**SBPHC Meeting Minutes**

**May 13, 2022 @ 9AM**

**Great Barrington Conference Room, 334 Main St., Great Barrington, MA**

**w/ Remote Option**

 In Person: Pat Levine (Sheffield), Jim Wilusz (Lee), Jayne Smith (Alford), Ellie Lovejoy (Mt. Washington), Gary Pratt (Rural Recovery Resources), Amy Hardt (SBPHC)

 Present Online: Diane Romeo (Lenox), Dr. Henry Schwerner (Stockbridge), Deb Phillips (SB Rural Health Network), Jill Sweet (SBPHC), Martin Mitsoff (Sheffield), Paul Hickling (Brien Center), Kyle Pierce (Monterey COA)

1. **South County BOH conversation around best way to leverage Opioid Settlement Funds**

Pat Levine opened meeting and handed meeting over to Deb Phillips from the Southern Berkshire Rural Health Network, which is a collaboration of organizations that have the aim to improve health in South County. Deb P. introduced the J&J settlement, which has designated an annual settlement amount for each town each year for 15 years. The settlement has provided South County towns with an opportunity to determine what the local impact has been and see if it makes sense to leverage our individual town funds in a way to ensure those impacted are assisted in an effective and efficient way.

There may be additional conversations on how to leverage funds on a county-wide basis, but whatever form the fund distribution takes, it will be helpful to have the conversation with local select boards to ensure that the individual needs of South County are addressed. The guiding principles controlling the use of the funds:

* 1. Save lives;
	2. Use evidence to guide the spending;
	3. Invest in youth prevention;
	4. Focus on racial equity; or
	5. Develop a fair and transparent process on where to spend the funding. (This is the work that we will need to do, both at this meeting and with our towns’ leadership.)

Jayne S. shared that there is approximately $800,000 that will be distributed to South County towns over the next 15 years, based on a formula. While this is a lot of money overall, the length of time over which it will be distributed (15 years) makes it important that we consider the best way to use this funding to sustain programming that South County needs. Ananda T. shared that it if South County pools its funding, it would be about $40,000/year, which is a helpful way to think about how these funds could be put to good use.

Gary Pratt, Project Manager for Rural Resources Recovery (RRR) spoke. The Recovery Center opened April 1st, 2022 on State Rd in Great Barrington. It is a peer support recovery center, funded by HRSA, and partners with several other organizations in South County, including RSYP, Fairview Hospital, Brien Center, BCC, SBPHC and Rural Health Network. There have been various projects, including a focus on implementing a universal screening process in primary care and other health settings. RRR has worked with BCC and Brien to develop training on how to screen properly and create settings where robust and comfortable conversations around substance use can happen, which may lead to a referral for services. A large barrier in the past has been around providers not having a place to send people who have screened positive for substance use disorder. Not everyone needs residential treatment, some people just need support – which is where Rural Recovery Resources comes in. RRR acts as a referral hub. RRR and its staff have the relationships to navigate support systems and provide warm handoffs to people (vs. just a number or flier). RRR is providing a safe space for people who are in recovery and will be providing activities and services (June 11th is the grant opening). RRR service is working to identify and close gaps (like transportation and naloxone training) to ensure that each of the 14-towns of South County are able to support people in recovery. The approach of RRR is to meet people where they are in the recovery process by supporting many different approaches to recovery including being available during the window where people are looking for and need support.

The three-year HRSA grant covers 14 towns of South County and one recovery coach (a second recovery coach is being provided by GB Community Impact Funding). The combined J&J settlement funds are enough to provide long-term sustainability to these efforts by covering things like the South County Recovery Center’s rent, utilities and things like food and allow ongoing services over the course of the settlement. This would provide the time and space to build a meaningful support to the recovery community and allow residents to get help with their recovery in their own community.

Deb Phillips asked each BOH member to share what they see in their community, what things that we would like to see and what our thoughts are on whether you think that collaboration will get us farther than working separately

**What are towns seeing in their communities?** For many of the towns, substance use is an issue that is swept under the rug and is not recognized and is uncomfortable to acknowledge and talk about. There is a lot of work to be done to get past the stigma of substance use so that we can start identifying needs and embracing the need to support initiatives like the recovery center. Substance use is a real issue impacting all of our communities, whether it is acknowledged or not.

South County has had gains in treatment and support for substance use disorders over the past 8 years, but the reoccurring theme is that people are slipping through the cracks because of the lack of warm handoffs and providers to help people in the moment that they are open to, or in need of help, especially with co-occurring factors like a mental health crisis or lack of basic needs. Just having an organization to call that is person-focused will help address recovery needs. If we can build sustainability for a program that meets this need for the next 15 years, it would be a huge leap forward.

Other gaps mentioned include the lack of an Alateen program in the area to support family members and training for responders on how to respond to substance use situations. While social determinants of health needs like housing, transportation, and food security, as well as mental health (upstream root causes) support, still need to be met, with this amount of money the concept of supporting a well-organized recovery system makes a lot of sense. It would, however, be beneficial if some of this money could be focused, perhaps through the RRR, on things like transportation gaps and other accessibility issues.

**What are the next steps?**  There was general agreement that the Collaborative should suggest a collaborative approach to our town governments - small towns are stronger when we work together. This is an initial conversation, and we will need to continue to have conversations around crafting a proposal for the allocation of these funds to present to our individual towns. While not talked about a lot, this is a concern for towns and the fact that the Harm Reduction van was so quickly embraced in our communities lends confidence that town governments are aware it is an issue but don’t know how to solve it. Great Barrington is a good example of how a series of conversations have moved the needle on the town leadership toward acknowledging substance use in their community and being part of trying to support the impact of substance use.

If we can present town governments with a constructive approach it will give towns a way to productively address this issue and it may help remove some of the barriers to talking about it. It was suggested that a recommendation should present information about the funds, what can they be used for, what they look like on an annual basis, what is the breakdown by towns, and most importantly, propose an approach that can make a meaningful impact on our South County community.

It was suggested that the SBPHC form a subcommittee with community partners to formulate both a solid ask and process that could then be presented to each town’s government through whatever means is appropriate for that town.

**Ellie Lovejoy made a motion for the SBPHC to establish a subcommittee for the purpose of working with other organizations to create an action plan for final presentation for membership towns.** Diane Romeo seconded the motion. Role call vote: Alford, Mt. Washington, Sheffield, Gt Barrington, Lee, Stockbridge, Lenox, Otis voted in favor of the motion. Motion passed unanimously.

Deb Phillips thanked the committee and offered to assist with conversations. Gary invited the Committee to visit their website [www.rural-recovery.org](http://www.rural-recovery.org) Pat Levine asked that Gary Pratt and Dep Phillip’s contact information be included in the minutes.

* *Gary Pratt, Project Manager, Rural Recovery Resources:* *gary@rural-recovery.org**, (413) 854-5828*
* *Deb Phillips, Director South Berkshires Rural Health Network:* *dphillips5@bhs1.org**, (413) 429-8776*
1. **Administrative Items**
	1. **Review and Approve April 8, 2022 Minutes:**  Ellie L. made a motion to accept the minutes as written. Jim W. seconded the motion. No discussion. Role call vote. Approved unanimously.
2. **Public Health Nursing Updates**

The PHN team still has N95 masks to distribute. Schools are grappling with increase of cases and we can purchase youth and child sized masks for families through the equity grant applied for by Rural Health Network. The PHN team is working with South County Food Pantry will be sending out a month supply of adult and child sized masks with family boxes. Anyone who would like to have something similar (towns, churches, organizations, etc.) can contact Amy Hardt.

COVID cases are rocketing up and we are solidly in red. As an example, Great Barrington case load has more than doubled its cases and has percent positivity since last week. This number is incomplete because it only picks up PCR test results. South County is a hotspot in Berkshire County, for whatever reason. COVID involved hospitalizations (for both COVID related symptoms and incidental positives) are increasing. The nurses are still calling 65+ or 18 and under and are not hearing that people are having severe symptoms, rather, symptoms are more upper respiratory, with fevers and dehydration being the reported complications.

The PHN are strongly encouraging masking indoors. Businesses and organizations are running into severe staffing shortages as COVID cases peak in their workplaces. There is an over-arching question about how we can continue to function as a society, especially now that there are no funds to pay for workers to isolate and quarantine but the state is still requiring people to isolation/quarantine. The PHN have been thinking about how they can help protect our essential workers by dropping off quality masks to places like retail and grocery stores. It is hard to know how to reach out to organizations. It was suggested that we could reach out to Chamber of Commerce or other outlets to offer support since SBPHC doesn’t have a direct channel.

Pittsfield’s Biobot data gives us a 2-week projection and will help us anticipate the virus levels.

Reduced transmission is beneficial for so many reasons, including complications associated with infection, like pediatric diabetes and kidney disease.

Ruby Chang from the Gt. Barrington BOH was very complementary of the weekly COVID reports at the BOH’s last meeting and wondered if the weekly emails could be published on the GB BOH website to be used as a resource. There was discussion about the role of the collaborative and instead focus on quarterly report and FAQ in lieu of posting the emailed analysis. It was suggested that we could perhaps convert data that towns think would be helpful by putting them on letterhead. We may also want to reach out to BPHA to see what the epidemiologist hired through the contact tracing grant may have to add to public information.

Rebecca J. offered Great Barrington’s antigen tests to be sent out with food pantry boxes and is working to get permission to use the gazebo for rapid tests. Rebecca wondered if there was a mechanism to report rapid antigen tests from the public. The State does not recommend or encourage users to report self-administered test results. It is possible, but it does not get used in stats or other reporting. Not sure SBPHC has the bandwidth to have a local reporting system right now, even though it may be helpful to have the information on severity and strains and give a picture of what COVID looks like in our community. Group may revisit reporting of antigen tests at a future date.

For reporting, we will continue to issue quarterly reports. Welcomed member towns to take a look at the current format and give feedback on if it meets the needs of your community.

1. **Grant Discussion/Updates**
	1. **2022 Car Seat Distribution Grant (and Other):** Jill S. applied for and received the Buckle Up for Life Grant through the state and received 50 car seats. Has not heard from the Toyota Grant yet. Jill is a licensed car seat installer and we were going to slowly roll out this program.
	2. **Health Equity Grant (BHS**): Update included in PHN update.
	3. **RCPORP-BHS Partner Grant:** Jayne S. explained that RSYP asked SBPHC to be part of this grant since they needed community partners to sign on to this grant. The SBPHC role would be to continue to help support opioid initiatives in South County. The grant has been submitted. In the future, the process will be to loop back in with the Collaborative leadership to get input prior to committing to sign on as partners to a grant.
2. **Program Updates**
	1. **IMA/ Articles of Incorporation Update:** We are on the agenda for Great Barrington Selectboard later this month and once we get Gt Barrington’s signatures we will be done with the IMA signing process.
	2. **Shared Folder Update:** Tabled for the next agenda
	3. **Sharps Collection:** Jayne S. is working with Alford, Gt. Barrington, and Tri-Town on discussions regarding getting kiosks and services. It was asked whether the Harm Reduction van can collect sharps. Jayne S. replied that they can but only from community members and not in bulk. Mt. Washington has not heard when the Harm Reduction van will be coming to their community.
	4. **SBPHC URL options**: Jayne S asked whether the SBPHC interested in having their own URL? Tabled for next agenda
	5. **Community Partner Updates:**

**Camp COVID Support**: Question on whether camps are receiving information on available rapid tests. The nursing staff would need to take a 20-min training, but it is a good resource.

**Opioid Settlement Subcommittee**: The subcommittee’s format will be on Zoom and the purpose will be to form a recommendation & proposed process to be reported back to SBPHC at next meeting for approval. We have no idea what the response will be from our individual select boards. It is unclear when the money will start to come in, but it will be beneficial for South County to have a plan to ensure a measurable impact to address the fallout from the opioid epidemic.

Motion: Ellie Lovejoy made a motion to accept the subcommittee members as follows: Pat L., Ellie L., Jim W., and Rebecca J., Amy H.. Jim W. seconded the motion. Accepted unanimously. Ellie L. was designated as chair of this committee.

1. **Upcoming Events/Trainings**
	1. **May 9, 16, 23rd : Chokesaver Courses (GB and Lee)**

<https://www.signupgenius.com/go/10C0F44A4A72AA0FDC70-chokesaver>

Will no longer be hosting weekly courses. May look at hosting quarterly trainings and will decide whether we continue to use David Katzenstein or if we want to transition to in-house training.

* 1. **May 14th, 21 or June 11th: MAHB 2022 Annual Certificate Program Sessions**

<https://mahb.org/2022-certificate-program/>

1. **Next Meeting Date:** June 10th, 2022 to be held in Lee. Details to follow with meeting announcement.
2. **Adjourn Meeting:** Ellie L. made motion to adjourn. Jim W. seconded the motion. Meeting adjourned at 10:30 am