

**LOUISIANA LEGISLATURE ACT 88:**  
**ADVISORY COUNCIL ON HEROIN AND OPIOID PREVENTION AND EDUCATION**  
**(HOPE)**

Date: September 8, 2022

Time: 9:00 am– 11:00 am

**MINUTES**

1. Call to Order at 9: 05 am
2. Roll Call

***Present:***

Dr. James Hussey  
Lori Miller  
Michael Comeaux  
Allison Smith, Ph. D.  
Shelley Edgerton  
John Ford- proxy: Crystal Stutes

***Absent:***

Linda Theriot  
Captain Heath Guillotte  
Tavares A. Walker, JD, MPA  
Senator Regina Barrow  
Elsie Joan Brown  
Monica Taylor  
Judge Timothy Marcel

\*Due to recount after the meeting, it was determined that quorum was actually not attained, and therefore subsequent voting and related approvals do not represent full quorum.

3. Introduction/Welcome New Members (Tavares Walker, Deputy Director Office of Worker’s Comp). Not in attendance
4. Review and Approval of September 8th, 2022 Agenda- no objection
5. Approval of December 9th 2021, January 27th, 2022, March 19th, 2022, and June 2022 HOPE Minutes, Dr. Allison Smith makes motion to approve all minutes. No objection, all minutes are approved.
6. Presentations:

- a. CA Bridge Program –Overview of Initiative

Sarah Windels and Arianna Campbell presented the following information:

- Vision of California Bridge Program is 24/7 access to evidence based treatment for patients experiencing OUD in every emergency room
- Medications for Opioid Use Disorder (MOUD)- descriptions of each medication and the features. Treats withdraws very quickly. Safe and effective, partial agonist, high affinity to mu receptor, long acting, any clinician can order bup to be started in ED.

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Randomized Clinical Trial (RMT)- giving the patient the medication in the ED doubled the chance of a patient likelihood of being in treatment in a month.

- Discussed the evidence behind MOUD: critical in reducing mortality, BH can be helpful but not w/o MOUD; Medications for the treatment of substance use disorder have not been widely available in **any** treatment setting in the USA. EDs are uniquely positioned to provide treatment access and improve the response of the entire healthcare delivery system.
- In California, as of June 2022, 202 navigators are working in 166 hospitals that offer medication for addiction treatment (MAT) and receive CA Bridge training and technical assistance (TA)
  - Implementing MOUD in a hospital requires identifying a clinical champion; securing funding; training and technical assistance.
  - CA Bridge helps hospitals implement the standard of care needed to support patients with SUDs. Together a clinical champion and a navigator bridge gaps in traditional treatment, linking patients to ongoing care.
- Recommendations of CA Bridge:
  1. Include hospitals and EDs in statewide response strategy.
  2. Provide start-up funding and technical assistance for EDs
    - a. In CA, SOR funds fueled early success for first 52 hospitals. \$100K for 12 months covered champion, navigator. Plus extensive TA support, monthly trainings alongside specific ED deliverables.
  3. Enhance buprenorphine access
    - a. Pharmacists including outpatient and commercial pharmacies must be aware of the importance of buprenorphine and methadone
    - b. Buprenorphine must be on formulary in every hospital
    - c. Remove limits on buprenorphine prescribing
  4. Support treatment navigation
    - a. Establish navigators in EDs throughout the state with the navigation program in Lake Charles as a model
    - b. Community Health Worker benefits will be a sustainable support for navigators
  5. Solidify naloxone distribution in EDs
- Resources: CAbridge.org
- Q&A/ Comments:

Dr. Bridgette Egan discussed challenges and barriers

b. CA-Bridge –Louisiana Experience

Dr. Lacey Cavanaugh spoke about their journey with CA Bridge- She stated that it started with review of data. There was a gap in several death cases where they had recently sought

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treatment at ERs. Once they discovered this gap, they reached out to CA Bridge. They began with a Navigator through the LGE who had funding to use toward this. They got the ER on board. They started with one hospital and now engaged in the Bridge pilot program. Now they are working on the medication access piece.

Chair Dr. James Hussey said a lot of recommendations are centered around this program. He recommend the HOPE council share this information with others, because nothing else is working.

7. General Updates

a. OBH Updates

- 988 (flier)
- September Suicide Prevention Month (flier)
- September National Recovery Month/Governor Proclamation
- Behavioral Health Symposium Sept. 19-21, including full day of info by LA Opioid Action Summit Team. OPH Preconference, OBH Conference host. 2020 Netflix Documentary “The Pharmacist” on 9/19.
- LaSOR 2.0 No Cost Extension submitted/Approved by SAMHSA through 9/20/23.
- LaSOR 3.0 Application submitted, awaiting approval
- OBH-SOR Launched the Regional Recovery Hub Initiative in MHSD, CAHSD, FPHSA, NLHSD & SCLHSA
- RPSS Training (flier)

8. Public Comments

Lonnie Granier said this is a small step, but also a massive step in the right direction for SUD treatment.

9. Discussion and Next Steps

a. 2022 HOPE End of Year Report Update

Call for Impact Data- Dr. Hussey will reach out for updates to the annual data for the report beginning in October.

b. Impact workgroups: HOPE@la.gov

- Public Safety Impact Group- Shelley Edgerton hopes to hold a meeting by the end of September.
- Community Impact Group- Dr. Allison Smith has no updates.
- Healthcare Impact Group –Dr. Hussey reviewed the preliminary recommendations.

c. Other member/Agency Updates or Announcements

- Dr. Allison Smith thanked Region 5 for working consistently on training of naloxone activities and AAHSD for their Opioid awareness programs.

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- Quinetta Womack stated that 30,000 naloxone kits were distributed nationwide through LaSOR. Working with LGEs on disseminating narcan kits and working to expand through additional providers.

10. Adjourn

Next Meeting: Thursday, December 8th, 2022

Meeting adjourned at 11:00am.