

# **Durham Joins Together to Save Lives Task Force**

## **Mental Health Treatment Committee**

### **Minutes**

**July 13, 2021**

**Attendees:** Donna Rosser, Elijah Bazemore, Helen Tripp, Gudrun Parmer, Carlyle Johnson, Kay Sanford, Keyanna Terry, Sheriff Birkhead, Rod Jenkins, Brittany Agnew, Susan Kornett, Stephanie Eucker, John Anderson, Jesse Battle, Lindsey Bickers-Bock, Florence Okorie-Mazi, Ryan Bell, Cindy Haynes

The group convened, Cindy welcomed everyone and began introductions. She introduced PHMO's OUD Program Coordinator Florence Okorie-Mazi. Florence will work closely with Dr. Gulur, Dr. Anderson, and Dr. Eucker to connect patients with OUD disorder to services.

The minutes were approved with said corrections to Sheriff Birkhead's report. Major Bazemore will email Cindy the corrections.

### **Strategic Planning for Program Sustainability (Group)**

Cindy updated the group that she has reached out to Rev. Bradford with DCIA to schedule a meeting to discuss the faith community, housing, and MAT. She also extended an invitation for him to attend a regular committee meeting. Kay suggested when we speak with Spencer we may need to talk with TROSA about providing housing.

Cindy informed the group that she adjusted the agenda to allow Sheriff Birkhead time to talk with us in regards to the proposed 10% budget cut to support Mental Health Services. She also allotted time at 3:30 for Ryan to provide the data report and moved Major Bazemore report up due to leaving him off during last meeting.

### **Proposed 10% Budget Cut to Sheriff's Office to Support Mental Health**

Sheriff Birkhead reported his office survived the budget process. He thanked committee for support of the Detention Center efforts in mental health and OUD treatment. The Sheriff's Office has already submitted hiring paperwork for 2 approved positions and expects the process to be swift and go through next week. Sheriff attended the County Sheriff's Association meeting and what Sheriff's Office is doing is on national stage and Durham County is looked at as a model for others. We will continue to champion committee and the committee can call on Sheriff Birkhead, Major Bazemore, etc. in future at any time. Dr. Eucker commended work of Sheriff's Office and Detention Center.

### **Alliance Health**

Carlyle reported there no major updates. He is still waiting to hear about Alliance's selection as a tailored plan. Decision are delayed due to several counties reconsidering their options. Alliance is expecting additional SUD funding this year and working on transferring funding to cover RI staff for a month and they have purchased more medications for MAT to expand MAT services for the uninsured.

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

Captain Helen Tripp reported that she is almost finished with June data but not in time for this meeting. She is concerned that percentages of individuals contacted for opioid follow-up during month of May. They are lower than usual.

Opioid-related calls (86)

Attempted contacts (64%)

Actual contacts (20%)

Helen thinks percentage is low due to large number of calls for one person to follow up. EMS handed out 26 Naloxone kits; 7-Visits with peer navigator; 10-visits resulting in referrals to peer navigators.

### **Duke ED Peer Support Services**

Dr. Eucker reported there are no real updates. She is still working on logistics for getting back into the hospital in person.

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

No report

### **DRRC OBOT**

Susan reported DRRC is looking at ability to expand and reach more individuals, decrease barriers, and reduce stigma. RI having an Opioid Summit at end of August. Susan will keep committee updated. Looking forward to post-COVID engagement in community.

### **Housing Update (Group)**

No Report

### **Data Committee Update (Ryan Bell)**

Ryan reported that individuals arriving at DRRC receive a baseline survey, with a 3-, 6-, 9- and 12-months follow-up. He has collected 6-months of surveys based on enrollment. The shared subset of demographics for those having gone through CLC program and additional findings from survey as follows with a baseline of 57 individuals.

### **MAT Knowledge**

- About 1/3 surveyed do not know what MAT is (74% individuals stated they would opt for MAT if they knew what it is).
- About 44% surveyed not on MAT due to uninsured.

### **Personal Medical**

- Pregnancy-Primarily not
- About 75% unemployed
- About 90% not receiving disability

- About 16% do not know HIV status
- Hep C about 12% report positive status
- About 19% do not know Hep C status

## **Housing**

Slight majority (61%) individuals have housing but about 1/3 of individuals feared losing housing.

## **Treatment**

Residential-primarily not. Other responses scattered (No summary).

## **Treatment Referral**

- Majority (60%) warm handoff- Come in within one day of contact.
- 3 Months (20)
- Not everyone eligible for follow-up and some discharged from program before follow-up, so numbers lower. Individuals contacted at in-person meetings rather than over the phone (10).
- Number individuals retained in OBOT for 90-days (9)
- Have not used opioids in last 3 months (70%)
- Have not used other substances (60%)
- Still using MAT (80%)
- Still going to DRRC (80%)
- Individuals finding PSS program helpful and beneficial
- Housing (80% have housing and none in fear of losing housing)

## **Residential Treatment (3 months)**

- Majority not in residential treatment
- Used Naloxone Kits
- Used naloxone on someone else (3)

## **Residential Treatment (6 Months)**

- Individuals retained in OBOT (2)
- One reported using opioids and one was not using. The same for other substances.
- Both still on MAT
- Assumed that both still go to DRRC

## **Housing**

1 Yes and 1 No

## **Residential Treatment**

- 1 Yes and 1 No
- Neither has used Naloxone kits

Lacie shared that of the 57 enrollees, 20 of the 57 were enrolled over 3 months ago. Half of those dropped out. Need to explore reasons and try to increase retention rate.

Ryan said originally, individuals were to be recruited from ED. Looking at medical records data to do comparisons. The majority now are not coming from ED so we are working on increasing medical records data from other sources. We are looking at number of who experienced another overdose during collection period of 12/27/2019-4/23/2021.

From the intervention group, 6 were recruited from ED. Of the 6, no individual experienced an overdose during the collection period.

As a comparison, we created a de-identified list of individuals seen in ED but not at DRRC (n=195). During the collection period, 12% of individuals experienced an overdose.

Ryan stated he also looked at inpatient hospitalizations. One individual from intervention group experienced inpatient hospitalization. While 8% of the comparison group experienced inpatient hospitalization.

Carlyle said he's interested in difference between the intervention and comparison group related to cost of medical care. As Alliance looks at becoming a tailored plan, it may help them make the case that MAT is more cost effective in prevention of OUD/SUD complications (infectious endocarditis or osteomyelitis).

Ryan said he is coding for those now and he will have more of that data available to report.

Cindy said we would welcome reports from Ryan at future meetings.

### **Program Coordinator (CLC Grant)**

Lacie explained that Ryan collected baseline data on CLC program enrollees. The data comes from DRRC on a delay. The actual number of enrollees is 79. Lacie shared different referral sources for participants and enrollee; EMS-79; Detention Center-20; DRRC Crisis Center-40; DUMC ED(Overdoses)-4; DUMC ED (Non-overdose)-2; Project COMET-14; Duke Regional ED (Overdose)-1; Duke Regional inpatient-2; Other referrals and walk-ins-5 to include referrals from syringe exchange.

Most participants come from EMS, good because post-overdose. When individuals arrive at DRRC and take baseline survey, they become enrollees. Ryan reported on the (6) ED post-overdose. An additional 8 individuals to be added from total number of enrollees. Also, able to access medical records for inpatients, but will need new comparison group of inpatients who have not overdosed with a separate analysis of these intervention and comparison groups.

Nearly 50 (\$20) Uber gift cards were distributed to individuals needing transportation to appointments. When Brittany and Catherine meet with patient, they give them a resource folder and naloxone kit. We consider as participant when they talk to patient, consider enrollee when they come to DRRC and complete the survey.

Stephanie asked about difference between participants and enrollees. Lacie explained that agreeing to talk with peer navigator makes an individual a participant. Coming into DRRC and agreeing to complete a baseline survey results in an individual becoming an enrollee. Lacie will share information with Cindy.

Crissi's role at the 3-month mark is to conduct a more in-depth interview. She will continue with 3-month mark enrollees and a 1-month survey with enrollees and participants who will not become enrollees. Crissi, Ryan, and Helen meet every week. We are distributing SUD

Resource Guides and having it translated into Spanish. Crissi will also conduct stakeholder interviews.

Susan thanked Lacie, Ryan and Crissi and everyone working to gather data and expressed appreciation for collaboration with Brittany, Katherine, hospitals, and Detention Center for helping DRRC reach so many individuals.

Lacie mentioned that Brittany and Catherine assist in data collection efforts, while providing assistants to program participants. She asked Donna to provide report on OUD Provider Training Series.

Donna thanked Lacie for providing update on the Live OUD Provider Training Webinar Series, featured on Zoom on May 12th, 19th, and 26th. The recorded version of the series is now available for CEU credit. The recordings will be available through December 31st on Southern Regional AHEC's website. Donna reported there are 175 slots available for credit. Members of the planning committee have been asked to distribute the brochure. Cindy asked Donna to share the brochure with her and see will pass it along to her colleagues. Donna will send brochure to Cindy. Donna also thanked Carlyle and Alliance for securing funding to pay for the training.

### **Detention Center MAT**

Major Bazemore reported they have two new MAT staff (Substance Use Program Supervisor and Community Health Worker). They will come onboard July 26.

As of July 6, we have served 127 individuals:

- Suboxone (80): 60 Men and 20 Women (Since Sept. 2019, 12 Returning to custody),
- Methadone (47): 35 Men and 12 Women (Since Sept 2019, 4 Returning to custody)
- Currently in custody: 4 Suboxone, 2 Methadone (All men).

Major Bazemore reported as we move into the MAT induction phase, we are meeting weekly on Tuesdays to discuss challenges and work them out.

### **Next steps are:**

- Major Bazemore weekly meetings to prepare for MAT Induction Phase
- Cindy to follow up with Rev. Spencer Bradford
- Ryan to present updated CLC data report when new data is available
- Lacie to have the Resource Guide translated in Spanish

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

**\*Our next committee meeting is scheduled August 10, 2021 at 3:00 PM via WebEx and phone.**