordination of services so as not to duplicate services. Mark also mentioned need to include cost of childcare when working to improve housing options for women and children.

Alliance Health

Carlyle reported that Alliance is at end of the fiscal year and planning for next. Feast or famine of various grants. The other recurring theme is overwhelming, bureaucratic labyrinth of paperwork which is a major barrier. Expecting more money through Recovery Plan Act. Carlyle mentioned that the Opioid Summit reported positive legislation around the opioid settlement dollars and worked a deal where 85% of funds are to go to the Local Health Departments. He is wondering how Durham plans to administer funds. Kay said she was in session. Good time to consider what we can do that is even more cutting-edge and organized at county level. Cindy suggested smaller meeting to discuss needs for Durham concerning OUD. Joy asked if this is McKinsey or Perdue Pharma. Cindy said she thinks Perdue Pharma. Kay suggested smaller group meeting and report back to Committee. Nidhi said we may need to hold off on meeting until we find out if Durham signed MOA with Attorney General's Office. She also noted that Attachment A local action items are the things we have been doing. Carlyle suggested once confirmed, we should meet to discuss ways to avoid duplicating efforts between counties, states, etc. Lindsey said she can check with Director Jenkins and see how much he knows about the process. Cindy say this is fine.

EMS Opioid Data with Race/Ethnicity Stats (Captain Helen Tripp)

No Report

Duke ED Peer Support Services

Dr. Eucker reported we are still in the process of getting alerts activated. We are really close.

PSS Services in Duke Regional ED (Dr. Jason Tatreau & Dr. Aparna Kamath)

Dr. Tatreau reported once Lacie, Susan, Duke Regional Compliance and he have conversation about Peer Support, will have better idea of how the program will look for Duke Regional. We should have more to report at the next meeting. There's a lot going on with Behavioral Health. The new Behavioral Health Center opened about 3-weeks ago with a staggered opening. One hundred and fifty thousand square feet/\$102,000,000 expansion on the Duke Regional Hospital. Includes expanded ED. Centralized behavioral health services, including 18-bed Psychiatric ED, 30-room Outpatient Clinic, 42-bed Inpatient Psychiatric Unit, Electro-convulsive Therapy Services and we still have a Consult Services directed by Dr. Tatreau. The Behavioral ED opened 5/10 and is nearly full. Everything else is fully operational. Dr. Greenblatt asked if Department of Psychiatry considering possibility of providing treatment of addiction services at new facility. Dr. Tatreau said the emphasis was on relocating existing services to new building. As far as next steps, PMSOS Committee has been talking with Department about what Psychiatry's involvement may look like in the future. Dr. Tatreau will ask and provide update to Committee during the next meeting.

DRRC OBOT

Joy reported that Nathania is now the Director of RRC. We are expanding due to the caseload and hiring another clinician for OBOT. We are currently at 35 participants, which is highest number so far. Susan is currently the only clinician and she oversees the Peer Support Program. We are continuing to schedule intake and looking for another clinician.

Program Coordinator (CLC Grant)

Lacie reported that she emailed group draft of Substance Use Resource Guide. Dr. Boone is the contractor and she wrote the content. It has been reviewed by DCoDPH Leadership and state-level CLC grant administrators. We are coming up on end of fiscal and spending deadline for the grant. The goal is to publish 300-500 of the guide by end of May. We would like the group to review and provide feedback by the close of business on 5/12. Lacie thanked Kay and Marc for their feedback. The peer support program recruited 8 new participants in April. Seven of which became enrollees and are in the OBOT program now. Things were slower in April because Community Paramedics were on vacation and illness. Lacie also said Helen informed her of a drop in overdoses. We had 3 new participants from Detention Center and all started OBOT. We had one who came from DUMC ED. We also had 2 participants who were readmitted, previously discharged from program for having no contact in over a month. Peer support is going well, we follow the model of other CLC grantees in which peers call participants weekly. However, participants have been calling the peers. Ryan Bell with the data committee is working on getting a control group to compare with the program participants. Lacie reported Ryan is also working to access medical records. The plan is to look at subsequent overdoses, hospital admissions and the impact of peer support on the outcome. For the Detention Center we are looking at the recidivism rate. The Housing Table that was previously shared is now online. Lacie reported she recently learned of 2 additional housing resources at Opioid Summit. She will add them to table. Also there are 3 other housing resources that do not accept people on MAT: CAARE-The Healing Center, TROSA and Freedom House (Buprenorphine, not Methadone). There is a lack of housing for families, women, and women with children. We need to look at increasing housing options for them as well. Marc stated CJRC can help coordinate and identify what pots of funding to pull from housing. Donna gave an update on the OUD

Provider Training Series. The sessions are scheduled for May 12th, 19th, and 26th. At present there are 200 registered participants. We only budgeted for 150 to receive credit hours. Carlyle said he's checking on price for additional registrants over 150 to receive credit as well. Donna and Lacie prepared a resource guide for participants including information on additional training opportunities and other resources. Dr. Tatreau said he is excited about the number of providers who registered for training. He thinks it is a great opportunity for folks across Duke Health to have better understanding of the population served and of work done in the community and how to become better partners.

Detention Center MAT

Major Bazemore reported we have up to 105 participants in program.

63 Suboxone (42-Men, 21-Women). There has been eight who returned to custody.

42 Methadone (31-Men and 11-Women). Three of which have returned to custody.

10 in custody (All men)

The clinician and peer support are onboard. We are working on the connections with the external peer. Currently we have referred 8 people to DRRC for induction. We met with Tremaine to develop list of questions for individuals who recidivate, to get at reasons.

Major mentioned an article on WRAL concerning IVC (Involuntary Commitment) Transports and the use of restraints for young people and the potential for trauma. New facility for youth opening in Fuquay, which will decrease need for additional transport. He wants to know if group has any thoughts.

Sheriff Birkhead mentioned a conversation about removing 10-percent of DPD budget and fund something else. He reported there is also talk of a 10-percent decrease of Sheriff's Office budget to support mental health. Sheriff Birkhead wants to know what that would look like. The Proposal is from the Durham Beyond Policing/ All of Us or None is part of Defund the Police Movement. (The Fund Safety and Wellness Taskforce). He would like for Committee to submit questions to these groups and request a response.

Carlyle posed additional questions: Who would administer (County)? Would funds go from County to Alliance to manage? Would funds go into the Detention Center to enhance mental health services? Who decides (County Commissioners)? What is the desired response?

Cindy will assemble small group to discuss.

Carlyle suggested there may be others who can share information concerning best practice. He suggested Marvin S. Swartz, Duke Division of Social and Community Psychiatry.

Next steps are:

- Housing to become a standing agenda item
- Dr. Tatreau to update on compliance meeting and addiction treatment at the Behavioral Health Center
- Nidhi to provide link to letters regarding SB607 and the Good Samaritan (HB852)
- Lindsey to follow up with Director Jenkins regarding signing of the MOA for the opioid settlement funding to the counties

- Dona to update on provider training
- Cindy to coordinate a meeting to discuss the proposed 10% budget cut to Sherriff's Office to support Mental Health
- Cindy to follow up with Spencer
- Carlyle and Joy to discuss the housing assistance program

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

***Our next committee meeting is scheduled June 8, 2021 at 3:00 PM via WebEx and phone.**