

OPIOID ABATEMENT ADVISORY COMMISSION

OFFICIAL PUBLIC MEETING

DRAFT MINUTES

October 16, 2024

The Opioid Abatement Advisory Commission was held at District of Columbia Hospital Association, 1152 15th Street, NW, Suite 900, Washington, DC 20005 on Wednesday, October 16, 2024. Members of the public were also invited to attend in-person and virtually via WebEx.

Recording of the meeting can be found at the following link:

ATTENDEES

Present

1. Barbara Bazron, Ph.D., Director, Department of Behavioral Health
2. Christopher Watson as designee for Ayanna Bennett, Ph.D., Director, DC Health
3. Ciana Creighton, Deputy Mayor for Health and Human Services (virtual)
4. Christina Okereke, Representative of the Attorney General of the District of Columbia
5. The Honorable Christina Henderson (then Marcia Huff as the Designee), Chair, DC Council Committee on Health (virtual)
6. Edwin Chapman, MD, President Designee, Medical Society of the District of Columbia
7. Jacqueline Bowens, Chief Executive Officer, District of Columbia Hospital Association
8. Michael Pickering, District of Columbia Behavioral Health Association
9. LaVerne Adams, DMin, Chief Executive Coach, Total Life Consultancy LLC (virtual)
10. Demetrius Jones, Certified Peer Recovery Specialist, Wards 7 & 8 DC Prevention Center/DC Recovery Community Alliance (virtual)
11. Larry Gourdine, Program Manager, Psychiatric Institute of Washington
12. J. Chad Jackson, MS, CEO, Ardan Community Living, LLC
13. Beverly Settles-Reaves, PhD, Program Manager, Howard University (virtual)
14. Juanita Price, M.Ed, Chief Executive Officer, Hillcrest Children and Family Center (virtual)
15. Senora Simpson, PTMPH, DrPH (virtual)
16. Melisa Byrd, Interim Director, DC Department of Health Care Finance (virtual)
17. Patricia Quinn, Designated Representative, District of Columbia Primary Care Association

Absent

18. Alexis Squire, Designee, Deputy Mayor for Public Safety and Justice
19. Larry Bing, Certified Peer Recovery Specialist, Leadership Council for Healthy Communities
20. Nnemdi Elias, MD, MPH, Addiction/Internal Medicine
21. Franciso Diaz, MD, FACP, DC Chief Medical Examiner

Call to Order

- Chair J. Chad Jackson called the meeting to order at 9:15 AM.

Quorum Declaration

- Chair Jackson conducted a roll call for quorum declaration.

Approval of Minutes

- Chair Jackson presented the minutes for the July 17, 2024, Commission meeting.
- A motion to approve the meeting minutes was made by Chair Jackson and seconded.
- Christina Okereke noted an error in the minutes on Page 2, specifically in the Family Treatment Court program presentation section.
- Chair Jackson acknowledged the error and proposed an adjustment to the affected section.
- A motion to approve the minutes with the correction was carried by unanimous vote.

Welcome and Overview of Agenda

- Chair Jackson presented and discussed the agenda for the meeting.

Subcommittee Reports

1. Treatment and Recovery Subcommittee

- a. Patricia Quinn, on behalf of Dr. Nnemdi Elias, Chair of the Treatment and Recovery Subcommittee, presented a recommendation to include Nalmefene on the DC formulary.
- Key takeaways:
 - The committee suggested that the DC Board of Pharmacy evaluate the medication to assess its potential in reducing opioid-related deaths.
 - Agrees that any process the district has for adding such medications to the formulary should be thoroughly evaluated, with decisions made by qualified professionals.
 - Treatment and Recovery Subcommittee shares considerable overlap with Live Long DC, though this connection is not consistent. To improve collaboration, the subcommittee has committed to ensuring that at least one member attends all treatment and recovery subgroup meetings for Live Long DC, aiming to create better synergy between both efforts.
 - **Discussion:**
 - Dr. Chapman discussed recent adjustments in overdose treatments due to synthetic opioid increases, highlighting Opvee (Nalmefene) for its faster action and extended effectiveness.
 - Patricia Quinn noted DBH and DHCF's significant support for HIE (Health Information Exchange) onboarding, stressing ongoing training needs.
 - Dr. Bazron emphasized that DBH requires certified agencies to engage in bi-directional communication with the HIE to ensure coordinated behavioral and physical health care. She also confirmed that St. Elizabeth's Hospital would be included in the integration efforts, despite some challenges.
 - Dr. Chapman talked about utilizing systems like the MATTERS (Medication for

Addiction Treatment & Electronic Referrals) system, used in several states for overdose data tracking, noting an unapproved partnership with Howard University.

- Jackie Bowens suggested exploring CRISP integration with the MATTER system and recommended meetings with CRISP to discuss options.
- Chad Jackson supported a subcommittee review of CRISP-MATTER integration, proposing they examine other states' methods.
- Senora Simpson requested full committee reports in meeting minutes, with suggestions and discussions clearly separated.

2. Prevention Subcommittee

- a. The Prevention Subcommittee provided updates from Dr. Christopher "Chauncey" Watson, representing Dr. Ayanna Bennett from DC Health.
- b. Dr. Watson expressed enthusiasm for the meeting and shared insights from the September Prevention Subcommittee meeting, which focused on prevention proposals related to abatement funding sources.
- c. The subcommittee reviewed these proposals and had no additional comments, emphasizing the importance of ensuring that funded initiatives serve both the communities where individuals reside and the environments where they engage in recreational activities.
- d. The subcommittee discussed the drug take-back bid proposals, recommending that ongoing maintenance costs be considered and requesting further analysis of funding costs to ensure that the initiatives would yield a high return on investment.

3. Harm Reduction Subcommittee

- a. Demetrius Jones provided updates from the Harm Reduction Subcommittee regarding the establishment of a recovery high school. The subcommittee is in the process of inviting experts with relevant experience; however, due to time constraints, they were unable to attend the meeting. Lacking key information on population demographics, school selection, and sustainability, the subcommittee recommended tabling the discussion until the next meeting for further research and information gathering.

• Discussion:

- Chad Jackson encouraged the subcommittee to contact him and Dr. Orlando Barker for assistance in involving experts in meetings and assured that necessary resources would be provided. He suggested reviewing the outcomes of the three subcommittee meetings, starting with the Treatment and Recovery Subcommittee's discussion on Nalmefene, and noted uncertainties about the standing order process in DC following Nalmefene's FDA approval.
- Senora Simpson recommended inviting the approving authority to the next meeting to clarify the process for the commission and suggested a panel discussion with experts like Dr. Chapman on current medication best practices.
- Patricia Quinn offered to email the process for adding to the formulary, allowing Chad

and Jackie to determine if a formal presentation is needed.

- Juanita Price raised concerns about the commission's understanding of the review process, emphasizing the need for clarity to keep the public informed.
- Larry Gourdine stressed the importance of further discussing the health information exchange and proposed forming a working group to explore best practices, especially regarding recent advancements in health technology, including AI developments.
- Dr. Barker confirmed that the Office of Opioid Abatement (OAA) would collaborate with the subcommittee to arrange a meeting with Dr. Marshall, which is expected to take place within the next month, before the next quarterly meeting.

Office of Opioid Abatement Report

- Dr. Orlando Barker presented updates on initiatives starting with the new fiscal year, October 1st.
- **Presentation will be attached to minutes.**
- **Key takeaways:**
 - The prevention media campaign and treatment services, which now include extended hours at Children's National Medical Center and integration of peer support.
 - The FEMS Overdose Peer Response Team is administering buprenorphine to individuals post-overdose, while the Youth Prevention Leadership Corps is expanding youth engagement in prevention efforts.
 - Samaritan Inns received funding for housing services that incorporate substance use disorder treatment, and the Transformers Initiative is actively engaging youth and families in Wards 7 and 8 by providing wraparound services.
 - Peer Operating Centers are focusing on workforce improvements, and the Targeted Outreach Initiative has expanded its efforts to Wards 6 and 8.
 - The OCME continues forensic toxicology testing to identify substances contributing to overdoses, while the School-Based Behavioral Health Pilot Program and Opioid Strategic Impact Grants are ongoing, with \$8.3 million allocated and negotiations continuing.
 - Once finalized, grant information will be publicly accessible on the Office of Opioid Abatement website.
 - A decision on the Digital Contingency Management Initiative is pending, and the Youth Leadership Prevention Corps will extend its reach to Wards 5 and 6 this year.
 - The projected total for the Opioid Abatement Fund is around \$14.8 million, with an annual report due by December 31, 2024. A detailed presentation will be attached for further reference.
- **Discussion:**

- Chad Jackson addressed the distribution of over \$27 million in settlement funds held by DC Health and DBH, emphasizing the need for clarity and accountability by year-end.
- Chad highlighted contingency management as an effective recovery strategy and expressed confidence in new digital solutions to navigate previous Medicaid challenges.
- Dr. Orlando Barker noted that the opioid abatement fund was initially allocated to DC Health and then transferred to DBH, with approximately \$13.8 million used and about \$12 to \$13 million still available for new grants.
- Patricia Quinn inquired about fund allocation status, which Dr. Barker confirmed, along with ongoing tracking of FY24 funding and milestones.
- Larry Gourdine and Dr. Bazron stressed the importance of tracking awardee progress and outcomes, with confirmation that all announced grants are being awarded.
- Senora Simpson emphasized the need for effective reporting on fund usage and proposed that grantees present their outcomes, along with raising public awareness about opioid reduction efforts during upcoming elections.

New Business Proposal

- a. Presentation “Homeless De-Encampment Re-Organization: FQHC Involvement” by Coryn Mayer, MS, BSN, RN
 - Coryn Mayer from Whitman Walker presented on the intersection of the opioid crisis and homelessness in Washington, D.C. She highlighted the need for enhanced care coordination and expanded services for individuals affected by addiction and chronic diseases. Key points included the integration of addiction treatment into primary care, particularly through rapid interventions like buprenorphine induction for overdose patients. Mayer also proposed establishing a field hospital to manage opioid-related emergencies, drawing parallels to responses during public health crises such as COVID-19. The presentation emphasized the necessity of coordinated efforts among local and federal governments, healthcare providers, and community organizations.
- **Discussion:**
 - Chad voiced his approval of the initiative and recommended that it be referred to the Treatment subcommittee for further evaluation and suggested revisiting it in the next meeting to determine if it should move forward.
 - Commission questioned whether questioned whether the continuation of the public health emergency status is necessary for the project's implementation.
 - Coryn Mayer noted that the public health emergency status is still in effect federally, but reauthorization at the local level would improve communication between local and federal governments. She also highlighted the importance of seeking legal consultation to understand the implications of this status on the project.

- **Summary: Presentation will be attached to minutes.**
- b. Presentation “District of Columbia Initiative ONEbox™ Initiative” by Dr. Susan Margaret Murphy
 - This presentation focused on enhancing opioid overdose prevention efforts in the district by distributing 2,500 ONEboxes™. Each box is meant to be reused and contains two doses of intranasal naloxone and costs \$199. The distribution is aimed at high-risk areas, particularly in Wards 7 and 8. Target locations for these boxes include public schools, metro stations, and recreational centers.
- **Discussion:**
 - Jackie Bowens raised a question about the appropriate number of resources to distribute, considering both the local population and the significant influx of tourists in the District of Columbia.
 - Dr. Christopher Watson expressed interest in understanding how the proposed number of resources was determined and how this initiative would integrate with existing efforts. He emphasized the need for a comprehensive approach to ensure the initiative complements ongoing programs.
 - Senora Simpson expressed concern that distribution boxes might be discarded by the Department of Public Works. She emphasized the need to address potential issues and inquired about the recyclability of the boxes and their disposal protocols.
 - Juanita Price inquired about the number of companies that manufacture the distribution boxes, to which it was confirmed that no companies currently manufacture them.
 - Chad Jackson assigned this to the Harm Reduction Subcommittee for review.
- **Summary: Presentation will be attached to minutes.**

Public Comment

- Nura Green Lane provided public comments via WebEx.

Adjournment

- Chair Jackson adjourned the meeting at 11:05 am.