

# The NEW HAMPSHIRE Governor's Commission on Alcohol and other Drugs State Fiscal Year 2020 Annual Report

### Mission

The Commission has a legislated mission to significantly reduce alcohol and drug problems and their behavioral, health and social consequences for the citizens of New Hampshire by advising the Governor and Legislature regarding the delivery of effective and coordinated alcohol and drug misuse prevention, treatment and recovery services throughout the state.

# DEDICATION

To the Citizens of NH, especially the volunteers, first responders, service providers, state and local employees, and elected officials who responded rapidly to the COVID-19 pandemic, ensuring continued, safe access to services for addictive disorders.

### Introduction

The New Hampshire Governor's Commission on Alcohol and Drug Abuse Prevention, Treatment and Recovery, popularly known as the Governor's Commission on Alcohol and other Drugs, presents this annual report<sup>1</sup> as required in RSA Chapter 12-J:4, to update progress achieved in the state fiscal year 2020, July 2019 – June 2020 (SFY2020).

SFY2020 was impacted dramatically by the COVID-19 pandemic. New Hampshire shut down in mid-March 2020 as Governor Sununu issued an unprecedented statewide Stay At Home order. Providers of alcohol and other drug services took extraordinary measures to ensure safe access for those seeking care, with residential treatment provider's remaining open with safety restrictions, outpatient providers quickly expanding the availability of phone and web-based care, and recovery support providers supporting virtual meetings and meetings outdoors. Schools closed and moved to virtual formats requiring school-based services and prevention programs to also become virtual with virtual classes, groups, and individual meetings.

The Governor's Commission on Alcohol and other Drugs (the Commission) also responded rapidly, moving to virtual meetings and modifying agendas and priorities as necessary to adjust to the rapidly changing pandemic working and living environment. In SFY 2020:

- ✓ The Commission held 5 meetings, Commission Members, the schedule and minutes of Commission meetings are available at <u>https://www.dhhs.nh.gov/dcbcs/bdas/commission.htm</u>
- ✓ The 8 Commission Task Forces held a total of 51 meetings, engaging more than 100 members and other stakeholders from across New Hampshire. Each of the 8 Task Forces have a page with meeting schedules, minutes and resources available at <u>https://nhcenterforexcellence.org/</u><u>governors-commission/</u>.
- ✓ The <u>Healthcare Task Force<sup>2</sup></u> created a <u>Summary of Findings & Recommendations<sup>3</sup></u> for legislators and other policy makers to consider in development of technology-based services for the care of Substance Use Disorders. In addition the Task Force partnered with the NH Center for Excellence/JSI to provide key information during the national public health emergency in response to COVID-19 pandemic to create and disseminate the <u>COVID-19 & SUD Federal/State</u> <u>Guidance<sup>4</sup></u> document.
- ✓ Beginning on January 1, 2020, <u>per NH statute</u><sup>5</sup>, all NH pharmacies are required to include the <u>Opioid Information Card</u><sup>6</sup>, developed by the <u>Opioid Task Force</u><sup>7</sup>, with all opioid prescriptions along with an orange sticker on the prescription bottle cap stating "opioid" and a warning label on the bottle stating "Risk of addiction and overdose". The Perinatal Substance Exposure Task Force<sup>8</sup> continued to support <u>Plans of Safe Care</u><sup>9</sup> implementation providing training and resources.

<sup>&</sup>lt;sup>1</sup> Documents and websites referenced in this document are hyperlinked for easy access. Web addresses are included in footnotes for access in printed copies.

<sup>&</sup>lt;sup>2</sup> www.nhcenterforexcellence.org/governors-commission/integrated-healthcare-workgroup/

<sup>&</sup>lt;sup>3</sup> http://<sup>1</sup>viuw<sup>040</sup>k<sup>2</sup>mx<sup>3</sup>a<sup>7</sup>mwz<sup>1</sup>lwva<sup>5</sup>-wpengine.netdna-ssl.com/wp-content/uploads/<sup>2020</sup>/<sup>06</sup>/HCTF-TechBasedCareSUDRecommendations.pdf

<sup>&</sup>lt;sup>4</sup> www.nhcenterforexcellence.org/covid-<sup>19</sup>-substance-use-disorder-information/

<sup>&</sup>lt;sup>5</sup> legiscan.com/NH/bill/HB<sup>359</sup>/<sup>2019</sup>

<sup>&</sup>lt;sup>6</sup> <sup>1</sup>viuw<sup>040</sup>k<sup>2</sup>mx<sup>3</sup>a<sup>7</sup>mwz<sup>1</sup>lwva<sup>5</sup>-wpengine.netdna-ssl.com/wp-content/uploads/<sup>2019</sup>/<sup>09</sup>/FINAL\_Opioid\_Info\_Card\_<sup>8\_29\_2019</sup>.pdf

<sup>&</sup>lt;sup>7</sup> nhcenterforexcellence.org/governors-commission/opioid-task-force/

<sup>&</sup>lt;sup>8</sup> nhcenterforexcellence.org/governors-commission/perinatal-substance-exposure-task-force/

<sup>&</sup>lt;sup>9</sup> nhcenterforexcellence.org/governors-commission/perinatal-substance-exposure-task-force/plans-of-safe-care-posc/

- ✓ The <u>Treatment Task Force<sup>10</sup></u> continued its review of Involuntary Civil Commitment including a virtual Listening Session with over 50 stakeholders from throughout NH.
- ✓ The Commission released its first cost effectiveness report on January 1, 2020, the <u>Cost</u> <u>Effectiveness of SubstanceUse Disorder Treatment in NH<sup>11</sup>.</u>

This Annual Report provides the link to access the <u>Governor's Commission on Alcohol and other</u> <u>Drugs Data Dashboard</u><sup>12</sup>, updates on the progress made in state fiscal year 2020 on the strategies outlined in <u>Expanding Our Response</u><sup>13</sup>, and shares the June 2020 Commission Financial Report.

<sup>&</sup>lt;sup>10</sup> nhcenterforexcellence.org/governors-commission/treatment-task-force/

<sup>&</sup>lt;sup>11</sup> <sup>1</sup>viuw<sup>040</sup>k<sup>2</sup>mx<sup>3</sup>a<sup>7</sup>mwz<sup>1</sup>lwva<sup>5</sup>-wpengine.netdna-ssl.com/wp-content/uploads/<sup>2020</sup>/<sup>01</sup>/Cost-Effectiveness-Treatment\_January-<sup>1</sup>-<sup>2020</sup>-<sup>1</sup>.pdf <sup>12</sup> nhcenterforexcellence.org/resources/data/nh-gov-commission-action-plan-dashboard/

<sup>&</sup>lt;sup>13</sup> http://<sup>1</sup>viuw<sup>040</sup>k<sup>2</sup>mx<sup>3</sup>a<sup>7</sup>mwz<sup>1</sup>lwva<sup>5</sup>-wpengine.netdna-ssl.com/wp-content/uploads/<sup>2019</sup>/<sup>02</sup>/FINAL-Gov-Comm-<sup>1</sup>\_<sup>16</sup>\_<sup>19</sup>rev.pdf

# Data Dashboard

The Commission maintained the online <u>Governor's Commission on Alcohol and other Drugs Data</u> <u>Dashboard</u><sup>14</sup> which tracks the measures of progress included in <u>Expanding Our Response</u><sup>15</sup>. This Dashboard is updated as data becomes available and has replaced the Data Dashboard section of Governor's Commission Reporting. Please review the Dashboard online and contact the <u>NH</u> <u>Center for Excellence/CHI</u><sup>16</sup> with any questions or comments. An example of the dashboard, below, indicates that drug overdose rates continued to decrease in calendar year 2019 and that the objective of decreasing by 25% was within reach prior to the COVID-19 pandemic.

Our overarching GOAL is to reduce the

implementation of effective programs,

misuse of alcohol and other drugs

across the lifespan through the

practices and policies.

#### NH Governor's Commission Action Plan Dashboard

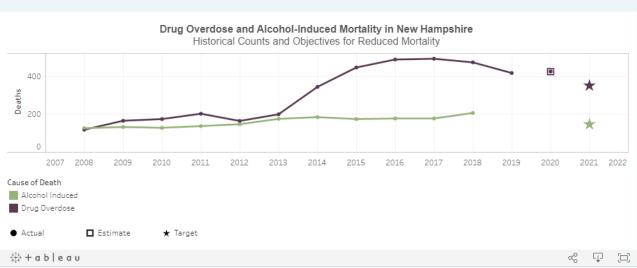
Expanding Our Response is the New Hampshire Governor's Commission on Alcohol and other Drugs Action Plan to comprehensively address our state's addiction crisis.

This Action Plan dashboard tracks our progress on four main objectives for accomplishing our goal over the period January 1, 2019 to December 31, 2021.

Objective it: Our Primary Objective is to reduce the number of lives lost to drug and alcohol use.

Specifically, our targets include:

1.2: Decrease the number of alcohol-induced deaths by 15% by 2021.



*Data source*: NH Office of Chief Medical Examiner, Drug Death Data Report, as of September 2020. Centers for Disease Control and Prevention, National Center for Health Statistics. Underlying Cause of Death on CDC WONDER Online Database, last accessed September 2020.

Accomplishing our primary objective also requires progress on reducing negative health consequences of alcohol and other drug use, increasing access to and participation in treatment and recovery support services, and ultimately reducing the prevalence of alcohol and other drug use in New Hampshire. Our objectives in these areas include the following.

<sup>1.1:</sup> Decrease the number of drug overdose deaths by 25% by 2021.

<sup>&</sup>lt;sup>14</sup> www.nhcenterforexcellence.org/resources/data/nh-gov-commission-action-plan-dashboard/

<sup>&</sup>lt;sup>15</sup> http://<sup>1</sup>viuw<sup>040</sup>k<sup>2</sup>mx<sup>3</sup>a<sup>7</sup>mwz<sup>1</sup>lwva<sup>5</sup>-wpengine.netdna-ssl.com/wp-content/uploads/<sup>2019</sup>/<sup>02</sup>/FINAL-Gov-Comm-<sup>1</sup>\_<sup>16</sup>\_<sup>19</sup>rev.pdf

<sup>&</sup>lt;sup>16</sup> Go to <u>nhcenterforexcellence.org</u> or email <u>nhcenterforexcellence@jsi.com</u>.

# Strategies Update

The following pages include each strategy outlined in <u>Expanding Our Response</u><sup>17</sup>. The status is updated to include Complete, Action, Preparation, or No Action during the 2020 state fiscal year. There has been significant progress on almost every strategy. An example of the progress made by a task force or Commission member Department is included, it is not meant to be all inclusive of the statewide progress in that strategy.







Perinatal Task Force





Joint Military Task Force



Data and Evaluation Task Force



Treatment Task Force



**Prevention Services** 



Administrative Office of the Courts



NH Department of Health and Human Services



NH Department of Corrections



NH Department of Safety



Liquor Commission



National Guard

Suicide Prevention Council

<sup>17</sup> Expanding Our Response pages <sup>6</sup>-<sup>11</sup>, http://<sup>1</sup>viuw<sup>040</sup>k<sup>2</sup>mx<sup>3</sup>a<sup>7</sup>mwz<sup>1</sup>Iwva<sup>5</sup>-wpengine.netdna-ssl.com/wp-content/uploads/<sup>2019</sup>/<sup>02</sup>/FI-NAL-Gov-Comm-<sup>1</sup>\_<sup>16</sup>\_<sup>19</sup>rev.pdf

1. Law Enforcement	Status	Example of Progress	
Continue to coordinate and support enforcement actions	Action	The NH State Police Narcotics Inv Unit and the Mobile Enforcement with local and federal agencies the the state to address drug offense arrests, drugs/weapons seizures, funds were intercepted. The State Forensic Lab provided analyses of on the streets as well as toxicolog of body fluids for the presence of scene assistance with clandestine	Team worked aroughout s. Numerous and illegal e Police f drugs seized gical analysis drugs, and on
		Through funding received via the alcohol compliance checks increa the state.	
Support and expand law enforcement drug expertise	Action	Members of the Narcotics Investig Unit work closely with local law e agencies and the NH Police Acad that proper training was received who investigated drug crimes.	nforcement emy to ensure
		The division continued to support by providing drug recognition tra advanced roadside impairment de enforcement training.	ining and
		The Judicial Branch, through the Program, provided free training for enforcement; including best practicidentification.	or law
Continue to pursue the prosecution of drug related cases	Action	The State Police Narcotics Investi assigned Troopers to the FBI and collaboratively investigated nume scale, regional, national, and inter cases.	DEA and erous large-
		Provided criminal analyst support law enforcement agencies in order prosecution of drug cases.	

Continue to expand local law enforcement of drug laws	Action	The State Police Narcotics Investigations Unit partnered with numerous local agencies statewide to collaboratively interrupt and discontinue illegal drug operations. In 2019, these collaborative efforts resulted in nearly 100 arrests throughout the state with large quantities of Fentanyl, Methamphetamines, and other illegal drugs seized.
		The division continued to support local agencies by providing drug recognition training and advanced roadside impairment detection and enforcement training.

2. Prevention	Progress	Example of Progress
Identify and invest in new programs, policies and practices	Action	Commission funding was invested in multiple prevention activities.Prepared for implementation of the PurpleStar initiative in partnership with the Dept. of Education. The program will provide professional training as well as direct support for schools to recognize and celebrate military youth in 25 pilot schools.
Expand existing prevention programs	Action	Expanded Grandparent/Relative Caregiver         Navigation Program.         Supported local community coalitions across         the state, supporting the development of         local strategic plans to implement prevention         activities.
Develop systems to improve prescription drug storage and disposal	Action	Beginning on January 1, 2020, per NH statute, all NH pharmacies are required to include the Opioid Information Card, developed by the Opioid Task Force, with all opioid prescriptions along with an orange sticker on the prescription bottle cap stating "opioid" and a warning label on the bottle stating "Risk of addiction and overdose".
		The NH National Guard Counterdrug Program physically collected, transported, and incinerated 12,266 pounds of unused prescription drugs. We worked in partnership with the Drug Enforcement Administration and 129 local law enforcement agencies.



Investment recommendation for the expansion of Multi-Tiered Systems of Support for Behavioral Health and Wellness including Student Assistance Programs in NH school districts was funded by the Commission.

3. SUD Delivery System and	Status	Example of Progress	
Early Identification Create the Doorway System	Complete	Frank ON ST	Continued to support the system of nine regional Doorways which are access points for individuals to be screened for needs, then assessed and provided with referrals to treatment and recovery services and supports for OUD, as well as assistance in accessing needed services in the areas of health insurance, housing, and employment.
Implement centralized website	Complete		The centralized website for information is The Doorway, https://www.thedoorway.nh.gov/ where individuals can access resources and information about NH prevention, treatment and recovery services and supports.
Create mobile crisis response teams			The NH State Police have members trained in Crisis Response. Request for Proposals for the creation of mobile crisis response teams were posted.
Expand behavioral health telehealth services	Action	Constant of the	Telehealth services for the treatment of SUD rapidly became widely available in response to the COVID-19 pandemic and the statewide stay at home order in the Spring of 2020. Even as COVID restrictions are dialed back, many providers continue to utilize telehealth and recent changes to state law remove many of the previously existing barriers to providing telehealth.
			Prior to covid-19 a few drug courts were using telehealth. Once covid-19 shut down in person court hearings all of the drug courts implemented telehealth; including individual counseling, IOP, case management, recovery support services, and remote court hearings. Implementing telehealth infrastructure within Correctional Facilities.

Implement SBIRT in multiple	Action
settings	



Provided SBIRT in local/regional home health agencies.

Screening completed at intake and there is a brief intervention and referral system within Corrections.

4. Harm Reduction	Status	Example of Progress
Develop and implement syringe service programs	Prepara- tion	Reviewed syringe service programs and recommendation for investment was accepted by the Commission.
Expand availability of free naloxone	Action	The Doorways18 continued to be the focal point for efforts to widely distribute Naloxone at no charge to individuals and community organizations. Free naloxone distribution expanded through the Doorways, RPHNs, and BDAS.
Distribute naloxone to those at greatest risk	Action	The Doorways continued to be the focal point for efforts to widely distribute Naloxone at no charge to individuals and community organizations. Every person who presents for care at a Doorway is offered a free naloxone kit.
		Facilities provided Narcan as a voluntary option for those leaving with OUD at time of release, and provided naloxone to probationers or parolees at risk for free in the community through probation and parole officers.

5. Treatment	Status	Example of Progress
Support integration of behavioral health and healthcare	Action	All individuals who contacted 211 and the Doorways were screened for all needs, including mental health, and provided information about available resources and services. 12 hospitals provided MAT through 23 networked physician practices. Several initiated buprenorphine in the ED. MCOs were required by their contract to promote integrated care and SUD treatment contracts required communication with other providers in the network.

<sup>18</sup>thedoorway.nh.gov/

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Support availability and effective use of MAT	Action		Contracted to develop capacity of hospital- based systems to increase availability of MAT through primary care practices and to improve delivery of services and referral to additional SUD treatment by ED staff.
			SOR also supports training and monitoring of prescribers to provide MAT.
Expand access to MAT in multiple settings with specialty populations	Action	A RES OF OW	Supported delivery of MAT through community providers, to pregnant and parenting women, and individuals preparing to re-enter the community from State correctional facilities.
			Medication Assisted Treatment Initiatives and Narcan Distribution combined with Re-Entry Care Coordinators.
Utilize technology and innovative practices to provide treatment in limited resource areas	Action		Created a <i>Summary of Findings &amp;</i> <i>Recommendations</i> <sup>19</sup> for legislators and other policy makers to consider in development of technology-based services for the care of Substance Use Disorders. In addition the Task Force partnered with the NH Center for Excellence/JSI to provide key information during the national public health emergency in response to COVID-19 pandemic to create and disseminate the <i>COVID-19 &amp; SUD Federal/State</i> <i>Guidance</i> <sup>20</sup> document.
			Most providers utilized telehealth in response to COVID restrictions however, the remaining barrier is access to technology and/or internet primarily in the North Country.
Develop a mechanism for obtaining real-time treatment vacancy data	Prepara- tion	FARE OF ST	Planning to develop a bi-directional reporting system to obtain real-time treatment vacancy data.
Expand access to extended- release naltrexone for citizens returning to the community from incarceration	Action		The Drug Court worked to identify individuals who could benefit from these medications and set up intakes prior to release.

<sup>&</sup>lt;sup>19</sup> http://<sup>1</sup>viuw<sup>040</sup>k<sup>2</sup>mx<sup>3</sup>a<sup>7</sup>mwz<sup>1</sup>lwva<sup>5</sup>-wpengine.netdna-ssl.com/wp-content/uploads/<sup>2020</sup>/<sup>06</sup>/HCTF-TechBasedCareSUDRecommenda-tions.pdf
<sup>20</sup> nhcenterforexcellence.org/covid-<sup>19</sup>-substance-use-disorder-information/

Increase specialized treatment services for specific populations	Action		Supported supplemental room and board payments for contracted SUD residential treatment providers. The Drug Courts increased specialized treatment though various treatment modalities.
Expand services and increase care coordination for citizens returning to the community	Action		Partnered with the Department of Corrections to fund care coordinators at the women's and men's State correctional facilities to assist
from incarceration Expand services and increase	Action	Contraction of the second seco	individuals preparing to re-enter the community. Supported contractors who worked with
care coordination for pregnant and newly parenting women			multiple community sites for the provision of care coordination along with the delivery of MAT, treating newborns with Neonatal Abstinence Syndrome, and providing education to improve parenting skills.
			Continued to support the implementation of <u>Plans of Safe Care<sup>21</sup></u> (POSC) in New Hampshire through including the creation of patient materials in English and Spanish, a POSC 101 webinar, a Spanish version of the POSC template, and assisting in the crafting of a letter to providers as well as updating the POSC flow chart to include notification to the Managed Care Organizations (MCOs).
Increase the availability and utilization of juvenile diversion programs and adult drug court	Action		Contracted with 10 of the 11 superior courts to run and operate a drug court.

6. Recovery Support Services	Status	Example of Progress
Integrate recovery-oriented principles into policies and practices across public and private sectors*	Action	The Doorway22 supported identifying, informing, and referring individuals to needed services and supports across the continuum of care from treatment through recovery.Image: the service of the service

<sup>&</sup>lt;sup>21</sup> nhcenterforexcellence.org/governors-commission/perinatal-substance-exposure-task-force/plans-of-safe-care-posc/ <sup>22</sup> thedoorway.nh.gov/

Enhance recovery housing availability and promote quality standards to increase opportunities for special populations*	Action	A-PARE OF V	NH state Recovery House Registry <sup>23</sup> increased housing list to 39 Recovery Houses and encouraged all houses to become NARR- certified. Contracted with NHCORR to provide training and certification services.
			Supported recovery housing contractors specifically serving females only and serving individuals who have complex criminal backgrounds that limit access to other publicly funded housing options.
			Awarded a contract to operate a community housing program for individuals being released from the NH State Prison and in Drug Courts.
Increase access to transitional living	Prepara- tion		Supported supplemental room and board payment rates for one contracted SUD transitional living treatment provider and is planning to contract with additional providers.
			Recommended investment in increasing the availability of transitional living programs which was approved by the Commission.
Increase access to non-clinical recovery support services	Action	Contraction of the second	17 Recovery Centers active in 2020, engaging 141,258 individuals through activities, interactions, outreach, and services.
Invest in vocational training and workforce readiness initiatives for individuals in recovery*	Action	A PRES OF VY	Recovery Community Organizations provided vocational training and workforce readiness services; Doorways worked to connect individuals with local resources. Supported contractors that worked with individuals in recovery to provide employment training and workforce readiness skills.
Promote and support the Recovery Friendly Workplace initiative	Action	ARE OF UN	Commission supported funding to continue the Recovery Friendly Workplace <sup>24</sup> Initiative.

 <sup>&</sup>lt;sup>23</sup> dhhs.nh.gov/dcbcs/bdas/recovery-house-registry.htm
 <sup>24</sup> recoveryfriendlyworkplace.com/

Increase peer recovery support service referrals*	Action		SUD Treatment contracts required exposure to and coordination with peer recovery services. Supported efforts by the Doorway and Recovery Community Organizations to make individuals aware of and make connections to peer recovery support services. The Drug Court programs worked directly with local recovery centers to link participants with peer recovery services.
Increase engagement of healthcare providers and health systems in supporting patient recovery	Action	SIPARE OF STR	MCO contracts required MCOs to support and develop these relationships. The Doorways leverage their relationships with their parent hospitals, community providers, MCOs, and RPHNs to improve networking, increase understanding/reduce stigma around OUD/ SUD, and increase engagement of these systems and providers towards supporting patient recovery.

7. Family Supports and Services	Status	Example of Progress					
Increase supports and services for families such as home visiting services	Action	Supported the delivery of supports and services through the Strength to Succeed program (prevention programming targeted to DCYF- involved families with SUD), and through peer recovery support and parenting education services to pregnant women and parents of children up to age 10. Planning to expand supports and services for families with home visiting programs.					
		Commission accepted the investment recommendation to fund a pilot to provide doula training for up to 10 recovery coaches in order to serve up to 75 families to be funded.					
Provide support for children who are impacted by substance use disorder	Action	Funded a Community-based Adverse Childhood Experiences crisis response team. Provided support through our Family Connections Centers.					
Provide support for older adults who are parenting a second time around or are custodial parents	Action	Implemented and expanded Grandparent/Older Relative Caregiver Navigation Programs within Family Resource Centers. Provided Parenting A Second Time Around trainings.					

8. Reimbursement	Status	Example of Progress					
Assess and address insurance barriers to allow for easier patient access into treatment	Action	SUD service contractors required to assist individuals obtain insurance coverage as well as assisting them with meeting all administrative/ documentation requirements in order to access services.					
Engage payers to support best practices*	Action	Convened a workgroup focused on insurance which resulted in establishing relationships with all three of the state's Managed Care Organizations (MCOs) who now have representation on the Task Force, clarifying/ addressing gaps and needs, and creating a guide, with input from the NH Medicaid Office, which summarizes the benefits each of the MCOs offer to pregnant/parenting members.					
Maintain and expand access to residential treatment services through room and board reimbursements	Action	Room and board reimbursement was included in SUD treatment and other contracts.					
Increase reimbursement rates across all payers*	Action	The legislature approved two increases to SUD Medicaid reimbursements - one that occurred January 2020 and another is set to occur in January 2021 (3.1%).					
Establish training regarding reimbursement across all payers	No Action						

9. Workforce Capacity and Professional Development	Status	Example of Progress					
Provide training and technical assistance in support of the plan's strategies*	Action	BDAS contracted with training and technical assistance providers for this purpose.         The Drug Court provided training and technical assistance to support the plans strategies.					
Provide no cost buprenorphine waiver trainings to physicians, nurse practitioners and physician assistants	Action	Contracted to provided buprenorphine waiver trainings at no cost to qualified prescribers.					
Increase training for the Drug Addiction Treatment Act of 2000 (DATA 2000) waivered prescribers	Action	MAT ECHO sessions and MAT Community of Practice were available to waivered prescribers and other stakeholders.					

Promote core competency training to engage qualified mental health clinicians including social workers*	Action		Contracted with a training provider for this purpose.
Include training on substance use and substance use disorders in undergraduate and graduate professional education programs	Action		UNH restructured the Nurse Practitioner graduate program to be inclusive of SUD concerns and MAT credentialing.
Actively work with employers to recruit and retain experienced addiction specialists in each of the major hospital systems	Action		75 behavioral health professionals and care coordinators were retained to support MAT practices in Primary Care.
Align training and support with standards for peer recovery support services (PRSS) and Recovery Community Organizations	Action	CONTRACTOR OF STATE	All state-supported Recovery Community Organizations have met or are in process of meeting national standards for Peer Recovery Support Services.
Increase provider awareness of non-clinical support services*	Action		NHRecoveryHub.org provides information on all state-funded Peer Recovery Support Services and Family Support Services. Associated e-newsletter "The Recovery Fix" and social media accounts provide up-to-date information related to Recovery Support Services and promotes Peer Recovery Support Services. Through the Doorways, 211, DoorwayNH.gov, and Recovery community organizations,DHHS funded the development and distribution of information and resources to increase provider awareness of non-clinical support services. Providing social media connection to <u>state</u> <u>suicide prevention</u> and awareness agencies.
Provide training to all providers and service professionals related to trauma- informed best practices and harm reduction strategies	Action		Contracted for provider training. The Drug Courts promote and train all professionals in trauma-informed practices in court and in treatment.

Address compassion fatigue among all providers*	Prepara- tion		Preparing RFP to contract for compassion fatigue strategies. Recommendation for investment initiative to address compassion fatigue was approved.
Promote and advocate for military culture trainings across all sectors	No Action		
Increase provider awareness of the importance of medication assisted treatment*	Action	Contraction of the second	Regular training and outreach to providers.

10. Public Awareness	Status	Example of Progress					
Increase the awareness of the Doorways, treatment and recovery support resources*	Action	The NH Doorway Campaign <sup>25</sup> ran on TV, radio, social media, newspapers, and printed materials were distributed throughout the state.					
Develop population-specific awareness campaigns*	Action	<ul> <li>Developing Social Media connections and annual Suicide Prevention Conference.</li> <li>Supporting the Today Is For Me<sup>26</sup> campaign focused on alcohol and marijuana use during pregnancy. Creating a media brief on resources to support women and infants exposed to substances in response to the Office of the Child Advocate System Review of DCYF's Response to Substance Exposed Infants.</li> </ul>					
Increase understanding of MAT as best practice in the support of recovery*	Action	The Drug Courts continued to train and support MAT as a best practice within it's programs and in support of recovery.					
Target specific prevention messaging for children and young adults	Action	Binge-Free 603 <sup>22</sup> targets young adults with What's Your Reason - stories from NH young adults about sobriety, or drinking moderately.					

 <sup>&</sup>lt;sup>25</sup> thedoorway.nh.gov/marketing-campaign
 <sup>26</sup> Todayisfor.me
 <sup>27</sup> bingefree<sup>603</sup>.org

11. Data Utilization	Status	Example of Progress				
A. Collect, analyze and utilize existing and new data sets to inform efforts to address substance misuse*	Action	Supported by the Center for Excellence/CHI, maintains the online Data Dashboard. Check the <u>NH Governor's Commission Action Plan data</u> <u>dashboard</u> <sup>28</sup> to track progress on the Action Plan objectives and targets.				
B. Conduct a statewide assessment of the impact of substance misuse on older adults	No Action	Overdose mortality and SUD treatment participation monitored and reported by age group through the DMI report. More comprehensive assessment of impact not yet initiated.				
C. Centralize, standardize, and enhance police drug enforcement data	No Action					
D. Improve data acquisition and sharing of information related to opioid prescribing, naloxone dispensing*	Prepara- tion	Members participated on the NH Prescription Drug Monitoring Advisory Council. Information from the NH Prescription Drug Monitoring Program <sup>29</sup> is reviewed periodically by Task Force members and input is provided on NH PDMP reports and information dissemination efforts.				
E. Establish a tracking system for DATA 2000 waivered prescribers to determine if buprenorphine is prescribed following training*	Action	Supported activities to track waivered prescribers after their training.				
F. Establish a surveillance system to collect the incidence of Hepatitis B and C, STDs, and HIV	Action	Members worked with the Bureau of Infectious Disease Control within the Division of Public Health Services to conduct a community level vulnerability assessment of drug-use related to infectious disease.				
Other Strategies	Status	Example of Progress				
Investigate the feasibility of implementing Involuntary Civil Commitment for SUD in NH	Action	Continued to review feasibility of <u>Involuntary</u> <u>Civil Commitment</u> <sup>30</sup> including a virtual Listening Session with over 50 stakeholders from throughout NH. Will present recommendation to the full Commission in the Fall of 2020.				
Explore the cost effectiveness of Commission funded prevention and treatment programs	Action	The Commission released its first cost effectiveness report on January 1, 2020, <u>the</u> <u>Cost Effectiveness of Substance Use Disorder</u> <u>Treatment in NH</u> .				

 <sup>&</sup>lt;sup>28</sup> nhcenterforexcellence.org/resources/data/nh-gov-commission-action-plan-dashboard/
 <sup>29</sup> oplc.nh.gov/prescription-drug-monitoring/
 <sup>30</sup> nhcenterforexcellence.org/governors-commission/treatment-task-force/

### **Financial Report**

The Commission has embarked on a new process which empowers Task Forces to bring forward investment recommendations to the Commission at designated meetings each year. Task Forces worked to bring forward investment recommendation priorities to the Commission for the first such meeting on March 6, 2020 which resulted in the investments highlighted in many of the examples of progress in the previous Strategies Updates section. The June Financial Report to the Commission is presented below.

	data as of 6.12.20 - 1	Jh							
			SFY 2020	Funding from other sources	SFY 2021			SFY 2022	
	Governor Commission Budget SFY20	\$		other sources	\$	10,000,000.00	\$	10,000,000.0	
	SFY19 Balance Forward	\$			Ψ	10,000,000.00	φ	10,000,000.0	
	Carryover Contract Funding from	3	2,800,228.04						
	SFY19 into SFY20	\$	1,889,311.26						
	Total Gov Comm Budget SFY20	\$	14,695,539.30		\$	10,000,000.00	\$	10,000,000.0	
Contract Service Name	Description/Notes (if necessary)								
SFY19 Contracts brought forward into SFY2020 as of 7/1	/19								
NCADD-Serenity Place TX SFY18 Funds Remaining		\$	76,245.90				-		
NH Interscolastic Athletic Assoc	Life of an Athlete	s							
JSI - CFEX	Training & TA Contract	s	,						
SUD Tx Contracts (13 Providers)	6	ŝ	· · · ·						
Foundation for Healthy Communities	Ambulatory MAT	\$							
Juvenile Court Diversion Network		ŝ							
Juvenile Court Diversion Network		\$							
Prevention Direct Svs (5 Providers)		s							
Granite Pathways	Peer Family Support Svs	\$	,						
Boys and Girls Club of Central NH		\$	· · · · · · · · · · · · · · · · · · ·						
Dept of Education		\$							
SYCS Renovations-Admin Svs		\$							
on 7/1/19		\$		\$ -	\$	-	\$		
SFY 20 Contracts/Obligations		Ť	.,,.						
Harbor Homes	Faciliate development & networking of	\$	1,275,000.00	\$ 1,813,667.00	\$	1,275,000.00	_		
Juvenile Court Diversion Network	1 8	\$		. ,,	\$	-			
Juvenile Court Diversion Network		\$	· · · · · ·		\$	275,000.00			
NH Interscolastic Athletic Assoc	Life of an Athlete	\$			\$	250,000.00			
Foundation for Healthy Communities	Ambulatory MAT	\$	· · · · ·		\$	556,000.00			
SUD Tx Contracts (13 Providers)	Other funds includes SOR Room & Board	1		\$ 8,109,890.00	\$	1,520,000.00			
Prevention Direct Svs (5 Providers)	Sulei fullas meludes Solt Room & Boar	\$		\$ 0,103,030100	\$	819,327.00			
Granite Pathways	Peer Family Support Svs	\$	/		\$	76,000.00			
JSI - CFEX	Training & TA (649,352/annual + 250k in 2020-Service to Science) Plus added funding (\$150k) Gov								
	Comm Admin Support, prev messaging	\$	1,131,194.00	\$ 1,615,668.00	\$	799,352.00			
Governor's Office Staff - funds not encumbered	Budget Footnote Remaining funds for mise - funds not	\$			\$	323,593.00			
SYSC Renovations	encumbered	\$			\$	-			
Dept of Education	Gov Comm approved this for 5 yrs	\$	· · · · · ·		\$	23,370.00			
MLADC-Manch only		\$			\$	32,000.00			
Prevention Cert Board of NH	Px Specialist Mentorship Program	\$	· · · · · ·		\$	12,000.00			
NH-Coalition of Recovery Residences	expires 6/30/21	\$			\$	375,000.00			
NH Domestic Violence Coalition	Early Childhood-Prevent & Mitigate	\$			\$	360,000.00			
NH Children's Trust-Family Resource Centers	Adverse Childhood Experiences (ACES)	\$	,		\$	100,000.00			
Home Visiting with PH	Substance misuse awareness among	\$	250,000.00		\$	250,000.00			
City of Dover	children & youth	\$	15,564.00		\$	40,000.00			
	Early Childhood-Prevent & Mitigate Adverse Childhood Experiences								
Evidence Based Px Curricula with DOE	(ACES)	\$	250,000.00		\$	250,000.00			
Contract Commitments - not ye	encumbered. Early Childhood-Prevent & Mitigate	F							
Therapeutic Cannabis Education	Adverse Childhood Experiences	\$	10,000.00		\$	10,000.00			
Community Based Px Coalitions	(ACES)	\$	100,000.00		\$	100,000.00			
Bridge Housing - released from corrections		\$							
March 2020 Gov Commission Meeting New Obligations		\$			\$	1,300,000.00	\$	450,000.0	
Total approved Gov Comm Obligations SFY2020		\$		\$ 11,539,225.00	\$	8,746,642.00	\$	450,000.00	
Total all Governor Commission Obligations		\$	14,367,676.62	\$ 11,539,225.00	\$	8,746,642.00	\$	450,000.00	
				<i>.</i>					
SFY19 contract liquidations - now available		\$		\$ -	\$	-	\$	-	
Total Governor Commission Funds Remaining		\$	474,163.27		\$	1,253,358.00	\$	9,550,000.00	

Governor Commission Contracts SFY2020

### Conclusion

The Governor's Commission on Alcohol and other Drugs is pleased to report that **94% of strategies** included in the *Expanding Our Response* Action Plan<sup>31</sup> had significant activity in state fiscal year 2020. Despite working in unprecedented times due to the COVID-19 pandemic, the Governor's Commission on Alcohol and other Drugs was able to recommend and fund significant prevention, treatment and recovery strategies throughout the state. This supported NH's continued work to address the addiction crisis amidst the complex pandemic environment.

## ACKNOWLEDGMENTS

The Commission extends its gratitude to Governor Sununu and the New Hampshire Legislature for the leadership and commitment exhibited relative to the state's opioid public health epidemic and the on-going challenges of expanding alcohol and drug misuse services across the continuum of care.

The Commission thanks the many members of its task forces, state agency staff, advocates, family members, Doorways Providers, 2-1-1 NH and the hundreds of community providers who work to maximize opportunities to make a difference in preventing alcohol and drug use disorders, expanding treatment and promoting recovery.

The Commission thanks the NH Center for Excellence staff at the Community Health Institute/JSI for data gathering, coordinating, and drafting of this report.

<sup>&</sup>lt;sup>31</sup> http://<sup>1</sup>viuw<sup>040</sup>k<sup>2</sup>mx<sup>3</sup>a<sup>7</sup>mwz<sup>1</sup>lwva<sup>5</sup>-wpengine.netdna-ssl.com/wp-content/up-loads/<sup>2019</sup>/<sup>02</sup>/FINAL-Gov-Comm-<sup>1</sup>\_<sup>16</sup>\_<sup>19</sup>rev.pdf