

Opioid Settlement Advisory Committee

Date: 5/23/2023

Location and Time: 1 – 3 p.m.

Present: Caroline Butler, Senator Ruth Hardy, Monica Hutt, Jessica Kirby, Mark Levine, MD, Scott Pavek, Representative Dane Whitman, Miro Weinberger, Madeline Motta, Heather Stein, MD, Stacey Sigmon, Gwynn Zakov

Absent: Mayor David Allaire, Deb Wright, Chief Shawn Burke

Meeting Facilitator and Note Taker: Mark Levine, and Sarah Gregorek

Meeting Objectives:		
Agenda Item	Discussion	Next Steps
Overdose Prevention Centers (OPC)	Brandon Marshall, Ph.D. Presented on the Science of Overdose Prevention Centers Take aways: <ol style="list-style-type: none"> 1. OPC’s can be cost effective. 2. OPC’s can reduce community overdose rates (close proximity > further). 3. OPC’s can reduce rate of all cause mortality. 4. OPC’s help people enter treatment. 5. OPC’s benefit other outcomes (ED visits, abscesses) 6. Beneficial impacts on public disorder and crime. 7. Providence RI site to open 2024. 8. Less research on mobile OPC’s. 	Inviting Kailin See from OnPoint NYC and Mary Clare Kennedy, University of British Columbia to a future meeting. See presentation on web site.
British Columbia’s Coroner’s Report	Mark Levine, MD Earlier this year the British Columbia’s Coroner released a report. Nearly 600 lives lost to unregulated drugs in first three months of 2023 BC Gov News	

	<p>The headline in the news was nearly 600 lives lost to unregulated drugs in the first three months of 2023. Just like for Vermont, 2022, was a banner year for British Columbia, in terms of the largest number of deaths that they had seen from opioid overdose.</p> <ul style="list-style-type: none"> • 2314 deaths due to toxic drugs is how it was labeled, this was higher than for homicide, suicides, motor vehicle accidents, drownings and fire related deaths combined. They averaged 6.4 lives lost per day from toxic drugs. <p>And the 596 lives lost between January and March of this year was the second highest total ever recorded in the first three months of the calendar year, behind only 2022. The overdose death rate in Vermont was 37/100,000 population; that in British Columbia was 44/100,000. In a province that has 44 OPCs. So, I just put these statistics out there. Not to say, gee, these Overdose Prevention sites can't do any good because it's out of control there. But to put it in perspective, in terms of if we're looking for a magic bullet. It is not. Everything we do together in a multi-pronged approach are abundant bullets and hopefully together they will be more magical than separate.</p>	
<p>Vermonters for Criminal Justice Reform</p>	<p>Tom Dalton Jess Kirby VCJR Overview and Request for Funding Presentation</p>	<p>See presentation on web site.</p>
<p>Vermont Correctional Addiction Treatment Program</p>	<p>Tim Stickle, Ph.D. Nathan Moxley-Kelly, MS Thomas Geist, MS, MA</p>	<p>Connected the UVM group with Vermonters for Criminal Justice Reform. Request from board members to package all of the criminal justice</p>

	<p>Presentation - substance use disorder services: UVM Clinical Psychology Ph.D. program and Vermont Psychological Services</p>	<p>funding requests for consideration this fall including the Treatment Courts. See presentation on web site.</p>
<p>Public Input</p>	<p>Ed Baker – Applauded the committee on the passing of H.222</p> <p>We talk about a multi-pronged approach and overdose prevention centers are the missing prong at this point and I would just direct everyone's attention back to Doctor Marshall's presentation. It was, in fact, overwhelming, unambiguous, unequivocal that these places work and they are the next medically necessary step in Vermont, and this this committee right now, I think, enjoys the responsibility and the possibility of actually making it happen.</p> <p>Robin Rieske, Voices of Hope</p> <p>I worked at ADAP for 31 years and I left in October, and I now work with two grassroots groups and, we work together to get Narcan into the rural areas. We have outreach workers that go into every store, post office, library, and movie theater. Rural populations are very, underrepresented in so much of our work, and I want to plug the community-based grassroots groups that are out there making the connections with the day-to-day people and reducing stigma and discrimination and having those conversations. And I would just love to know more about how to have this conversation with the Committee so that it's recognized that yes, you can have an outreach worker in Brattleboro, but unless that person has relationships with people in the very rural communities, it will be difficult so I want to advocate for that grassroots community development</p>	<p>Sarah has asked Robin to provide a budget request for the committee to review this fall.</p>

	piece of this work and to find out more about how to receiving opioid settlement funding to continue our work.	
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