Opioid Recovery and Remediation Fund (ORRF) Advisory Council

Meeting Minutes March 6, 2024 II:00 am to I2:30 pm

Date of meeting: March 6, 2024

Start time: 11:02 am End time: 12:26 pm

Location: Virtual Meeting (Zoom)

Members participating remotely		Vote I	Vote 2	Vote 3
I	Kiame Mahaniah (non-voting chair designee) – Executive Office of Health and Human Services (EHS)	N/A	N/A	N/A
2	Charles Anderson, MD, MPH, MBA – The Dimock Center	Х	Χ	X
3	Matilde Castiel, MD – Worcester Department of Health and Human Services	Х	Х	Х
4	Maureen Cavanagh – Magnolia New Beginnings	-	Χ	X
5	Gabrielle Dean, LICSW – Brookline Health Department	Х	Х	Х
6	Lisa Golden – City of Lowell Department of Health and Human Services	Х	X	Х
7	Lindsay Hackett – City of Springfield	Х	Χ	X
8	Vaira Harik – Barnstable County Department of Human Services	-	-	Х
9	Adrian Madaro – Massachusetts House of Representatives	-	Х	Х
10	Candice McClory – Lynn Department of Public Health	-	-	X
11	John McGahan – Gavin Foundation	-	-	-
12	Carla B. Monteiro, MSW, LICSW – Grayken Center for Addiction at Boston Medical Center	Х	Х	-
13	Jeffery Olmstead – Amherst Fire Department	Х	Χ	X
14	Andy Ottoson – Berkshire Regional Planning Commission	Х	Χ	Χ
15	Alyssa Peterkin, MD – Grayken Center for Addiction at Boston Medical Center	Х	Х	ı
16	Joanne Peterson – Learn 2 Cope	Х	Χ	X
17	David Rosenbloom, PhD – Boston University School of Public Health	Х	X	X
18	John Rosenthal – Police Assisted Addiction and Recovery Initiative (PAARI)	Х	X	Х
19	Stephanie Sloan – New Bedford Health Department	Х	Х	Х
20	Jennifer Tracey – Boston Mayor's Office of Recovery Services	Х	Х	Х
21	LaToya Whiteside – Prisoners' Legal Services	Х	Х	Х

⁽X) Voted in favor; (O) Opposed; (A) Abstained from vote; (-) Absent from meeting or during vote

Proceedings

<u>Vote to Call to Order</u>: EHS Undersecretary Kiame Mahaniah welcomed members and called the meeting to order with a roll call vote (see detailed record of votes above – Vote 1).

<u>Vote to Approve 12/11/2023 Meeting Minutes</u>: Undersecretary Mahaniah asked if anyone had any edits to the December 11 minutes. Hearing none, he asked for a motion, made by Carla B. Monteiro and seconded by Charles Anderson, to approve the minutes. Motion carried (see detailed record of votes above – Vote 2).

Important Announcements: Julia Newhall, Director of Opioid Abatement, MA DPH Bureau of Substance Addiction Services (BSAS), made announcements regarding (1) vendor selection for the ORRF's Community Grantmaking initiative (RIZE Massachusetts); (2) the upcoming MA Municipal Opioid Abatement Conference (March 19-20, 2024); and (3) updates to the state's Municipal Opioid Abatement Expenditures Dashboard. Highlights of the ensuing discussion are summarized below:

- David Rosenbloom: Inquired whether community grant applicants would be required to also apply to their own municipality for support. Noted that if an organization is unable to secure local support, there is probably a likelihood it will have trouble sustaining its proposed activity.
- BSAS Director Dee Calvert: Confirmed the aim would be to encourage community organizations to apply to their own municipality, but this may not end up being a hard requirement. For instance, grant applicants may propose an intervention that is not tied to their location, or to any single community, such as a camp for children who have lost a parent to OUD.
- David Rosenbloom: Noted the data lag in the Municipal Opioid Abatement Expenditures Dashboard.
- Director Calvert: Agreed that based on the municipal reporting requirements found in the <u>State Subdivision Agreement</u> and the nature of retrospective reporting, there is (necessarily) a lag in the data available on the municipal expenditures dashboard. That said, any new data that municipalities submit is promptly updated in the dashboard on a rolling basis.
- Lindsay Hackett: Clarified that until late 2023, municipalities did not have a mechanism to spend their opioid
 abatement funds directly via the Department of Revenue; essentially, that municipalities like Springfield were
 constrained due to accounting limitations.

ORRF Mission & Vision, Guiding Principles, and Timeline of Council Activities: Undersecretary Mahaniah and Ms. Newhall provided an overview of the ORRF Strategic Framework, including the ORRF's mission and vision, 7 guiding principles, and work accomplished by the ORRF Advisory Council since its inception in 2021. See meeting slides for a detailed overview of these topics.

Overview of ORRF Strategic Priorities and Update on Ongoing and New Initiatives: BSAS Director Dee Calvert provide a detailed update on ongoing and new ORRF initiatives, organized around the ORRF's strategic priorities: Equity, Service Expansion/Enhancement, Workforce Development, Supporting Families, Social Determinants of Health, Data Collection & Analysis. See meeting slides for details on each strategic priority and updates regarding corresponding initiatives.

Introducing New Council Members: Given technical difficulties experienced by a couple members of the Advisory Council, the agenda item of welcoming new members was postponed until partway through the meeting. Undersecretary Mahaniah thanked outgoing members Jennifer Almonte and Kate Lena for their service, and invited Vaira Harik, Barnstable County Department of Human Services, and Candice McClory, Lynn Department of Public Health, to introduce themselves to their Advisory Council colleagues.

Initiative Spotlight: SUD Community Profile Dashboard: Hermik Babakhanlou-Chase, Director of BSAS's Office of Statistics and Evaluation, presented on the state's new Community Profile Dashboard, developed to address communities' SUD data needs. The dashboard integrates a continuum of substance addiction indicators into the first unified view of SUD data in the state, covering all cities, towns, and counties. Ms. Babakhanlou-Chase performed a live demonstration of the dashboard, showing visualizations in each community across three metrics: deaths, emergency visits, and substance addiction services. She also noted additional data the state hopes to

incorporate into the dashboard in the near future, such as demographic data to more directly examine issues of health disparities. Points raised and highlights of the ensuing discussion are summarized below:

- David Rosenbloom: Congratulated staff on this work; agreed that demographic data would be an important
 addition; and inquired about the possibility of accessing CHIA and Medicaid data to get a fuller picture of
 access to care in the state.
- Abby Dean: Expressed appreciation for the great data, and agreed access to CHIA's All-Payer Claims
 Database would help paint a fuller picture, especially in wealthier towns where residents may be accessing
 services through commercial insurance that's not currently captured in the dashboard. That said, she noted
 that even the addition of CHIA data would still leave gaps in the picture, in particular where residents are selfpaying for treatment.
- Ms. Babakhanlou-Chase: Agreed with the goal and next steps of accessing additional datasets like CHIA and Medicaid to provide a fuller picture of services, and noted that starting with datasets from within the Department of Public Health made sense to minimize delays associated with legal hurdles involved in accessing external datasets.
- Joanne Peterson: Expressed appreciation for this data and the great work, and emphasized that there is a family member behind each statistic, and a person with a life story behind each death. Data are people, and she hopes that these numbers are a wakeup call to municipalities regarding the need for services for caregivers.
- Director Calvert: Appreciated the reminder that each number is a somebody.
- Undersecretary Mahaniah: Asked whether there were datapoints that could better capture impact on children and families.
- Joanne Peterson: Noted that such data would still need to be collected, like data on young people who have lost a parent to SUD, and noted the importance of trust/a safe space for people to provide that data.
- Carla B. Monteiro: Echoed the next steps of working to include additional datasets.
- Stephanie Sloan: Noted the more data we can get, the more we can respond. When you hover over a bar, it
 gives you the data specifications of what is being presented, which is really important for people who may be
 incorporating data from the dashboard into their own analyses. Inquired, as a part of incorporating additional
 demographic data, whether the dashboard in future could indicate which populations are being
 disproportionately affected.
- Ms. Babakhanlou-Chase: Responded that next steps being considered for the dashboard include a statewide view that could highlight gender/racial disparities, though having a sufficient "n" (and appropriately suppressing small counts) remains a scientific limitation of the data.
- Jen Tracey: Expressed appreciation for the hard work reflected in the dashboard, which is a leap above and beyond what we had previously.
- John Rosenthal: Expressed gratitude for the work and for reporting that allows us to see opioid abatement
 funds getting out and being used. Inquired whether the dashboard shows where people can access MAT and
 Narcan.
- Ms. Babakhanlou-Chase: Confirmed the dashboard shows Narcan distribution sites, and that the team is working on a MAT flag as well.
- David Rosenbloom: Regarding ongoing initiatives, underscored the importance of program evaluation to help inform deployment of future funds. E.g., for workforce, do we know which SUD providers are staying in the field?
- Undersecretary Mahaniah: Thanked Dr. Rosenbloom for bringing the conversation back to outcomes.

<u>Vote to Adjourn:</u> Undersecretary Mahaniah requested a motion to adjourn, made by Matilde Castiel. Meeting adjourned (see detailed record of votes above – Vote 3).