

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Ron DeSantis
Governor

Scott A. Rivkees, MD
State Surgeon General

Vision: To be the **Healthiest State** in the Nation

Statewide Drug Policy Advisory Council Meeting Minutes

September 8, 2020
8:30 AM - 12:30 PM

GoToMeeting Information Meeting link:

<https://global.gotomeeting.com/join/789412261>

Dial: United States (Toll Free): 1-866-899-4679

Access Code: 789-412-261

Due to COVID-19, the Statewide Drug Policy Advisory Council meeting was held virtually via GoToMeeting. A recording of the meeting can be found here: :
<https://ww10.doh.state.fl.us/pub/dpac/DPAC-meeting-September2020.m4v>

Attendees:

Scott A. Rivkees, State Surgeon General, Chair
Maggie Agerton, for Mark Inch (Department of Corrections)
Lt. Jason Britt, for Terry Rhodes (Department of Highway Safety and Motor Vehicles)
Jeffrey Cece, for Chad Poppell (Department of Children and Family Services)
MAJ Nate Dinger (Department of Military Affairs)
Nathan Dunn, Staff Liaison (Florida Department of Health)
Mark Fontaine (Florida Behavioral Health Association)
Dotti Groover-Skipper (HeartDance Foundation)
Rachel Kamoutsas for Ashley Moody (Attorney General)
Beth Labasky for Peggy Sapp (Informed Families)
Doug Leonardo (Chrysalis Health)
Walter Liebrich (Executive Office of the Governor)
Tracy Shelby, for Simone Marstiller (Department of Juvenile Justice)
Roaya Tyson (Gracepoint)
Nichole Wilder, for Richard Corcoran (Department of Education)
Annie White for Rick Swearingen (Department of Law Enforcement Commissioner)

Guests and staff:

Katie Black (Florida Department of Health)
Michelle Harkness (Florida Department of Health)
Holly Wheeler
Cynthia Henderson

1. Welcome/Introductions/Opening Remarks:

Nathan Dunn, MSA, Strategic Projects Manager, DOH, opened the meeting and introduced Scott A. Rivkees, MD, Chair, State Surgeon General for opening remarks. Dr. Rivkees welcomed everyone and expressed his appreciation for everyone's dedication to DPAC. Dr. Rivkees talked about the status of COVID-19 in

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Florida:

- First case reported March 1st in Florida
- July- 18% positivity rate (11,000 hospitalized)
- Today- under 5% positivity rate, 3300 hospitalized
- We continue to monitor the situation – encouraged everyone to wear a mask, wash hands, practice social distancing, and avoid crowds
- 80% of deaths in Florida are people over 65 years old
- Will continue to track impact of COVID-19 on opioid overdoses and mental health

Business

2. Review and Approval of Meeting Minutes from July 21, 2020

Dotti Groover-Skipper indicated she would like the minutes to reflect that she is no longer with the Salvation Army. The minutes were approved with this one edit.

3. Discuss Recommendations in the 2019 DPAC Annual Report-

Dr. Rivkees reminded everyone that the DPAC Annual Report is due to the Governor's Office in December. Nathan Dunn explained organization of report and track changes he had done. Mark Fontaine suggested recommendations should be in an organized chart/table.

The following group discussion was held regarding the Annual Report:

23 recommendations are a lot – do we want to reduce the number of recommendations? Are there key issues that should be addressed?

Doug Leonardo– reconstituting Office of Drug Control (ODCP)– this is not in there, most likely because Governor had said he was going to reinstate this office; not sure where that landed – Doug feels this should be in the report as it is important to convene other agencies. Dotti Groover-Skipper agrees; we should continue to make this recommendation; this should be implemented. Mark Fontaine– supports the recommendation as well and suggested some of the other recommendations in report would fall under the Office of Drug Control. Mr. Dunn suggested using wording on p. 51 of Statewide Opioid Task Force recommendation report. Where does this recommendation fit in the report? Mark Fontaine suggested it should stand alone – the first recommendation, as it is top priority.

Recommendation #1 (Public Awareness Campaign):

MAJ Nate Dinger - concerned with reducing number of recommendations. He stated that with the huge impact of COVID-19, reducing the recommendations this year may reduce the options for the legislature to support recommendations.

Mark Fontaine – indicated we will be lucky to hold on to the funding we have since state budget has been significantly impacted – we need to be aware of our reality.

MAJ Nate Dinger- funds for prevention efforts are usually the first to be diverted elsewhere – if we give up on prevention, this may be a big problem down the road.

Jeff Cece – block grant – requires spending 20% on primary prevention – there's flexibility with some federal funds.

Mark Fontaine– asked if we are still in need of a public awareness campaign.

MAJ Nate Dinger- stated public awareness campaign is needed due to stigma; many people don't report to their physician; people need to see messages repeatedly.

Mark Fontaine- public awareness campaign should focus on stigma – Nate Dinger and Jeff Cece agree with this.

Jeff Cece– Group should look into evaluation and research on results of stigma campaign. Do people exposed to these campaigns reduce their use or seek treatment more? Mr. Fontaine mentioned that once we start talking about addiction as a health condition and opening door to medication assisted treatment (MAT), stigma can be reduced.

Beth Labasky– supports these statements.

ACTION: MAJ Nate Dinger – agreed to write-up this piece for the draft report – stated he’s in training for next two weeks but will have this done by beginning of October; he will take some of the content from Jeff Cece on p. 22 and incorporate any relevant info into his write-up.

Recommendation #2 (Prevention Efforts):

MAJ Nate Dinger- obtaining support of coalitions would be great – they are covering large areas with few resources; he believes this recommendation should remain.

Mark Fontaine- thinks we should maintain previous funding and not expand. MAJ Dinger suggested putting “increase/maintain.”

Doug Leonardo- stated the group should not be concerned with factors out of its control (such as money availability). The group should not hold back on recommendations because of what others might do; the group should make the recommendations that they feel are needed.

There was a discussion about coalitions.

ACTION: The general consensus was to expand definition of #1 and combine #1 and #2 to make a single recommendation. If metrics can be tied in to show how these recommendations can be effective, they will have much more likelihood of being supported.

Recommendation #3 (Prevention-Youth):

MAJ Nate Dinger- This recommendation goes hand in hand with DOE; strategies should align with community needs.

Mark Fontaine- Schools have resources to do this work because legislature has given \$100 million to schools to deliver 5 hours of mental health training to students. MAJ Dinger mentioned his program is working on an online course designed to satisfy the 5 hours.

Nichole Wilder- substance abuse is included as a topic area under mental health, but there is no specific rule to have a substance abuse curriculum. Each school district can create their own or use whatever they see fit to meet the requirements. The curriculum is not required to be evidence-based. She suggested maybe revising language to make it more concise and focus on evidence-based/evidence-informed curriculum.

ACTION: Ms. Wilder will revise this recommendation.

Recommendation #4 (E-cigarette Prevention Strategy):

Mark Fontaine- SB810 went to the Governor last week – many things in this recommendation are being covered under this bill – not sure if Governor is going to sign the bill.

MAJ Nate Dinger- If SB810 is passed, many of these components/items under this recommendation will have been met.

Dr. Rivkees- mentioned the vaping age was raised to age 21 – so this is covered under Federal regulation.

ACTION: If Governor signs the bill, this recommendation will be deleted from the Annual Report.

Recommendation #5 (DOH Initiative-SBIRT-Evidence-based Practices):

Mark Fontaine- this recommendation should be kept in annual report. This should be revised to clarify

action.

ACTION: Mr. Fontaine agreed to revise this recommendation.

Recommendation #6 (Expanding Naloxone Availability):

Mark Fontaine- suggested that there could be one recommendation containing everything related to Naloxone instead of having several separate items for Naloxone.

ACTION: Jeff Cece- will reflect on recommendations #6-11 to determine whether these should be revised and combined into one section, with the exception of #9, which needs to be moved before #12.

Recommendation #7 (Syringe Exchange Programs):

There was a discussion whether this recommendation should remain or be removed.

Jeff Cece– sees a benefit of leaving it in and feels that it is gaining traction.

Dotti Groover-Skipper– Agrees with leaving it in.

ACTION: It was concluded that Recommendations 6,7,8, and 10 will be left in place. Mr. Cece may provide additional info.

Recommendation #9 (Warm Hand-off Programs):

This recommendation should be moved before #12.

Florida Hospital Association (FHA)-18 Emergency Departments in Florida have warm hand-off procedure.

Mark Fontaine- Suggested AHCA may be able to survey hospitals to see if they have warm hand-off procedures. This would create a baseline.

Nathan Dunn- will look into having a presentation by FHA on this issue.

ACTION: Mr. Fontaine will provide updates/supporting info and the recommendation will be kept in report.

Recommendation #11 (CHDs and FQHCs distributing Naloxone):

Mark Fontaine-asked about HEROS program and CHDs

Nathan Dunn- HEROS program distributes Naloxone to first responders

Mark Fontaine-asked if CHDs are handing out Naloxone at this time?

ACTION: Mr. Dunn stated he will check into whether CHDs are distributing Naloxone.

Recommendation #12 (Programs for Addiction Medicine Specialty):

Mark Fontaine asked if it is known how many physicians in Florida have a specialty in addiction medicine. He suggested maybe Florida Society of Addiction Medicine (FSAM) might know.

ACTION: Mr. Dunn stated he would reach out to FSAM.

Recommendation #13 (Parity):

Mark Fontaine-stated we do not have definite information about whether Florida is in line with the parity rule.

ACTION: This recommendation will remain in the report. Mr. Fontaine will provide updates/other information for the draft report.

Recommendation #14 (Prior Authorization for MAT):

Discussion about reaching out to AHCA to determine what prior authorization process is in place for MAT at this time. And on the commercial side, reach out to Florida Association of Health Plans.

ACTION: Reach out to AHCA and the Florida Association of Health Plans

Recommendation #15 (AHCA Secretary and OIG Commissioner added to DPAC):

This recommendation will remain in the report.

Rachel Kamoutsas- suggested there may need to be legislation to add them to the Council.

Recommendation #16 (Recovery Oriented System of Care - ROSC):

Mark Fontaine-suggested the recommendation remain as there has been great progress on this issue.

Jeff Cece-suggested maybe combining content (ROSCs may be good partners to implement stigma-reduction campaigns).

MAJ Nate Dinger- stated there are two messages (youth and adult); this should remain in treatment section.

ACTION: This recommendation will remain in report.

Recommendation #17 (Individuals with lived experience/peers):

Mark Fontaine-stated legislation has been signed by Governor; there are eight charges that are not counted when applying to be a peer; this legislation has not been implemented.

ACTION: Mr. Fontaine will re-word this in light of legislation and make suggestions for moving forward.

Recommendation #18 (Awareness of Stimulant Use):

Jeff Cece- stated that he did research on contingency management with community reinforcement approach (stimulant use disorders). There are interventions that have already been developed so this piece can be removed. Regarding increasing awareness, this alone isn't going to reduce substance use.

Mark Fontaine – agreed with Mr. Cece and thinks recommendation should be rewritten. He stated the recommendation should include policy change to allow use of contingency management in Florida and promote community reinforcement approach.

Jeff Cece-suggested there should be a presentation to the Council on the community reinforcement approach.

ACTION: Nathan Dunn stated this recommendation will be set aside for now and will be re-visited after the presentation. This recommendation will be deleted from the 2020 report.

Recommendation #19 (Behavioral Health Workforce):

Mark Fontaine- data indicates there will be a lack of psychiatrists in Florida and there is the continued challenge of getting peers and getting medical professionals to work in the field. One thing that is helping with regard to workforce is the use of telehealth. Workforce challenges continue to exist.

Doug Leonardo- there's no financial incentive to get into the profession. Increasing use of telehealth in and of itself is not going to solve the issue.

Roaya Tyson - agreed with Mr. Leonardo.

Tracy Shelby- asked if anyone knew what the average salary is for masters-level clinicians; members did not have that data readily available.

ACTION: Mark Fontaine will review this recommendation and see if he can revise it to make it more precise. Based on his research, the recommendation will either be rewritten or deleted.

Recommendation A (Community Reinforcement Approach Presentation):

This is not a recommendation for the report, but it is more an internal recommendation for DPAC.

The presentation should be on the DPAC agenda.

Supporting information under this recommendation- Nathan Dunn and Jeff Cece stated this could be moved to "Summary of Findings."

ACTION: Mark Fontaine suggested the recommendation be rewritten to reflect need for more training. Jeff Cece stated he is ok with re-writing the recommendation in this manner.

Recommendation B (AHCA-Prior Authorization):

Mark Fontaine and Jeff Cece agreed that this recommendation and recommendation #14 seem duplicative.

ACTION: Mr. Fontaine agreed to look at both of these recommendations and combine them.

Discussion around COVID-19 changes regarding access to care (i.e. telehealth, prior authorization, etc.). Mark Fontaine asked whether there should be a recommendation around continuing these innovations post COVID.

Doug Leonardo-stated there is a white paper listing services being allowed; it was created to in order to have the exceptions become more permanent post COVID.

Mark Fontaine-asked about making recommendations to the Federal government but it was agreed that the report needs to contain recommendations appropriate to the state of Florida. Mark will send information for "Summary of Findings" regarding Federal information.

Recommendation #20 (Safe Medication Storage and Disposal):

Discussion about whether this recommendation should stay in report. Jeff Cece stated there has been a lot of movement on this one; if removed, there would be nothing under this topic. Beth Labasky agreed it should remain and possibly be reworded.

Recommendation will remain in report.

Mark Fontaine asked if this should be placed in the prevention section instead.

Nathan Dunn asked if the group wanted to put this under prevention and eliminate this topic for now.

Annie White stated most recommendations under this topic are at a Federal level; she will take a look and get back to Mr. Dunn with any state-level recommendations.

ACTION: This recommendation will move under prevention and this section will be removed at this time.

Recommendation #21 (Medical Examiner Data Systems):

Nathan Dunn suggested this recommendation can be marked completed.

ACTION: It was agreed that it will be listed as "Complete."

Recommendation #22 (Statewide Dashboard of Substance Abuse Data):

Nathan Dunn asked whether this recommendation can be marked complete. Mark Fontaine indicated this is not completed yet.

ACTION: Mr. Dunn will circle back and ask for any additional information that may be added to this recommendation.

Recommendation #23 (ODMAP Access):

MAJ Nate Dinger stated that he knows they are continuing to expand.

ACTION: MAJ Dinger will get an update to Nathan Dunn and this recommendation will remain in the Annual Report.

End of meeting general discussion:

Tracy Shelby suggested combining Naloxone recommendations.

Mark Fontaine stated a summary of recommendations should be in the report.

Nathan Dunn confirmed that there will be a summary of recommendations.

4. Discuss Recommendations in "Findings and Recommendations of the Statewide Task Force on Opioid Abuse"-

Nathan Dunn stated that the Statewide Opioid Task Force recommendations were taken into consideration while reviewing the DPAC recommendations.

5. Discuss draft 2020 DPAC Annual Report summary of findings and recommendations-

This was completed during the meeting in the course of reviewing the 2019 DPAC Annual Report recommendations.

6. Public Comment-

No public comment was received.

7. Closing and Future Meeting Date-

Dr. Rivkees thanked Council members and meeting attendees for their participation.

Next meeting date: October 20, 2020

Meeting adjourned at 12:20 p.m.