



# North Central Accountable Community of Health

## Regional Opioid Workgroup

1:00 PM – 2:30 PM Friday January 19<sup>th</sup>, 2018

### Meeting Minutes

**Attendees:** Naudia Pickens, Molina; James Wallace, Family Health Centers; Christal Eshelman, North Central Accountable Community of Health; Shelly Seslar, NCSSED; Kate Haugen, Amerigroup; Renee Hunter, Together for Youth; Julie Rickard, Consulting Phys; Rick Stillwaugh, Okanogan County Juvenile Court; Glen Adams, Confluence; Shawta Sackett; Maurice Ward, CVCH; Curt Lutz, Chelan County Jail; Loretta Stover, The Center for Alcohol & Drug Treatment; Angela Ernst, Narcotics Anonymous; James Olson, Narcotics Anonymous; Chuck Hill, Narcotics Anonymous; Malcolm Butler, M.D., Columbia Valley Community Health; Caroline Tillier, North Central Accountable Community of Health; Jim Mitchell, Grant County Prosecutor; Anne Crain, Together for Youth; Connie Cervantes, Amerigroup; Dan Boyle, Okanogan Behavioral Health Care; Gail Goodwin, Grant Integrated Services; Kari Hitzroth, Grant County Public Health.

Minutes: Sarah Suval, North Central Accountable Community of Health

<p><b><u>Location</u></b>  <b>Confluence Technology Center</b>          285 Technology Center Way #102,          Wenatchee, WA 98801</p>	<p><b>Conference Information:</b>          Join from PC, Mac, Linux, iOS or Android:  <a href="https://zoom.us/j/155569333">https://zoom.us/j/155569333</a>          Dial: (669) 900 6833 or (408) 638 0968          Meeting ID: 155 569 333</p>
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<u>Agenda</u>	<u>Time</u>	<u>Minutes</u>
<p><b>1. Welcome, Introductions, &amp; Project Planning Structure</b>  <i>Dr. Malcolm Butler and Christal Eshelman</i></p>	<p>1:00</p>	<ul style="list-style-type: none"> <li>• Updates – Dr. Malcolm Butler has volunteered to be the Opioid Workgroup Chair, and will be facilitating meetings in the future.</li> <li>• Introduced Maurice Ward, a Chemical Dependency Clinical Supervisor who has just joined with CVCH – can provide important perspective from Chemical Dependency Counselling.</li> <li>• Charter updates: <b>Please sign a charter to become an official member of the NCW Regional Opioid Workgroup (<a href="#">Download charter here</a>)</b></li> <li>• Charter members – must be able to commit to 75% of meetings (call in as an option – must email or call in advance to be ‘excused’ from meeting. Chartered members are allowed to miss up to 3 meetings per year, or will be asked to be excused from Workgroup)</li> <li>• Review: Opioid Workgroup Proposed Timeline (see <a href="#">December 2017 meeting documents</a> – March 2018, group will review the application that partners will be completing and submit to Opioid Workgroup. April 2018 – Application distributed. May 2018 – Review and select successful applicants.</li> <li>• Opioid Workgroup will be developing criteria to evaluate applications.</li> <li>• <a href="#">See December 2017 Meeting minutes for more information</a></li> </ul>



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<p><b>2. Project Data Update</b> <i>Caroline Tillier</i></p>	<p>1:15</p>	<ul style="list-style-type: none"> <li>• Shared updates based on requests from December 2018 meeting.             <ul style="list-style-type: none"> <li>○ HCA will not be able to provide data on health care providers or pharmacists who are prescribing in the region. Tracking is difficult because PMP is at the state level, but DEA/NPI licenses are federal – DOH does not have access to that data.</li> <li>○ ED Utilization rates reported at last meeting are <i>per 100,000</i></li> <li>○ HCA is working to provide prescribing provider data numbers within NCACH region.</li> <li>○ More information will be provided by HCA regarding prescriber practices by dentists across state, and within NCACH region.</li> </ul> </li> <li>• Opioid Use Data Presentation Packet             <ul style="list-style-type: none"> <li>○ New data – Prescribing rate hotspots across the state (info provided by Community Checkup). Trends show that highest prescribing happens in Grand Coulee, WA – highest rate in state. (Discussion – providers rotate quickly in area, may cause hyper-prescribing as institutional knowledge is lost with rotating staff. Population variance and proximity to other communities, such as Colville Reservation, may affect rates as well.) Is it not possible to get data on prescribers in each county at this time. Much of the data that Caroline has been able to get is from 2013 – 2016. A need exists for more reliable and localized data on prescription opioid use/prescribing.</li> <li>○ Drug take back programs: email <a href="mailto:joconnor@wapc.org">joconnor@wapc.org</a> to add or update your organization’s information.</li> <li>○ Only 1 syringe exchange program in NCACH region (through Okanogan Public Health)</li> <li>○ Naloxone Program/Pharmacies list: email <a href="mailto:info@stopoverdose.org">info@stopoverdose.org</a> to update or add your information</li> <li>○ Together for Youth has prevention data that they will provide to Caroline for incorporation at a future meeting.</li> </ul> </li> <li>• Challenges exist around data gaps because opioid related data is not considered mandatory reporting. Moving towards to mandatory reporting will create more data for groups like the Opioid Workgroup to use. Moving to mandatory reporting will need to come from Public Health or policy level.</li> </ul>
<p><b>3. Finalize Current State Capacity Assessment</b> <i>Christal Eshelman</i></p>	<p>1:20</p>	<ul style="list-style-type: none"> <li>• Shared the Draft NCACH Opioid Initiative Matrix (part of meeting packet) – data compiled from surveys, conversational interviews, as well as with work from Coalitions for Health Improvement (CHIs).</li> <li>• Initiative matrix will be hosted online (<a href="#">see January 2018 meeting documents</a>) please send any information to</li> </ul>



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		<p>Christal to keep updating the document. This is an attempt to identify current needs and ongoing programs.</p>
<p><b>4. Strategies</b> <i>Dr. Malcolm Butler and Christal Eshelman</i></p>	<p>1:40</p>	<ul style="list-style-type: none"> <li>• Reviewed proposed approaches document – use as a potential tool to evaluate Opioid Project applications (<i>See January 2018 meeting attachments</i>)</li> <li>• Medication takeback boxes – Confluence Health is going to be placing medication takeback boxes across NCW between 2018 – 2021.             <ul style="list-style-type: none"> <li>○ <i>Discussion</i> - May want to consider adding needle-boxes with medication boxes, as current medication take back box managers are finding needles in the boxes. Recommendation: consider adding sharps container or syringe disposal box along with medication take back box.</li> </ul> </li> <li>• Medication Assisted Therapy in correctional facilities: 8 jails across the State are treating opioid addicted inmates while incarcerated. Suboxone use during incarceration, as well working to line up medication assisted therapy for inmate upon discharge. Jails participating in this program are having issues finding care coordination following release to ensure released inmates have the recovery resources they need. Jails are working in tandem with chemical dependency treatment centers to get MAT prescriptions.</li> </ul> <p><b>Questions to group:</b></p> <ul style="list-style-type: none"> <li>• <b>Should the proposed approaches list be all-inclusive, or should more strategies be accepted on project applications with caveat that other strategies would be accepted/considered by workgroup?</b> <i>Yes, other strategies should be included, especially if group widens to take dentists into account and into Workgroup.</i></li> <li>• <b>Are dentists sufficiently included in this work?</b> <i>Dentists need to be included in these strategies because they prescribe opioids. Ways to incorporate – Prevention, public education/outreach; Prescribing practices, education. Challenges exist because dentists are often private practice, and do not work in large provider groups the same way that primary care providers do.</i></li> <li>• Workgroup currently has a dentist on group (Dr. Brett Pack). <b>Dr. Butler will follow up with Dr. Pack.</b> Need exists for a veterinarian (also prescribes opioids) on Workgroup.</li> <li>• <b>Christal will update strategies to include approaches for dental community.</b></li> <li>• <b>Should drug court be included as an approach or strategy?</b> <i>Drug court is a subset of superior court – more diversionary approach with community-based treatment instead of incarceration. Successful completion of program will wipe charges from defendants. Okanogan is only county in NCACH region who has a drug court. Chelan County may be interested in drug court. (Will need prosecutor buy-in, as well as superior court judge and</i></li> </ul>



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		<p><i>County Commissioner). Criminal account justice treatment dollars can be used to implement a drug court. Drug court allows for enrollees to have case manager who helps them find housing, employment, and treatment resources. <b>Yes, add drug court as a need/solution.</b></i></p> <ul style="list-style-type: none"> <li>• CPS may be important partner for drug court. A representative from CPS should be invited to Workgroup (<b>Kate will follow up with invitation to CPS and report back to group in February.</b>)</li> <li>• Education in schools: Need exists, and more emphasis on high/middle school prevention education.</li> <li>• Add to proposed approaches – need for data gathering. Look into Local Health Jurisdictions for data across region.</li> <li>• Additional weight should be given to applications that stress partnerships.</li> </ul>
<p><b>5. Application Attributes</b> <i>Christal Eshelman</i></p>	2:05	<ul style="list-style-type: none"> <li>• <i>See above “Strategies” discussion.</i></li> </ul>
<p><b>6. Domain I Linkages</b> <i>John Schapman</i></p>	2:15	<ul style="list-style-type: none"> <li>• Domain I activities: Financial sustainability through value based payments; Workforce [capacity building]; Systems of population health management; <a href="#">See HCA’s Medicaid Transformation page for more information</a></li> <li>• Demonstration funding is provided through 2023 – Opioid Workgroup should consider financial sustainability when picking approaches to implement.</li> <li>• As the application is developed for implementation page – those who incorporate Domain 1 &amp; 2 into their project design will receive higher percentage of potentially allocated award.</li> <li>• <a href="#">See Domain 1 Linkages Resource</a></li> </ul>
<p><b>7. Assignments</b></p>	2:25	<ul style="list-style-type: none"> <li>• <b>Please review NCACH Opioid Initiatives Matrix and send feedback to Christal</b></li> <li>• <b>Review draft of application before February meeting – Christal will send in follow-up 1 week before next meeting.</b></li> <li>• <b>Sign Charter membership agreement and return to Christal</b></li> </ul>

**Next Meeting:** February 16<sup>th</sup> 1:00-2:30PM at Confluence Technology Center (regular meetings are the 3<sup>rd</sup> Friday of the month)