

Substance Abuse Committee
March 21, 2018

Present: Brian Hart, Jennifer Emery, Ellie Collins, Erin Doyle, Lisa Willson, Allison O'Dell, Kernalia Andrews, Joel Yager, Jeanne Chapple, Desiree' Rogers, Ashley Kerrick

Excused: Linda Waite

Minutes:

Approved without changes

Director of Community Services Report – Brian Hart

- **Local 507 Plan Development:** With the Mental Health Law it is required for every County to submit a plan from the three separate committees (Substance Abuse/Developmental Disabilities/Mental Health). Once each committee votes on what they would like in the 2018 plan, then it is sent to the CSB who will vote to accept the plan and send it to the State. It is the committee's due diligence at working toward changes in our community. Looking at licensed services and unmet needs. These are the top 5 Priorities that the committee has come up with:
 1. Transitional Housing – this was a goal last year. We want to assist individuals who meet the criteria to live in a less restrictive environment (half-way house). We want to develop more adult female half-way houses as there is a need in the community. We need to continue to advocate and develop supportive housing for those in recovery. From Doctor to Inpatient to half-way house. You could be on the wait list forever. Our House has a waiting list as it has 12 beds for males and 8 beds for females. Maybe we could expand it to 18 beds for males and 12 beds for females. Drug Court is seeing complicated cases and they are now tracking Mental Health. FLACRA has a crisis center that will take people who are pending for a short period of time, but they need a "bed date" before they will take them. How do we add half-way houses, as we need to fill the huge gap. We can look at expanding the Salvation Army "Our House" beds with capital expansion and basement development. We can look at having supportive housing that would be for individuals to go to after the half-way house. Trinity is working in collaboration with Catholic Charities on substance abuse beds. There is one mixed use in the works. We need unlicensed beds/apartments, using a creative approach by utilizing peers and plug in services like Home Health Care Management. We need to find out more about each program to see why one worked and one didn't. We need to address the back door and find an easy method, as most need some level of support. Agencies can also become landlords.

2. Immediate access to acute services – We need answers within a timely manner. How do we address this? Trinity has been approved detox beds but they are a year to 1 ½ years away. OASAS scatter beds for detox in our area hospitals. St. Joseph's has the BSU and New Dawn. Robert Packer has turned a person away for detox. We need to assure that all components of detox are addressed.
3. Additional funding for individuals in unlicensed beds – to help meet the unmet needs of private pay and those receiving public benefits. Look at individual churches for faith based sponsorships. Also need scholarships until DSS kicks in to assist an individual. Look at what grants are available. Maybe look at operational grants.
4. Comprehensive after planning – these need to be done in the hospitals, as the hospitals need to understand what is out there and available in the community. Hospitals are currently not doing this. They need to partner and have access to peers. This should start while the individual is in detox by contacting New Dawn etc. We need to address a training need for hospital social workers and discharge planners.
5. Peers coming into the hospital – need to develop more peers/peer options. We need to coordinate peer groups for mentoring. Peers can recognize when someone will step out and relapse. We need support for peers as well. Maybe looking at creative funding to pay peers. Trinity has assigned a peer to Drug Court and the peer is doing very well.

There are three items that did not make the list:

1. Integrating substance abuse with primary care and mental health services. HEP C and the opioid population – the medications for HEP C treatment is expensive. We need to continue to encourage Trinity to look into it.
2. Crisis Beds – up to a 48 hour stay. They need a safe place. How do we address this? Maybe have two designated beds for this purpose. The staff to bed capacity needs to be a safe environment for a day or two.
3. Workforce Development – The rate of pay for staff. Our House has interns that only work for a period of time.

Before the meeting next month, Brian Hart will send out a draft you all of you to look at. There will be a formal vote at the April meeting.

Sharing by Community Members

- **Drug Court:** They had their yearly conference. There are some new regulations on confidentiality. They want personal names not agencies on release forms. That could be up to 20 individuals on one release. This has not taken effect yet. For those looking for additional funding, there is money available. You can write grants that have Drug Court involved. One way to get additional staff is to share a staff person with your agency and Drug Court. Desiree' Rogers will send the information out on who has the money available and how to apply.

- **Emergency Dental Care:** Is there any place in the community that will give emergency dental treatment for those who have Medicaid and are in treatment? If the person has Managed Care it's easier to find someone to do it, than if they have straight Medicaid. This is because Managed Care Medicaid pays more to the provider. Chemung Family Dental in Horseheads, no longer is taking Medicaid patients. Wilson in Binghamton is taking dental emergencies. It seems like every month there is a dental emergency and we need to have providers in the Community. They are going to have to discharge someone from treatment so the individual can seek dental treatment. i-Matter will get their list of providers to Brian so he can send out the information to everyone. Family Services will also send the list they have to Brian, so that he can share with everyone.

The next meeting is scheduled for April 18, 2018.