



Building Bridges: 2019 Recommended Strategies

Opioid Coordination Council

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www.healthvermont.gov/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: Maximize opportunities for connection to treatment and recovery.

Treatment: Timely, affordable, effective services for all in need.

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.

Programs: Recommend strategies to replicate successes and best practices, addressing gaps and needs.

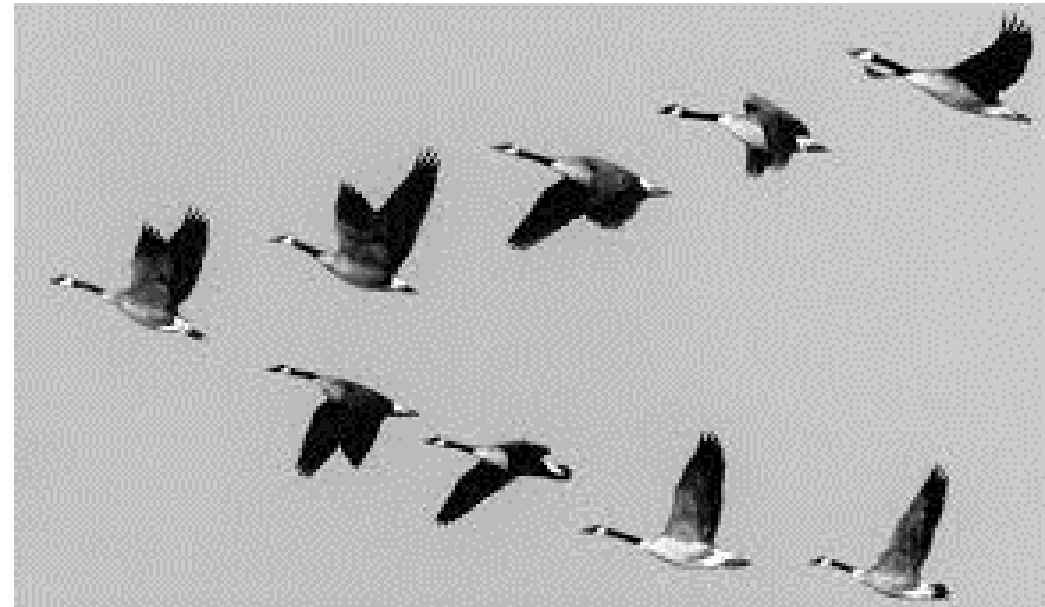
Infrastructure: How can improvements in the relationships between programs, departments and agencies result in efficiencies and improved outcomes?

Investment: Leverage available and new funds for greatest impact.



Goals: REDUCE ...

- incidences of opioid-related deaths
- # of children in state custody as a result of SUDs
- total opioid pain relievers dispensed each year
- # of people with substance use disorders
- # of babies born into addiction
- risk of relapse in recovery
- # of youth using illegal substances
- supply of illicit drugs in Vermont
- incidences of opioid-related crime



Goals: INCREASE ...

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



Figure 2: Number of Accidental and Undetermined Opioid-Related Fatalities Among Vermont Residents

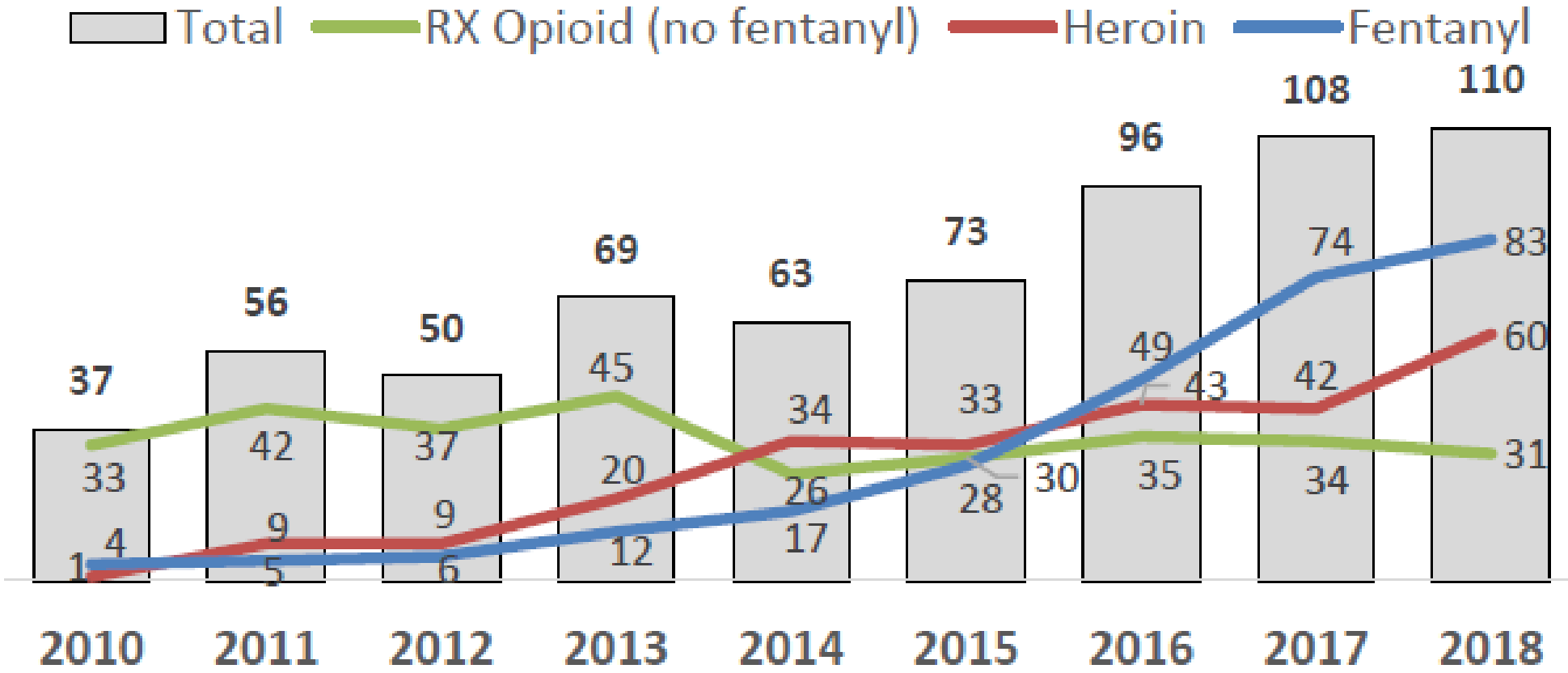


Table 2: Number and Percent of Kids Ages 0-5 in Custody due to Substance Abuse Issues

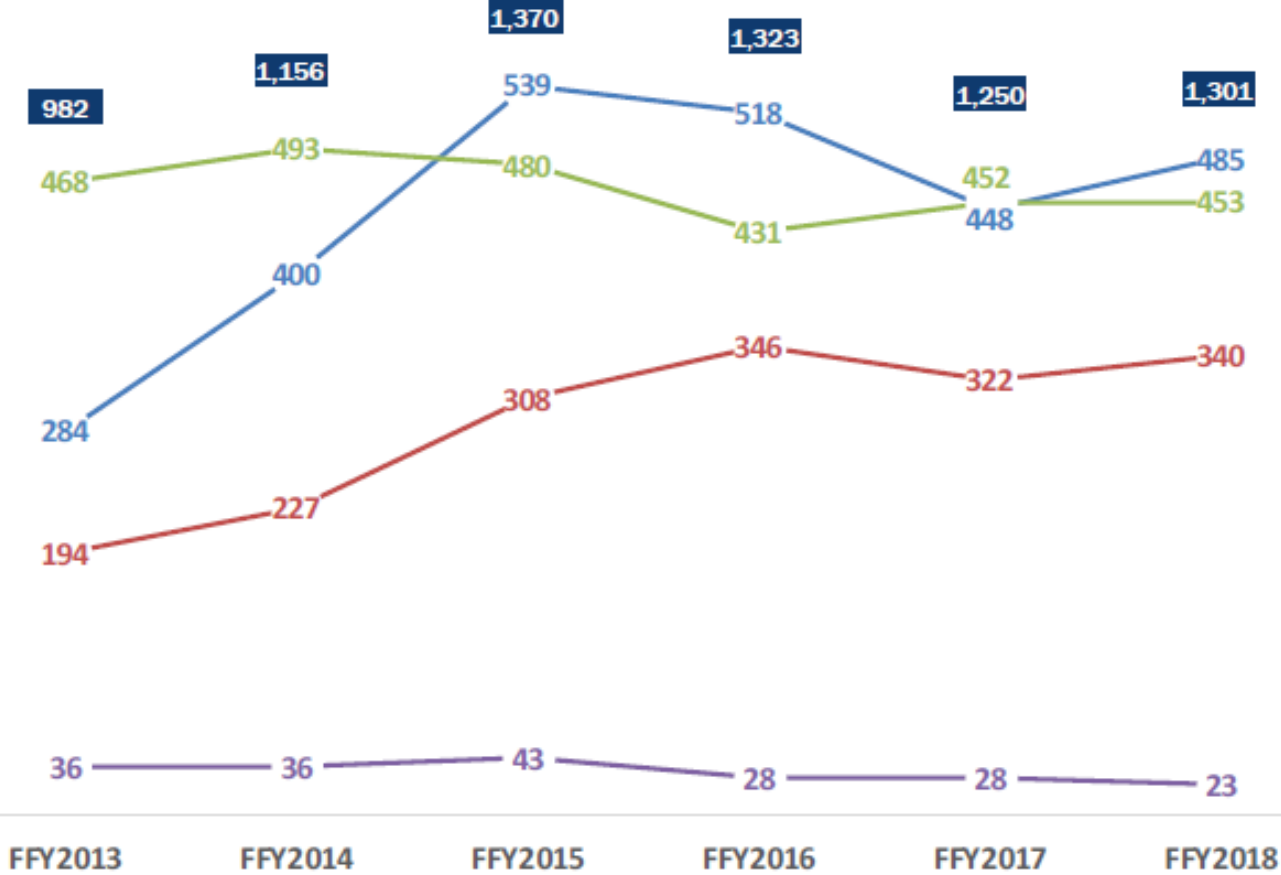
Child's Age	Nov-15	total % of 0-5 Custody Population	Nov-16	total % of 0-5 Custody Population	Nov-17	total % of 0-5 Custody Population	Nov-18	total % of 0-5 Custody Population
0	59	59.00%	55	66.27%	42	59.15%	32	48.48%
1	67	58.77%	58	58.00%	54	64.29%	54	54.55%
2	59	67.82%	54	64.29%	62	62.00%	61	62.89%
3	59	66.29%	70	73.68%	37	54.41%	52	56.52%
4	53	66.25%	53	71.62%	64	68.09%	38	55.07%
5	48	69.57%	39	60.94%	37	67.27%	54	58.06%
Total	345	64.01%	329	65.80%	296	62.71%	291	56.40%

Table 3: Number and Percent of Kids Ages 0-5 in Custody due to Opiate Abuse Issues

Child's Age	Nov-15	total % of 0-5 Custody Population	Nov-16	total % of 0-5 Custody Population	Nov-17	total % of 0-5 Custody Population	Nov-18	total % of 0-5 Custody Population
0	51	51.00%	46	55.42%	29	40.85%	21	31.82%
1	54	47.37%	44	44.00%	43	51.19%	42	42.42%
2	49	56.32%	45	53.57%	50	50.00%	47	48.45%
3	43	48.31%	53	55.79%	31	45.59%	36	39.13%
4	41	51.25%	46	62.16%	50	53.19%	25	36.23%
5	38	55.07%	32	50.00%	32	58.18%	42	45.16%
Total	276	51.21%	266	53.20%	235	49.79%	213	41.28%

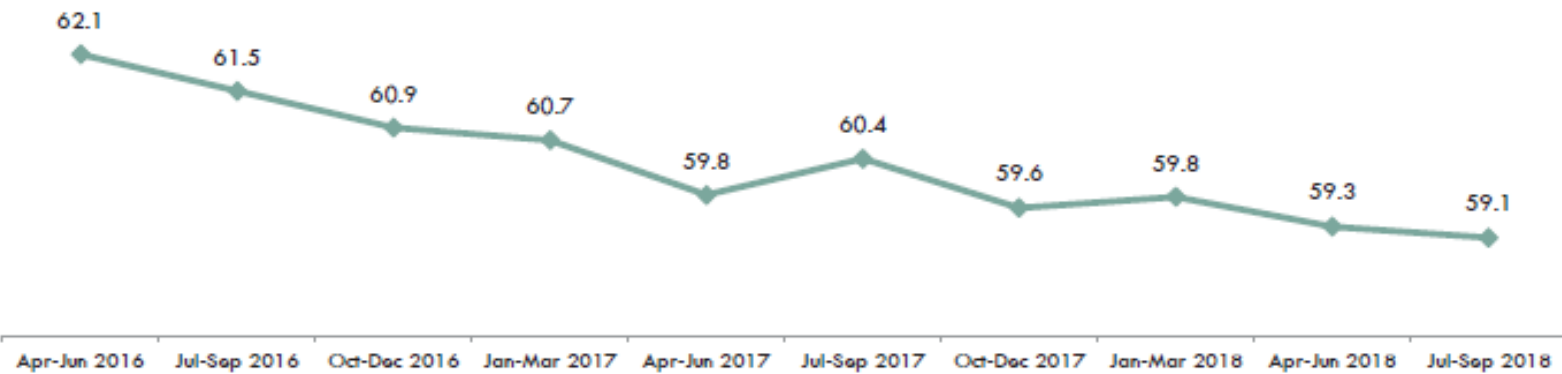
CHILDREN IN CUSTODY BY AGE RANGE AS OF SEPT 30TH

- 0-5 - 6-11 - 12-17 - 18+



Statewide VPMS Quarterly Trends

Vermont Average Daily MME Per Prescription by Quarter



Vermont Total MME Dispensed by Quarter



Priority Strategies

Prevention:

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



Prevention:

Build a comprehensive statewide system of primary and secondary 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

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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



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**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

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Enforcement:

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

- Support law enforcement's efforts to secure federal and state funding 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.

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More OCC Information:

OCC reports, meetings, resources:

www.healthvermont.gov/opioid-coordination-council

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