

Building Bridges: 2019 Recommended Strategies

Opioid Coordination Council

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Jolinda LaClair, Director of Drug Prevention Policy

Jolinda.laclair@Vermont.gov

www.healthvermont.gov/opioid-coordination-council



OPIOID COORDINATION COUNCIL

Opioid Coordination Council Executive Order 02-17; 09-17

- Opioid addiction in Vermont affects "all people, of all ages, in all communities, at all income levels"
- Vermont's opioid crisis results in increased drug trafficking, mortality, and costs to Vermont's resources and quality of life

OCC's Mission

To lead and strengthen Vermont's response to the opioid crisis by ensuring full interagency and intra-agency coordination between state and local governments in the areas of prevention, treatment, recovery and law enforcement activities.





Drivers of Systemic Improvement

Prevention: A "firewall of resilience."

Intervention: Maximum opportunities to connect for treatment and recovery.

<u>**Treatment</u>:** Timely, affordable, effective services for all in need.</u>



Recovery:

- Beyond abstinence: health, relationships, productivity.
- Sustained, wraparound supports: employment, housing, transportation, engagement.

Enforcement: Supply reduction, alternatives to incarceration. Public safety, policing, courts, prosecution practices, corrections. Includes harm reduction.





2018 Insights: How the Drivers Interconnect

- A multi-substance approach to prevention is essential. Substances cannot be siloed.
- Vermont needs a coordinated, comprehensive statewide approach to preventing substance use disorder.
- Intervention is all about human connection.
- There can be no wrong door to services we must weave together Vermont's many resources.
- The first day of treatment is the first day of recovery.
- Stigma thrives in darkness telling our stories generates light.





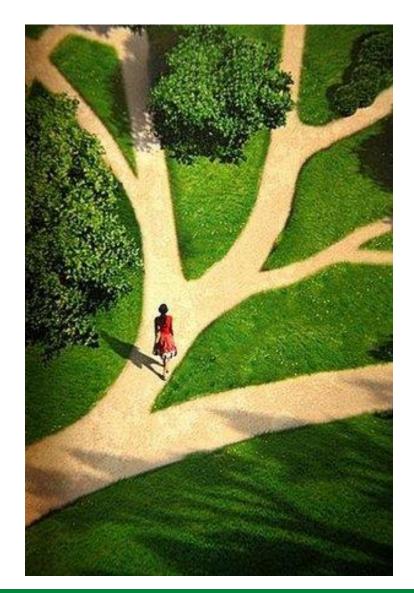
Pathways to Effect Change

Policy: Review of state laws, legislation, policies for gaps and redundancies, and recommend improvements.

<u>**Programs</u>**: Recommend strategies to replicate successes and best practices, addressing gaps and needs.</u>

Infrastructure: How can improvements in the relationships between programs, departments and agencies result in efficiencies and improved outcomes?

Investment: Leverage available and new funds for greatest impact.







Measures

Reduce:

- babies born into addiction
- youth using illegal substances
- total opioid pain relievers dispensed each year
- supply of illicit drugs in Vermont

Increase:

- community & school-based prevention that build wellness and resilience across all drivers, for individuals and family members of those at risk
- people who transition to treatment through intervention services
- people in treatment
- people in recovery who have housing, jobs, and social supports





How we'll recognize progress

Reduced:

- Vermonters with substance use disorders
- opioid-related overdoses and deaths
- children in state custody as a result of SUDs
- frequency and impact of relapse in recovery

Increased:

- Prevention, intervention, treatment and recovery supports available and accessible to all in need
- Vermonters successful in recovery
- Wellness and resilience for children, families and communities across Vermont







The OCC:



Cross-section of leaders, geography, perspectives

Listening: Information-gathering in communities, recovery centers, service organizations, coalitions, state agencies and departments

Years 1 & 2:

- Understanding the relationship between prevention and enforcement, treatment and recovery, and the role of intervention

- Strategy development to address initial findings across prevention, intervention, treatment, recovery and enforcement





Prevention:

• Sustainable investment in primary and secondary prevention, in school- & community-based programs, resources and collaborations.

Priority Strategies

• Statewide, multi-generation prevention care continuum, with screening & sustained home visits for pregnant & parenting women & their children.

Intervention and harm reduction programs and services statewide – Meeting people "where they are" with syringe services, MAT*, SBINS, SUD and mental health professionals, and recovery coaches.

The Recovery Bridge - A home, a job, and human connection (recovery coaching)





Build a comprehensive statewide system of primary and secondary prevention.

Prevention: Infrastructure for primary & secondary prevention:

- Investment model; statewide committee; leadership position; strong collaboratives
- Statewide, comprehensive school-based
- Afterschool programs and out-of-school activities
- Multigeneration prevention care approach for pregnant & parenting women & their children



Intervention: Expand & reinforce intervention & harm reduction statewide. Meeting people "where they are" is key to transitioning those with SUD into treatment and recovery.

- Syringe services programs
- Human bridge of intervention to engage people at critical moments:
 - Screening, Brief Intervention and Navigation to Services (SBINS)
 - Rapid Access to Medication-Assisted Treatment (RAM)
 - SUD & mental health professionals embedded in state & local police departments
 - recovery coaches for just-in-time transitions to treatment & recovery resources





Treatment: Support and expand a statewide system of treatment that ensures timely accessibility to comprehensive care.

Evaluate, improve & increase capacity in the Hub and Spoke system:

- outcomes
- capacity and scope of services

Continue implementing expansion of medication-assisted treatment (MAT) in correctional facilities.





Recovery: Build and support the Recovery **Bridge: Integrate** recovery services across Vermont to ensure access to robust recovery supports is available to all in need.

- Recovery-Friendly Housing
- Employment in Recovery
- Recovery Coaching & Recovery Coach Academy
- Transportation





Support law enforcement efforts to increase resources to address drug trafficking and roadway safety.

Enforcement:

- Support law enforcement's efforts to <u>secure</u> <u>federal and state funding</u> for coordination of and resources for drug trafficking investigations.
- Support improvements in roadway safety address drug impaired driving:
 - legislation allowing for the collection and testing of oral fluid to determine the presence of drugs in impaired drivers
 - adequate drug recognition experts, & funding.



