

Working Group to Address the Opioid Crisis in the Commonwealth

February 24, 2015

Location: Matta Conference Room, 11th Floor, 1 Ashburton, Boston MA

Time: 4 p.m. to 6 p.m.

Minutes

Members present: Marylou Sudders, Secretary of the Executive Office of Health and Human Services; Chris Barry-Smith, Attorney General's Office; George Bell, General Catalyst Partners; Monica Bharel, MD, MPH, Commissioner of the Department of Public Health; Mayor Bill Carpenter, Mayor of Brockton; Colleen Labelle BSN, RN-BC, CARN, Program Director of the State Technical Assistance Treatment Expansion Office Based Opioid Treatment with Buprenorphine (STATE OBOT B) program at Boston Medical Center; Alan Ingram, Ed.D., Deputy Commissioner, Massachusetts Department of Elementary and Secondary Education; Judy Lawler, Probation Officer, Chelsea District Drug Court; Joseph D. McDonald, Sheriff, Plymouth County; John McGahan, The Gavin Foundation; Fred Newton, President & CEO of Hope House, Inc. (participating remotely via telephone due to geographic distance); Robert Roose, MD, MPH, Chief Medical Officer of Addiction Services at the Sisters of Providence Health System; Cindy Steinberg, National Director of Policy & Advocacy, U.S. Pain Foundation; Steve Tolman, President, Massachusetts AFL-CIO; and Sarah Wakeman, MD, Medical Director, Substance Use Disorders, Center for Community Health Improvement, Division of General Medicine, Department of Medicine, Massachusetts General Hospital.

Members absent: Honorable Paula M. Carey and Ray Tamasi

Workgroup chair Marylou Sudders called the meeting to order at 4:04 p.m. Secretary Sudders thanked everyone for attending the 1st meeting and asked the members to introduce themselves. Members of the working group introduced themselves and then discussed their ideas for how best to achieve the working group's goal, which is to make tangible recommendations to the Governor about how to combat the opioid crisis in the Commonwealth.

Discussion: **Dr. Sara Wakeman** indicated that we need to treat addiction like any other disease. **Alan Ingram** indicated that we need to focus on information, prevention and intervention and need to determine how we will measure success. **Cindy Steinberg** indicated that the death numbers are concerning but we need to take into consideration individuals who are living with pain. Cindy further noted that these are complex problems, which requires complex solutions; simply, making it harder for people to obtain pain medication will not solve the problem. **Chris Barry-Smith** indicated that the Attorney General's interests, related to this issue, cover a wide range from insurance to the prescription monitoring program (PMP). Chris noted that the AG's office would like to see what systems can be put in place at Masshealth. Chris also indicated that the AG's office is focused on cutting back on abuse and diversion through both criminal and civil cases. Chris informed the group that the AG's office is having internal meetings about this issue as well, he will report that information to the group. **Colleen Labelle**

indicated that a big issue is that people do not know what to do – including medical providers, social workers, nurses, OBs and pediatricians. Colleen noted that OBs are not identifying addicted women who are pregnant, which is problematic. Colleen also indicated that we need link providers with resources and put best practices out there. **Dr. Robert Roose** indicated that we need to have better access to care and we need to provide better information and education to providers, families and schools. Dr. Roose further indicated that we could improve the screenings available in schools and the court systems. Dr. Roose highlighted that there is a large amount of scientific evidence to support treatment; we need to push past the fragmented system and stereotypes. **Mayor Bill Carpenter** indicated that he would like to find ways to increase Doctor's participation in the use of the PMP; specifically, permit doctor's aides and assistants to use the system. Mayor Carpenter also indicated that we need to have better zoning laws for sober homes; they need favorable treatment similar to group homes. Mayor Carpenter informed the group that in Brockton all first responders (fire, police & EMS) have Narcan. However, we need a statute that mandates that individuals who receive a Narcan injection go to the emergency department. Mayor Carpenter also indicated that we need to reform section 35 and focus on education in middle school. Mayor Carpenter encouraged the group to look at prevention programs similar to "no first time" and "not my kid" and indicated that the DOJ has a new grant program to fund state task forces, called the Anti-Heroin Grant Program. **Judy Lawler** indicated that we need to focus on education and highlighted the importance of the recovery community, including recovery coaches and navigators. **John McGahan** highlighted the importance of prevention efforts. John indicated that the individuals he works with report using drugs for the first time at the age of 11 – 12. John suggested that we attack this issue the way we attacked tobacco. John indicated that access is a problem, we can't produce enough beds – we must focus on the underlying issues such as lack of education, jobs & housing. John indicated that many people relapse because it's a way to get a roof over their head. **George Bell** indicated that we have 79 days to produce our recommendations, we need to audit what is going on, what policies work and what policies don't work; we need to focus on supply, awareness, education and prevention. George indicated that the solution can't spread like peanut butter – we need to put more weight towards one area to drive results. **Sheriff Joseph McDonald** discussed the fact that, in Plymouth County, the vast majority of inmates in the corrections system are there because of their substance abuse issues. Sheriff McDonald noted that in his experience people don't know how to break the cycle, they don't want to relapse but because of quality of life issues in our cities and towns they do relapse. Sheriff McDonald indicated that the houses of correction are an underutilized resource. **Commissioner Monica Bharel** indicated that she believes we should focus regionally on access to treatment. **Fred Newton** indicated we need to focus on goals that we can accomplish; we need to stop the death and carnage. Fred noted that we know who is most likely to overdose, so we need to get those individuals on medication assisted treatment (MAT). Fred also indicated that insurance companies need to do more. **Steve Tolman** indicated that in 2009 a committee he sat on issued a report for how to approach this issue. Steve noted that we have gotten away from abstinence; we are too quick to prescribe MAT. Steve highlighted that once people are clean and sober we need to give them jobs. Steve indicated that 80% of opioids are sold in the USA and of those sold in the USA 80% come from Florida – pharmaceutical companies need to be held accountable.

Secretary Sudders asked the group to think about how we will measure success? Secretary Sudders indicated that there are a number of things happening in the commonwealth that may help the group:

- Mass Hospital Association is doing work around prescribing opioids in the hospital setting
- Center for Health Information and Analysis is issuing a report about the accessibility of substance use disorder treatment and the adequacy of insurance coverage for such treatment in the Commonwealth

Secretary Sudders asked the group to think about:

- Who the group would like to hear from
- What questions should be posed to the public during the listening tour

Secretary Sudders announced the schedule for the listening tour

- March 10, 2015 , Location: Quinsigamond Community College in Worcester, MA
Time: 4pm – 6 pm
- March 19, 2015, Location: Greenfield Community College in Greenfield, MA Time: 4pm – 6pm
- March 26, 2015 - TBD
- April 2, 2015 - Boston

There was a discussion about medication assisted treatment versus abstinence

Secretary Sudders, summarized the discussion thus far (with other joining in) indicating that there are upstream & downstream issues that we need to focus on, including:

- Prevention, youth education, parent education, supply & demand
- Access to treatment, recovery, harm reduction (narcans) and hope

A broader discussion occurred: Sheriff McDonald indicated that the sheriffs have beds; the sentenced population numbers are low. Sheriff McDonald noted that parents are often happy when their children end up in jail because at least they know they are safe. Other members noted that: there need to be additional options for people when they are released from jail; people reoffend because they have no alternatives; we may want review the way recovery homes are utilized by this population; we should focus on recovery coaches; we should focus on diversion programs; once people are sober they need to be able to get a job. Dr. Sara Wakeman indicated that Portugal has a treatment tribunal that we may want to review. Dr. Wakeman also highlighted the problems people face finding work once they have a criminal record. Steve Tolman noted that we could offer a certificate of recovery through the sheriffs. Sheriff McDonald noted that at the houses of correction individuals have access to OSHA training, servesafe training and can obtain their GED.

The members discussed the schedule for the working group over the next 3 months

- March 9, 2015, 4pm – 6pm, 21st Floor, 1 Ashburton
- March 16, 2015, 4pm – 6pm, 21st Floor, 1 Ashburton
- April 1, 2015, 4pm – 6pm, 21st Floor, 1 Ashburton
- April 13, 2015, 4pm – 6pm, 21st Floor, 1 Ashburton
- May 1, 2015, 9:30 am – 11:30 am, 21st Floor, 1 Ashburton
- May 11, 2015, 4pm – 6pm, 21st Floor, 1 Ashburton
- May 18, 2015, 9:30am – 11:30 am, 21st Floor, 1 Ashburton

Members agreed that each meeting should be used to discuss a specific topic and agreed to the following topics: Baseline; Awareness & Prevention; Supply & Demand; Insurance; and Stigma, Treatment, Recovery & Intervention.

Members agreed that they would email Leslie Darcy (leslie.darcy@massmail.state.ma.us) the following information:

- Names of individuals/organizations that should be invited to present information the group
- Topics that should be presented to the group
- Models used in other states or countries that the group should consider
- Questions that should be posed to the public at the listening sessions

There was a general discussion about information that may be appropriate for the group to review. The following topics were briefly discussed:

- Use of the prescription monitoring program
- What have other task forces done?
- Recovery High Schools
- Project Lazarus, North Carolina
- Prior legislative initiatives
- What can the government do to increase access to treatment and recovery
- What are the steps to treatment, what does someone face when they are trying to obtain treatment in the Commonwealth.
- Better data
- The recovery community should collaborated with schools
- Prevention/education programs, such as: power of no; power of action pledge; and too good for drugs

Things to think about as the group moves forward:

- When individuals propose an idea or a framework it should be accompanied with a recommendation to the working group.
- Our goal is to reduce overdoses and stymie addiction
- The metric used to measure success should be a reduction in overdose deaths.