

Substance Abuse Committee
April 20, 2022

Present: Brian Hart, Bailey O'Rourke, Glenn Jarvis, Jennifer Emery, Erin Doyle, Anthony Alvernaz, Nicholas Moffe, Shannon Benton, Brandon Beuter, Lisa Appleby, Tatiana Zentz, Joanne Hastrich, Tessa Barnum, Erica Robinson

Excused:

Minutes:

Approved without changes.

Director of Community Services Report – Brian Hart

- **Meth Use:** Brian has been told there has been a dramatic increase in the use of Meth in our area, but he is not seeing it in his numbers. He asked the committee members what they are seeing. New Dawn is seeing a high rate of Meth and alcohol use. A year ago it was opioids, but now they are using Meth and alcohol instead. A committee member stated that there is a definite increase in everything in the area. But they are seeing that Meth that is being used is more potent. Trinity is seeing an increased trend of Meth use. Recently, within the last six months to a year, there has been an increase in fentanyl being mixed in with the Meth, to the surprise of those using the Meth. They thought they were getting the Meth from someone they trusted. Brian looked up the numbers of those needing Narcan and he stated that at this time of the year in 2019 we had 20 overdoses. In 2020, we had 30 overdoses, and in 2021 we had 20 over doses. This year he is still waiting for a report from Erway, but he has only received 8 reported overdoses with three of them refusing treatment. Overall usage is up, due to individuals not be held accountable with testing/treatment due to the pandemic. There are wait lists, and the private sector of therapists have seen a dramatic increase in clients. A committee member asked if agencies in the area provide fentanyl test strips. Currently Trinity does not provide fentanyl test strips, but they are looking into it on how to purchase and provide them. A committee member stated that they could possibly use the opioid settlement money that should be trickling down from Albany to use toward the purchase of the strips.

- **Local Plan:** Brian emailed the committee members a list of 10 or 11 items to prioritize. Brian stated that the top 4 items are Housing, Workforce Issues, Youth Services, and Overdose Follow-up.

As for housing there is a gap in supportive housing services and it is needed. We also should see if Salvation Army would open a second halfway house so they each could be gender specific. A committee member stated that they heard that Second Place East was shutting down and Catholic Charities is opening a warming station instead. Brian stated that there has been some discussion, as the Counties who use warming stations have seen their homeless population drop dramatically. 180 homeless were served this winter. The shelter can only take a handful, so the remainder end up on hotels. There is not adequate supervision in the hotels, as individuals are cooking and using drugs in the hotels. Brian stated that in the warming stations individuals would be given a cot, and

there would be dividers between them, and they are 23 hour warming stations, not 24 hours. Brian did say that Catholic Charities is currently using an old converted church on the south side of Elmira temporarily. This is not certified and not approved by the State. A committee member stated that there is an increase in meth use among the homeless population. There is a need for more supportive services and wrap around services pushed in. The individuals with more severe mental health and use meth, tend to be homeless. A committee member asked if Catholic Charities could separate those in the warming station and put those with MH and Addiction issues in a separate room and provide services. Brian stated that the money that Catholic Charities is receiving is OTDA funding and not OASA funding. Catholic Charities stated that they cannot case manage in hotels effectively. In the warming station there will be staff on-site to supervise.

As for Workforce issues, we need to be promoting the Health Care field, looking at loan forgiveness, and how can we entice workers with incentives. We are at an all-time high of being short staffed. All agencies are dealing with vacancies and having trouble finding qualified/certified individuals to fill the positions. There is a Detention Center that is enticing workers by providing pet insurance and a hiring bonus. Agencies are just stealing workers from other agencies within the same field.

As for Youth Services, we need to provide training for staff on how to work with the youth and provide clinical services to them. As for an Alternative School, we can revisit this but everyone needs to be onboard and we need to have the funding. Can we get OASAS funding for youth recovery treatment? Regulatory changes need to be made for cross over from one system to another. Locally we do not have any cross-system tract for youth with mental health and substance abuse issues. As for early intervention services to provide prevention services, we do have programs in the schools through Trinity. They are working with parents to make them follow through. They are working with grades 7 through 12. When they first started in the schools they were working with Pre-K through grade 6, then they moved to working in the high schools. They have not worked with Pre-k to grade 6 in about 3 to 4 years. Principals are now asking for Trinity to come in and work with grade 6 due to seeing an increase in the use of vaping. They are seeing mental health issues with youth in the schools and are working on coping skills. They are meeting with the BOCES Superintendent to see what services they can offer. A committee member also stated that they are seeing an increase in anxiety in the younger grades. We need preventions to help them cope.

As for Overdose Follow-up, Brian does receive reports from first responders and Erway. We should push for ER information, as once they go to the ER we do not know what transpired while they were there. Did they follow agree to treatment/services or overdose. Previously it has been proposed to have CRISIS contacted on overdoses to follow-up and get them connected with services. There is no consent needed when using CRISIS. A committee member stated that they have been seeing an increase in individuals refusing treatment and services. The local law enforcement does not know why they are refusing, as they have no interest in talking to law enforcement. Brian has been looking over the reports, and there have been no increases in the same individual, same address, or pattern of drug of choice. Most have been in the Elmira area. There has been an increase in those who required multiple Narcan treatments instead of just the one treatment, when emergency personnel arrive on scene. A committee member stated that in another County they send them a referral. The member will send Brian the

information on it. Brian stated that for law enforcement to send a referral they need a release of information signed due to confidentiality, because without it, they are in violation.

Brian stated that last year they had Transportation in the local plan, so individuals can get to the services they need. He asked if the committee wanted to continue with that and the committee members agreed.

Brian stated that last year they had Inpatient co-occurring treatment on the local plan. New Dawn is continuing with harm reduction patient center care. They are continuing to train staff as they are seeing an increase in dual diagnosis (mental health & substance abuse). A committee member stated that we need to continue working on smooth transition from inpatient to outpatient.

Brian stated that the State system to enter Local Plans is not open yet, and June will probably be the earliest to be able to enter it into the system.

➤ **Sharing by Community Members:**

Trinity – They are going to New Dawn to provide Train the Trainer for Narcan. The Department of Health is providing Narcan Kits to every patient that is released.

The next meeting is scheduled for June 15, 2022 via ZOOM.