

Mental Health & Substance Abuse Advisory Committee

September 26, 2017

Attendees:

N. Walke, A. Jasinowski, C. Elmquist, P. Farnham, L. Hendry, T. Hanbridge, P. Jackson, W. Eberle, S. Atwell-Hall, A. Donahue

By phone:

G. Cloud, J. Walsh, P. Clark, J. Fels

The meeting opened at 2:30 p.m. Nissa Walke, Assistant Director for the Blueprint for Health, reviewed stages 1 and 2 of the Women's Health Initiative (WHI) – stage 1 encompassed the implementation of the pilot program to women's health clinics and stage 2 involves the extension of the initiative to Patient-Centered Medical Homes. Nissa Walke then introduced the Centers for Medicare and Medicaid Services (CMS) publication for the Accountable Health Communities Health-Related Social Needs (AHC HRSN) screening tool for use in clinical settings recommendation that was released in May 2017, first presented to the WHI Steering Committee in June, approved in September, and explained the decision made by the WHI Steering Committee to revise the existing, recommended WHI screening tool in order to align with the AHC HRSN screening tool for the categories of housing instability, food insecurity and interpersonal violence. Additional information, including the comparison between the updated recommendation for questions, and response options for these categories and the contrast to the previous questions and response options, may be found in the "Women's Health Initiative September 2017" slide deck. The next step before finalization and release of the tool is to discuss the substance use assessment questions with Vermont SBIRT (Screening Brief Intervention Referral to Treatment) in order to ensure alignment with the work practices are involved with across the state through the SBIRT program. Care coordination, its definition, and its role as an essential component to support SBIRT and Initiation and Engagement in Treatment was discussed as an overview. Next, Alexandra Jasinowski, a Blueprint for Health Quality Improvement (QI) Facilitator for the Middlebury Health Service Area, provided a local perspective through reviewing the integrated care coordination model and care coordination work that is occurring in Middlebury. Additional information may be found in the "ICCM Middlebury September 2017" slide deck. Nissa Walke concluded the meeting by noting that the kick-off for the re-designed, virtual Opioid Prescribing Project Learning Collaborative was scheduled for this Friday, September 29th and through involvement of the Blueprint Quality Improvement Facilitators, the project is intended to produce a statewide effect in improving opioid prescribing