

**ALCOHOL & DRUG POLICY COUNCIL (ADPC)**  
**Meeting of Tuesday, October 15, 2019**  
**Legislative Office Building, Meeting Room 1D**  
**Hartford, CT**  
**10:00 a.m.**

**ATTENDANCE**

**Members/Designees:** Craig Allen, Rushford; Charles Atkins, CMHA; Miguel Cardona, DOE; Jennifer Chadukiewicz, CCAR; Miriam Delphin-Rittmon, DMHAS; Marcia DuFore, NCRMHB; Katie Farrell, Public Defender; Brian Foley, DESPP; John Frassinelli, DOE; Ingrid Gillespie, CT Prevention Network; Shawn Lang AIDS, CT; Hector Maldonado, Wheeler; Kathleen Mauer, DOC; Amy Mirizzi, DPH; Sandrine Pirard, Beacon; Surita Rao, UCONN Health; Gary Roberge, Judicial; Greg Shangold, Windham Hospital; Phil Valentine, CCAR; Judith Stonger, Wheeler Clinic; Michael Williams; DCF

**Visitors/Presenters:** Julienne Giard, DMHAS; Mary Painter, DCF; Loel Meckel, DMHAS; Nancy Navarretta, DMHAS; Jake Kochin, CCMC/DPH; Joan Dorman, DOC; Melissa Linden, DOC; Ana Gopoian, TriCircle; James Fowler, O'Donnell Group; Joshonda Guerrier, DCF; Ece Tek, Cornell Scott; Sheila Owen, Peach Tree Counseling; Dan O'Donnell, O'Donnell Group; Danielle Ebrahimi, DMHAS; David Seifel, DSS; Ramona Anderson, DPH; Carol Cruz,

**Recorder:** Karen Urciuoli

The October 15<sup>th</sup> meeting of the Alcohol & Drug Policy Council (ADPC) was called to order at 10:00 a.m. by Commissioner Delphin-Rittmon. The meeting was co-chaired by Deputy Commissioner Michael Williams, DCF.

<b>Topic</b>	<b>Discussion</b>	<b>Action</b>
<b>Welcome and Introductions</b>	Members of the Council introduced themselves and Commissioner Dorantes welcomed all in attendance.	Noted
<b>Review and Approval of Minutes</b>	Minutes were reviewed and approved as written.	Noted
<b>Recommendations Approved by Council (August Meeting)</b>	The recommendation put forth by the Prevention Sub-committee which promotes realistic pain expectations, while providing prescribers with resources to help patients moderate their expectations and manage their pain was approved.	Noted
<b>OCME Projections</b>	Commissioner Delphin-Rittmon reported that the OCME released their projections for the coming year. For 2019 it was disheartening to see that we're projecting, potentially, 1,088 overdoses despite all of our efforts and lets us know that there is a lot more that we need do. The commissioner appreciates all of the work done by this council and each of the subcommittees and asks that they continue to bring forth recommendations.	Will continue to update.
<b>Vaping</b>	<p>Barbara Walsh and Greg Carver provided an overview of their PowerPoint presentation that they provide to different groups. The presentation reviews the following:</p> <ul style="list-style-type: none"> <li>• Different electronic nicotine delivery systems (ENDS)</li> <li>• All tobacco products and their effects.</li> <li>• Percentage of use among youth and adults for all tobacco products</li> <li>• Health effects of ENDS</li> <li>• Vaping related lung injuries</li> <li>• Current Connecticut laws regarding ENDS</li> <li>• US Trends in Tobacco use</li> <li>• Tobacco regulations in CT</li> <li>• DMHAS Compliance Inspections and how they work</li> <li>• The Family Smoking Prevention and Tobacco Control ACT or TCA</li> </ul> <p>John Frassinelli from the State Department of Education (DOC) reported that in January 2019 the department issued guidance documents to school districts. Once the new Tobacco 21 law went into effect additional guidance was sent out. They encourage school districts to update their policies to reflect new legislation, post signage that reflects the new laws, and to provide education</p>	Informational – the full presentation with data/graphs can be found on the DMHAS ADPC webpage.

Topic	Discussion	Action
	around tobacco and nicotine products annually. In addition, the DOC participated in a roundtable discussion with Senator Blumenthal and students from the Connecticut Technical High School system to discuss vaping; they met with school districts to find out what they are doing specifically; and have attended some parent forums in an effort to get the word out about the dangers of tobacco products.	
Youth Outreach	<p>Cheryl Smith and Maria Brereton, from the Children's Center of Hamden provided the following report:</p> <p>The Children's Center of Hamden Recovery Outreach Team came into existence about 2 years ago, and is funded through a Perdue Pharma Grant. The team consists of a part time director, a case manager/supervisor and two outreach team workers. They provide recovery coaching, wrap-around recovery support. They do not attempt to fill the role of parent or therapist. They use evidence based practices, they have been trained in the recovery tools, have had recovery coach training and motivational interviewing. They provide networking services, connecting them with treatment providers, getting them information that they need to have and may not be comfortable asking a parent or teacher for. They provide a lot of outreach to all the area schools, police departments, hospitals and other organizations. They hold weekly SMART Recovery Meetings, and bi-weekly Peace and Chill Crew Hangouts. This program has been in existence for 12 months and, in that time they have connected with 51 youth at varying levels who have substance use needs. 32% have been connected to treatment, which exceeds the 1.4% reported by SAMHSA. Funding for this program will run out in approximately 18 months, however, they will continue to collect data and share it when needed.</p>	Informational – The full presentation can be found on the DMHAS ADPC webpage.
Youth Focused Media Campaign	<p>Dan O'Donnell and James Fowler from the O'Donnell Group provided an overview of the Youth Focused Media Campaign</p> <p>DMHAS lead with a response to the opioid crisis by launching the LiveLOUD campaign approximately one year ago. The campaign leveraged digital, social and outdoor media. It drove audiences to the Liveloud.org website to learn more about treatment and recovery options and compelled visitors to call the access line for information or to schedule a screening. An unprecedented collaboration between five state agencies and over 20 private organizations have joined together to expand the reach and impact of this public education campaign, and to assure that services are available to those responding to it. In response, the Department of Children and Families developed an extension to LiveLOUD Campaign. The campaign was designed to reach adolescents coping with substance use disorder and was targeted to young people and their families. The campaign used proven behavior change techniques, leveraged the trusted LiveLOUD brand, creative toolset, and website; and used messaging that would be relatable and engaging to target audiences. The campaign leveraged Google, the first stop for information for the target audiences. The ads spoke to hope and drove people to the website for support information. The LiveLOUD website was expanded to include information specific for these audiences, with the addition of the 'Families' section. In addition, DCF reached out to all of their partners asking them to share information and link to their site when communicating with their members and audiences. The campaign was incredibly effective, 27,000 impressions, and 1,700 engagements per post, that's 1,700 people sharing, liking, or joining an online conversation about this topic in their social media presence. The campaign has been incredibly effective starting a conversation and driving action.</p>	Informational – The full presentation can be found on the DMHAS ADPC webpage.
Sub-Committee Reports		
<ul style="list-style-type: none"> <li>Prevention, Screening and Early Intervention</li> </ul>	<p>Ingrid Gillespie provided the following update:</p> <ul style="list-style-type: none"> <li>Promoting realistic pain expectations – currently reviewing creative concepts for the new materials that will be part of Change the Script. The materials will include new visuals in addition to a pain profile worksheet for individuals to use as a tool when talking to physicians about tracking their pain.</li> <li>Work place policy workgroup – continues to research different policies and different occupations, they are currently looking at a manual created for the construction industry in addition to attending a meeting for operating engineers.</li> <li>Substance exposed infants work group – they had their second meeting and are looking at potential policy and legislative changes as well as possibly hosting an educational event</li> </ul>	Informational

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	<ul style="list-style-type: none"> <li>• Act Concerning Opiate Use - At their last meeting they looked at this Act and focused on the fact that higher institutions as of January 1<sup>st</sup> have to develop and implement policies on the availability and use of opiate antagonists by students and employees. DCP is drafting guidelines for what the higher education policies should look like as well as the CT Healthy Campus Initiative administered by Wheeler.</li> <li>• Change the Script – Two new flyers have been created that integrate suicide prevention messaging</li> <li>• October 26<sup>th</sup> is National Medication Take Back Day</li> <li>• NORA is now available in Spanish and is being worked on in Polish and Portuguese</li> <li>• A grass roots initiative called MADS (Medication Adherence and Anti Diversion Solution) has been created, their focus is engineering solutions to address the opioid taskforce. They were just awarded a two year FDA grant to look at the impact of opiate packaging, on prescribing, patient outcomes and dispensing.</li> </ul> <p>The Prevention Committee put forth a recommendation for approval, it is as follows:  <i>Work with established groups and initiatives to educate legislators, policy makers, medical and other professionals, families, and community members on SEI/FASD, plans of safe care, and best practices for universal prenatal screening; and develop legislative and policy recommendations that support women and families.</i></p>	
<ul style="list-style-type: none"> <li>• Treatment</li> </ul>	<p>Dr. Allen provided the following update regarding issues they have been looking at and discussing:</p> <ul style="list-style-type: none"> <li>• They've been looking at the recovery and sober house websites and talking about the different certifying bodies including CCAR, CCOR and NAR and how there can be some confusion in the differences between a recovery house or a sober house and the possibility that some clarifications or examples can be put on the website to help people who are looking for a place to stay.</li> <li>• A blast FAX was sent out by DPH to substance use providers explaining how to obtain a waiver for an initial physical when someone is seeking methadone treatment.</li> <li>• They have been discussing the possibility of a mobile methadone vans that can go out into the community to provide methadone directly to people. They are waiting for direction from the DEA, DPH is open to the concept.</li> <li>• The methadone workgroup that meets with Barbara Cass from DPH is currently discussing barriers with nursing homes providing substance use treatment or partnering with substance use providers, they looked at a GIS mapping between nursing homes and substance use providers and found that in most cases there was close proximity between the two types or organizations and there didn't appear to be any geographical barriers. A survey that was done showed 75% of nursing homes are not providing MAT but there is interest within the community to learn more about it. DPH is interested in exploring funding for a half day training for nursing homes to increase their comfort to offer MAT. CMS does require substance use treatment be available in nursing homes.</li> <li>• They are working on developing guidance documents for hospitals and nursing homes on MAT, there continues to be some lack of understanding in some hospitals across the state as to what their options are for treating someone who has an opioid use disorder while they are in the hospital.</li> <li>• They've be discussing the emergency responder project where first responders can induct somebody onto medication for opioid use disorder and the need to have follow up care and possibly navigators to help those people access follow up care.</li> <li>• On September 12<sup>th</sup> CT had its first harm reduction conference, there were over 450 attendees. The follow up from the conference was people want to know how to use harm reduction models in parallel with abstinence based models. This is something that this subcommittee will be looking into.</li> <li>• On November 2<sup>nd</sup> and 3<sup>rd</sup> the Women's Consortium will present a training for families that will teach family members practical and effective strategies to motivate change in their loved ones struggling with substances.</li> </ul>	
<ul style="list-style-type: none"> <li>• Recovery and Health</li> </ul>	Hector Maldonado provided the following update:	Informational

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<p style="text-align: center;"><b>Management</b></p>	<ul style="list-style-type: none"> <li>• There is a new Recovery Friendly logo that is in production and will be made available once completed.</li> <li>• There are currently 10 recovery friendly communities with an additional 4 underway.</li> <li>• Youth in Recovery – Hector along with DCF attended a smart recovery international conference in Chicago, there were a number of studies and speakers that presented. There are two that are of interest to the cross initiative that funds smart recovery and alternative peer groups in CT. One study looked at the correlation between participants participating in more than one recovery support and their levels of motivation to stay in recovery. The other study looks at youth and the punitive response they may receive in terms of relapse. The cross initiative has currently identified 46 active groups that are running smart recovery and alternative peer groups in CT. As of last week an additional 8 will be added to that initiative.</li> </ul>	
<ul style="list-style-type: none"> <li>• <b>Criminal Justice</b></li> </ul>	<p>Dr. Mauer the New England HIDTA provided an overview of the police toolkit.</p> <ul style="list-style-type: none"> <li>• PD/PAD Plan - Work continues on the Public Safety toolkit. The kit is designed to provide information resources to police when they are confronted by an individual in the community with a substance use disorder. The kit will also help to provide resources to family members. The kit will also give the police more options to adopt that are more evidence based. They are working with HIDTA and CT State Chiefs of Police on this project. <ul style="list-style-type: none"> <li>~ DMHAS has provided over 500 Naloxone kits to municipal police that may not have access to it; this was also extended to constables located in CT.</li> <li>~ Working on educating judges and will be inviting one to be a member of this subcommittee.</li> </ul> </li> <li>• MAT for DOC - Expansion of MAT program continues, state funding made available to DOC will be used to enhance their infrastructure to be able to provide MAT. They are looking to build a fully staffed OTP at York where they are treating approximately 100-150 patients daily with Methadone. Recovery coaching will be included in this staffing model.</li> <li>• Lauren Siembab from DMHAS will receive the Nyswander/Dole Award from the American Association for the Treatment of Opioid Dependence to recognize her work and service in the opioid treatment field.</li> </ul>	<p>Informational</p>
<p><b>Other Business</b></p>		

**NEXT MEETING** – Tuesday, December 17, 2019, 10:00 – 12:00, Legislative Office Building, Meeting Room 1D

**ADJOURNMENT** – The October 15, 2019 meeting of the Alcohol and Drug Policy Council adjourned at 12:00 p.m.