



## Minutes of the Substance Abuse Roundtable September 16, 2016, Gaston County Police Department

### Attending

- Costa Andreou, MD, CaroMont
- Patty Brooks, Gaston Together/GCHC
- Dwayne Burks, YMCA
- Michael Clark, Partners BHM
- Kirsten D'Amore, MD, CaroMont
- Tiffany Donally, DHHS-Social Services
- William Donigan, GFHS
- Donna Elliott, HealthNet Gaston
- Jeffrey Ellison, PhD, GFHS
- Kayla Earley, DHHS-Public Health
- Lynne Grey, Partners BHM
- William Gross, Gaston Together/GCHC
- Thomas Henry, CaroMont
- Becky Jones, Phoenix Counseling
- Misty McIntosh, PharmD, Community Hlth Partners
- Ruth Murphy, DHHS-Social Services
- Abigail Newton, DHHS-Public Health
- Shirley Ocloo, MD, GFHS
- Ami Parker, Gaston County Schools
- Cornelia Pringle, Epiphany Family Services
- Joseph Ramey, Gaston County Police
- Debra Safrit, Gaston Medical Associates
- John Scheitler, MD, Piedmont Adult and Pediatric Medicine Assoc.
- Andrew Schrag, Partners BHM
- Tamara Scott, PhD, GFHS
- Cheri Singleton, DHHS-Public Health
- Velma Taormina, MD, DHHS-Public Health
- Anne Wheeler, Community Hlth Partners

**Welcome & Introductions.** Dr. Velma Taormina, Chairperson, convened the meeting and welcomed the group at 7:32am. The members introduced themselves and stated their affiliations.

**Minutes of July 22, 2016.** Dr. Donigan asked for his name to be added to the list of attendees. Dr. Scheitler moved to accept the corrected minutes, Dr. Andreou seconded the motion, and the group unanimously approved.

**Controlled Substances Policy Adoption Committee.** Dr. Ocloo, chair, distributed the program flyer and described the committee's work in planning the free CME event, **RESPONDING TO THE OPIOID CHALLENGE: BEST PRACTICES FOR RESPONSIBLE OPIOID PRESCRIBING**, to be held at the Gastonia Conference Center on October 22, from 8:00 AM to Noon. The event includes:

- Presentations on Best Practices in Pain Management, Best Practices in Urine Drug Screening, Best Practices in Opioid Prescribing, Practicing under new NC Medical Board Guidelines, and NC and The Opioid Epidemic: Looking to the Future. It will also feature a discussion of Case Studies.
- Presentations by a representative of the NC Medical Board and the State Health Director.

Dr. Taormina will soon email invitations to active Gaston County physicians, dentists, podiatrists, nurse practitioners, and physician assistants. Because of potential overlaps in our email lists, invitees may receive several invitations. The event will serve as many as 400 participants.

CaroMont Health and Community Health Partners have contributed funds and we are soliciting donations from pharmaceutical and drug equipment companies to cover remaining expenses. Dr. Ocloo asked the members to solicit donations from representatives of these organizations – except for manufacturers of long-acting opioid agonists - and distributed a solicitation form.

All Coalition members are invited to attend the event.

**Community Education & Prevention Committee.** Dr. Donigan, chair, reported the committee met twice since the last Coalition meeting. It developed descriptions of community attitudes about opioids and drafted messages for our public information campaign. The group is working with Kimberly Sain,

CaroMont Health, to launch a public information campaign immediately following the CME event. Drs. Donigan and Taormina met with Ms. Sain and Jessie Kloster to select a Coalition logo from mock-ups developed by CaroMont Health. The committee will meet again on Tuesday, September 20, at 5:30PM.

**Treatment Linkages Committee.** Dr. Clark, chair, reported the committee met to refine its survey on gaps in Gaston County's opioid treatment and prevention resources. At its last meeting, the group conducted a line-by-line analysis of the survey, which it is distributing with the CME invitation. If possible, we will present a preliminary survey results at the event. We will also add questions on service gaps to the Institute of Government's evaluation that we will distribute to CME program attendees. Because our email lists may not include all midlevel providers, Dr. Clark asked the members to forward invitations to the nurse practitioners and physician assistants they supervise.

**Coalition Guidelines.** Dr. Taormina noted a copy of the Coalition *Guidelines*, which the group endorsed at its last meeting, were included in the meeting packet.

**Presentation: Access to Care Program.** Melissa Cline, MA, LPC, LCAS, described Partners Behavioral Health Management's *Access to Care Program*. Through telephone consultation the program provides: clinical triage, suicide prevention services, crisis referrals, treatment referrals for mental health/substance abuse/developmental disabilities services, tracks patient use of hospital crisis and inpatient units, refers patients to state hospitals, and provides education and information. It also, it dispatches Mobile Crisis Units.

Program resources that may be of value to Coalition members include:

- A toll-free phone number – 888/235-4673 – to secure services.
- Mobile Crisis Units which intervene with suicidal individuals in any setting, including offices of clinical providers. This can eliminate the need to send individuals to an Emergency Department where they may face long waiting times. The average wait for Mobile Crisis Units is 45-50 minutes.
- The ability for clinical providers to make behavioral health appointments for their patients with Partners, instead of directing patients to set appointments and running the risk they will not comply. Providers can also set patient appointments when their patients are not in their offices. Partners' provides behavioral health services, irrespective of clients' ability to pay for services.
- Personnel who determine patients service needs and service eligibility by phone and in-person.
- In addition, family members and friends can call for program services for persons in crisis.

Ms. Cline distributed service brochures and will provide more as needed. Her phone numbers are 828/323-8032 (O) and 828/962-2792 (C).

**Overdose data.** Abby Newton distributed an update on Gaston County residents with drug overdoses between July 20 and September 14. This data – derived from ICD codes for opioid, prescription opioid, and heroin overdoses – was obtained from emergency departments.

**STAR report.** Dr. Taormina presented the report for Marcy Joyner. STAR, a DHHS-Public Health program, helps pregnant women and new mothers secure treatment for opioid dependencies. In six months the program enrolled 63 women and treated 14 babies for Neonatal Abstinence Syndrome (NAS), compared to 36 babies treated for NAS in the 12 months before the program was initiated.

**Clean Needle Exchange.** Dr. Taormina reported the NC General Assembly legalized syringe exchange programs on July 11, 2016. Dr. Andreou's assistant, Michelle Mathis, has extensive experience with fixed and mobile needle sites in Catawba County and will help establish Gaston County's program. Dr. Taormina will initiate planning with her in two weeks. State law prohibits government organizations from purchasing needles and syringes for these programs.

The program will require biohazard boxes and will encourage individuals to properly dispose of their legal drugs. Ms. Earley is familiar with this program and offered to help Dr. Taormina.

Mr. Burkes expects challenges from conservative faith leaders as needle exchange programs are believed to enable the use of illicit drugs. The group agreed to use resources from the NC Harm Reaction Coalition, including faith leaders from other communities, to explain their support and to assuage their fears and concerns. Mr. Burkes will work to build support in faith communities.

Ms. McIntosh noted pharmacists might object to the program as would the State Pharmacy Board.

Chief Ramey expressed support for the program as it will help prevent the spread of disease while giving information on treatment resources to drug users; he endorsed working with Tessie Castillo from the NC Harm Reduction Coalition. He also reported the Gaston County Police Department (GCPD) is one of four organizations in the state invited by the NC Harm Reduction Coalition to conduct the Law Enforcement Assisted Diversion Program (LEAP). If funded, GCPD will offer LEAP training to officers in local police departments so they can offer persons arrested for drug offenses with entry into drug treatment programs as a pre-booking alternative to full criminal charges.

Ms. Pringle, a 16-year Intravenous Drug User who has been in recovery for 28 years, she stated needle exchanges helped her maintain her health.

The group asked staff to arrange for Ms. Mathis to speak at its next meeting.

**Funding through Federal Opioid Law.** Dr. Taormina reviewed forthcoming funding from the recently enacted federal Comprehensive Addiction and Recovery Act. This legislation, which must be renewed annually, will provide up to \$28 million to North Carolina to secure Medication Assisted Therapy for opioid dependent persons and to increase public awareness of the risks posed by opioids. As Medical Director of the county public health agency, Dr. Taormina can sign a standing order for community agencies to use Narcan.

**Community meeting on September 29.** Dr. Taormina stated Gastonia City Councilman Robert Kellogg will host a community meeting on the progress our community has made in addressing the opioid epidemic over the past six months. The program is at 6:30 PM on September 29 at the Garrison Boulevard library branch. It will include comments by persons in recovery. Dr. Taormina and Mr. Gross will be on the program panel.

**Long-term planning.** Dr. Taormina stated Mr. Gross will lead the Coalition in long-term planning using a model developed by *Turning the Tide on the Opioid Epidemic*, a program of 100 Million Healthier Lives.

**Other.** Dr. Andreou stated CaroMont Medical Group will, in two weeks, install screens in their Electronic Health Record so primary care providers can track their management of patients who received opioid prescriptions and their opioid prescribing. This enhancement was developed under the leadership of Tom Henry to assure their providers manage opioids consistent with CDC guidelines. Mr. Henry stated they should soon receive Institutional Review Board approval for conducting research to determine the extent to which these screens are used during routine medical practice.

**Next Meeting Date.** The Coalition will next meet on November 18, 2016.

**Adjourn.** Chief Ramey moved to adjourn, Anne Wheeler seconded the motion, which was unanimously approved. The meeting adjourned at 8:45AM.