



One year's progress – the challenge of opioid addiction • 1/9/15

THE CHALLENGE

> **Recognized opioid addiction as a health challenge.**

Governor Shumlin made the case that opioid addiction is a public health and health care challenge in his State of the State address – *January 2013*.

> **Inspired a national/regional approach to the challenge of opioid addiction.**

White House National Drug Control Policy officials visited Vermont to see firsthand what we are doing. Governor Shumlin was invited by the White House to speak about Vermont's path and progress.

> **Hosted a meeting of governors/staffs from New England and New York – June 2014.**

Out of that meeting came a work plan with five priority directions: 1) coordinating substance abuse prevention messages; 2) promoting unified prescribing guidelines for pain management; 3) sharing prescription drug monitoring systems data; 4) integrating opiate addiction into primary care; 5) expanding access to variety of treatment services.

> **Co-chaired National Governor's Association Drug Abuse Academy** with Nevada – *August 2014*. This is a six-state Police Academy to help the state develop and implement a system for eliminating the illicit use of prescription drugs, and preserving access for appropriate use. To be shared through the NGA.

WHAT COMMUNITIES CAN DO

> **Convened Governor's Forum on Opiate Addiction – June 2014** – attended by experts and community members from across the state to share community solutions.

> **Called for community action.** Since the Governor's Forum, the Health Department's 12 district offices have coordinated community forums and follow-up events in all regions of the state involving approximately 500 Vermonters. Community teams have developed action plans with strategies for prevention, intervention, recovery and law enforcement, and identified resources already available, resource gaps, action steps, and how they will measure success.

Example: Springfield's newly formed REACH team (Regional Efforts and Actions now provides a network for sharing resources and educating the community. The film *Anonymous People* has been shown in two communities with a high turnout. Springfield's Turning Point is starting a families addiction recovery weekly support group, and a "Wit's End" parent support group is being piloted in Windsor. A crime and safety committee (Project Action) held a forum in November in Springfield with about 30 participants to collect information on perceptions of the police department's response to drug-related crime in that community. Modeled on Rutland's Project VISION, the group will focus on collaboration between law enforcement and community resources. The next forum is planned for Jan. 20, 2015.

> **Launching 'Vermont's Most Dangerous Leftovers' campaign in 2015.** The Partnerships for Success grant supports regional prescription drug misuse prevention strategies in six Health Department districts. The Health Department has developed a statewide safe storage and disposal of prescription drugs campaign, including outreach materials and social media messaging for each month of the year, to aid community mobilization.

TREATING OPIOID ADDICTION

> **Expanded the Care Alliance for Opioid Addiction.** Fully implemented the Care Alliance for Opioid Addiction – a hub and spoke model of treatment and system of care. Care has become more comprehensive with the addition of supportive health home services.

The number of people *seeking treatment who are getting into treatment* is growing. As of 11/25/14, more than 2,517 people are in treatment in the Hubs, up from 1,704 at the start of the year. The waiting list for Hub placement is 523, the majority (276) for treatment at the Howard Center.

- **SW** – West Ridge Center for Addiction Recovery in Rutland, which opened in November 2013, is treating nearly 400 patients. Serves Rutland and Bennington counties.
- **NE** – BAART Behavioral Health Services, with locations in Newport and St. Johnsbury, opened in January is treating 461 patients. Serves Essex/Orleans/Caledonia counties.
- **Central** – Central Vermont Addiction Medicine/BAART in Berlin opened in July 2013 and now has 282 patients. Serves Washington/Lamoille/Orange counties.
- **SE** – Habit OPCO (Brattleboro and West Lebanon) and Brattleboro Retreat opened in July 2013 and has 442 patients. Serves Windsor/Windham counties.

- **NW** – The Howard Center/Chittenden Clinic in Burlington and South Burlington has 950 active clients, up from 722 the first week in January. Serves Grand Isle/Franklin/Chittenden/Addison counties. There is still an active wait list of about 280, but the combination of active and inactive people on the wait list is 55 percent lower than it was last January.

> **Expanded pre-trial assessment program.** A bill passed in the last Legislative session sets up a process to divert those non-violent drug offenders from being locked up and instead offers the offender a choice – to get into treatment as soon as possible. The first director of pretrial services was hired to train criminal justice professionals on the risk assessment instrument to be used statewide.

> **Supported Recovery.** The 11 Turning Point Recovery Centers located around the state are also supported with grants from the Health Department. Their goal is to support all paths to recovery and to offer peer support to people who are trying to maintain recovery. The Care Alliance treatment centers work closely with the Turning Point Centers to ensure that clients make connections with peer support volunteers.

Another SAMHSA grant recently awarded to the Turning Point Centers' Recovery Network will allow them to place part-time staff with each Care Alliance Hub to focus on peer recovery and support.

> **Distributed 800+ Naloxone Opioid Rescue Kits/80+ Used**

In 2013, the Vermont Legislature authorized the Health Dept. to develop and administer a pilot program to distribute emergency overdose rescue kits. To date, more than 800 kits have been distributed from the six active sites. Of those, 80+ have been used to reverse a suspected overdose, the majority used on suspected heroin overdoses.

Still, deaths from heroin in 2014 are on track to exceed deaths from heroin in 2013.

PREVENTING OPIOID ADDICTION

> **Piloted SBIRT – Screening, Brief Intervention & Referral to Treatment.** We have created a website and tools to help providers conduct screening, brief interventions and referrals – known as SBIRT – at eight funded sites. This is funded by a grant from SAMHSA to expand such services for adults over the next five years. The goal is to make SBIRT a routine part of regular health care practice.

Since February 2014, 12,700 people have been screened.

Collaborations with DVHA have resulted in a VT SBIRT strategic plan for health information technology integration, and integration of the SBIRT approach into the Federally Qualified Health Care system.

> **Enhanced the Vermont Prescription Drug Monitoring System.** The Health Department won an 18 month \$300,000+ grant from the U.S. Department of Justice. This will support the Vermont Prescription Monitoring Program's focus on preventing and reducing misuse and abuse of prescription drugs by, among other things, enhancing data collection and promoting responsible prescribing.