

Opioid Settlement Advisory Committee

Date: 12/13/2024
Location and Time: 10:30 - 11
Present: Mark Levine, MD, Kristin Atwood, Shawn Burke, Ruth Hardy, Liz McLoughlin, Scott Pavek, Jess Kirby, Stacey Sigmon, Deb Wright, Joe Magee
Absent: Caroline Butler, Michael Doenges, Monica Hutt, Heather Stein, MD, Madeline Motta, Dane Whitman
Meeting Facilitator and Note Taker: Mark Levine, MD, Sarah Gregorek

Meeting Objectives:		
Agenda Item	Discussion	Next Steps
New member Joe Magee	Joe Magee, Deputy Chief of Staff, Office of Mayor Emma Mulvaney-Stanak, City of Burlington, was appointed to the committee by the Vermont League of Cities and Towns. Joe replaces Mayor Weinberger on the committee.	
Response to applicants that weren't chosen	The Department of Health drafted a response to the community feedback we received from the proposal that weren't chosen. The committee reviewed the response and made a motion. Motion: Senator Hardy - Approve the response to the applicants that weren't chosen. Joe Magee seconded the motion. The committee approved the motion	
DOC proposal application	The Department of Corrections submitted a proposal to the committee on 11/12/24 regarding medication for opioid use Disorder within correctional facilities. Because the proposal was sent after the proposal deadline, the committee should discuss and vote. Motion: Senator Hardy – Decline to consider the DOC proposal because they missed the deadline and suggest they pursue an alternative route for funding through the Governor's budget process.	

	<p>Deb Wright seconded the motion. The committee approved the motion.</p>	
<p>Public Comment Ed Baker</p>	<p>I put a comment in the chat from the O'Neill Institute for National Global Health Law. It's a recent publication at a Georgetown University, and they call attention to the incoming Trump administration and the likely impact on the services that we're all concerned about.</p> <p>I just excerpted one sentence that I think wraps it up clearly, look for an emphasis on drug policy through a criminal justice lens rather than on public health initiatives that include low barrier options for services in the community. I think we're all aware of what we're going to be facing over the next four years.</p> <p>I think what it does for this committee is it really emphasizes the responsibility to keep its focus on low barrier programs for those most suffering in Vermont because we're not going to be getting much federal funds for that. We have the opportunity now to spend millions upon millions of dollars over the next 16 years on this most vulnerable population.</p> <p>Now I want to just take one second to point out what I think is an underlying dynamic of this committee that that needs to be continuously brought to light. It's a quote from Doctor Levine's letter to the legislature on March 10, 2023, and it says "The inescapable conclusion and prevailing sentiment of this committee have been to fund harm reduction and treatment engagement at this early juncture and as increasing settlement dollars become available in subsequent years to then strategically allocate funds for prevention, programming and initiatives.</p> <p>I've attended every meeting and I don't ever remember this committee stating explicitly that it was their inescapable conclusion and prevailing sentiment that they should at sometimes switch from harm reduction to prevention. If anybody remembers that, or if there's a vote on that I'd like to know that because this letter represents that and I think that for grave concern with that dynamic, especially in light of the Trump administration's plans to focus on law enforcement and punitive measures rather than harm reduction and low barrier measures, this particular</p>	

	<p>committee has a responsibility to continue to focus on low barrier harm reduction programs, not prevention. This opioid settlement money was not provided to us to prevent someone from developing opioid use disorder 10 years from now. There are people dying in Vermont every day, every week, or approaching death.</p> <p>I will continue to voice this concern that this committee continues to focus on those about to die, those who need harm reduction low barrier services, not prevention.</p>	
Next Meeting	Monday, 12/23/24 10 - noon	