



CITY OF NEW HAVEN
COMMUNITY SERVICES ADMINISTRATION
DEPARTMENT OF HEALTH

54 Meadow Street, 9TH Floor • New Haven, Connecticut 06519



Board of Health Commissioners
Meeting Minutes
February 10, 2021

Present: Dr. James Hadler, Chair; Dr. Frank Mongillo, Dr. Darnell Young, Heather Reynolds, Dr. Alice Forrester and Gregg Gonsalves

Community Services Administration Staff: Dr. Mehul Dalal, Community Service Administrator; Christine Rodriguez, Harm Reduction Task Force Coordinator

Health Department Staff: Maritza Bond, Director of Health; Brian Weeks, Epidemiologist; Brooke Logan, Health Programs Director

Call to Order:

Commissioner Hadler called the meeting to order at 5:39 p.m.

Approval of Minutes:

Commissioner Hadler moved to approve the January 13, 2021 minutes; Commissioner Gonsalves seconded; minutes were approved unanimously.

Public Comments or Statements:

There were no members of the public present.

Updates:

Opioid Epidemic

Director Bond requested the Chair's permission to devote today's meeting to a presentation/discussion on the opioid epidemic in the City. Since she had a previous speaking engagement and needed to leave the meeting, Director Bond deferred to Dr. Mehul Dalal, Community Services Administrator, and the team to provide an overview and discuss the efforts that are being made to address the issue.

Dr. Dalal stated that the purpose today is to present a situational update on opioid response and some of the activities that are underway as part of the Harm Reduction Task Force. Looking for Board's input and advice on current direction. Data shows that there continues to be a significant issue with overdoses and are looking for ways to mitigate some of the more harmful effects. Brian Weeks will present the data, and Christine Rodriguez will talk about community partnerships.

Brian Weeks shared a 2020 Fire/EMS Incidents Dashboard using data provided by Fire Chief Alston. The heat map was developed by the City's GIS Analyst showing activity for the various EMS calls broken down by substances with opioids being the primary item followed by cocaine, K2, and alcohol. There were roughly 135 incidents year-to-date for 2021, 14% are opioid related and Narcan used in 42%. January 2021 there were 106 incidents that were opioid related with Narcan used in 46%. Calendar year 2020 had 1,172 incidents with 16% that were opioid related with 30% Narcan use indicated. Map shows Fair Haven, Downtown and Dixwell neighborhoods experiencing the most activity. Will be sharing with local partners. Information is updated once a day.

2019-2020 suspected opioid emergency department (ED) visits by New Haven zip codes - There are some caveats with this since East Haven and Hamden share zip codes with New Haven, and there could be information that was entered incorrectly. For the syndrome, there were 969 events or ED visits. In terms of majority by gender, 70% are male. Age range 25 to 49 years old represents 55% of the incidents. Birth cohorts (millennials represent 37%), and by race and ethnicity, White individuals are 48% (non-Hispanic whites) for calendar year 2020 is 586. ED suspected visits are 75% male with 53% between ages 25 and 49. 36% millennials and 45% white. Comparison with 2019 versus 2020 – every month has an increased number of ED suspected opioid visits. May was the greatest month (after COVID-19 had kicked in) – about a 128% increase.

Reviewed State OD map from Federal government, which produces alerts and keeps us aware of what's going on in New Haven county, although not specific to New Haven. There were approximately 147 suspected overdoses year-to-date with two fatal events (one with Naloxone and one without Naloxone) which is about 1.4% of the total. Overall, there were 40 Naloxone use events. The peak was January 22nd with ten events occurring (7%). This dashboard is very helpful with which sites to go to in terms of outreach efforts.

Shared State Health Department dashboard comparing New Haven to Connecticut 2015-2020 drug overdose deaths. Mr. Weeks noted that the data processed by the State Health Department is a little bit independent of the Office of the Chief Medical Examiner's data sets. Currently, State numbers are an underestimate, and we've reached out to get further clarification. Nonetheless, it's a good dashboard and public resource.

Mr. Weeks summarized the data driven approaches being used: OD Map/Alerts; programmatic work with outreach workers in the field using Veoci to compile surveys and collect information; dashboard data including OD Map, OCME, Syndromic, Fire & EMS as well as website that's in the works and data sharing agreements. Dr. Dalal and the rest of the team have been working with partners to make the data available.

Christine Rodriguez discussed community partnerships. Since she began in October, 2020, the Harm Reduction Task Force was reconvened with 70 individual members representing 30 organizations, who are kept updated through email. Task Force meets every month with about 30-35 members participating. Since Fall there's been a work group for increasing access to safe syringe disposal particularly in hotspots where there's a significant amount of litter. Working on communications, advocacy and organizing a data subgroup. Policy subcommittee is forming and will have first call this month. One policy initiative identified is the barrier to

implementing dispensing units, which are no cost limited access vending machines. There's a statutory change that needs to be made in the syringe services bill.

Brooke Logan highlighted current outreach and education initiatives. Working to set up some safe syringe disposal kiosks throughout the city. Four potential locations have been identified. Kiosks are privately funded and will work in conjunction with the Community Health Care Van which agreed to pick up the syringes that are disposed of in the units. Three fixed sites and one traveling site based upon need. Hired a community health worker for overdose response and working with community health worker from the Quinnipiack Valley Health District (QVHD) and hiring a part-time social worker to connect with individuals who are overdose survivors. Will work with Police Department to get name and demographic information for follow-up and work to connect them to either treatment or to community agencies that provide harm reduction supplies, social services and/or medical care. CSA recently opened a reentry site for individuals who are being welcomed back into New Haven so part of that will be working with them to identify sources of Naloxone.

Recently, the Health Department participated in the first prescription take back event for New Haven. It's a national event that's sponsored by the DEA to prevent the misuse of prescription drugs by making sure they are safely disposed of. Also, New Haven Health is working with the QVHD to launch a regional website, Connect GNH, with the goal to reduce stigma around opioid use disorder, substance use disorder and provide information to residents on how to safely dispose of medications, harm reduction programs and how to find treatment options.

Ms. Logan discussed trainings for individuals and businesses as part of their employee wellness programs on safe medication storage and disposal and Naloxone education and distribution. Data 2000 waiver training will be available to medical providers who are interested in prescribing suboxone as a medication assisted treatment.

Grant sources were discussed including Vital Strategies, which funds Ms. Rodriguez. Also, the Connecticut Department of Public Health which funds the Overdose Data to Action Grant and the Community Health Worker position. The OD Map Grant is provided with funds from the Office of Emergency Medical Services, and the grant is used to purchase Naloxone. In addition, it will fund a part-time social worker to look at post-overdose response. Health Department was approached by DMHAS to apply for a non-competitive grant around academic detailing and working with prescribers to discuss their prescribing practices when it comes to opioids.

After the presentation, Dr. Dalal asked the Commissioners for questions/comments. A discussion ensued about the COVID pandemic's effect on the use of opioids. There are a multitude of reasons for increase in opioid use including lockdowns, social distancing, concern about risk of exposure, experiencing mental health conditions and other pre-existing conditions. Overdose prevention advice to never use alone and have someone with Naloxone is more difficult to achieve with social distancing especially for people living on the streets being more susceptible to catching COVID. Many people are separated from social services at this time, not just direct services like methadone but social support as well. COVID is disrupting harm reduction services.

There was discussion about pilot program in New London where after Fire Department answers a call with Naloxone, they do a follow-up visit. Brooke Logan noted there a few sites in Connecticut that are piloting that program including Waterbury and Hartford. Health Department has a medical resident from Griffin Hospital that will be looking at best practices around the country for this.

It was agreed that as COVID lessens, the opioid epidemic will be the biggest public health -Commissioners decided that a group outside of the Harm Reduction Task Force come up with ideas on the opioid (plus) problem and present a draft to the Board at the end of eight weeks (approximately mid-April) with the results of its discussions. Should look at the broader substance use picture (not just opioids) and how it affects multiple communities across the area. The group will consist of Commissioner Gonsalves, Ms. Rodriguez, Health Department staff and others.


COVID-19

Brian Weeks reported that he was involved with two investigations for the UK COVID variant (B117). Both were related to travel – one to Ireland and the other to the UAE. The State announced there were at least 20 of the UK variant cases in Connecticut. It's predicted that by March, the UK variant will be around 50%. Currently, there are 160 COVID positive patients hospitalized with 45 ICU patients; ventilator usage is hovering around 50%. Also, Mr. Weeks shared the State website with information on vaccinations. There was discussion about groups scheduled to receive the vaccine first.

Commissioner Young motioned to adjourn, Commissioner Gonsalves seconded; meeting adjourned unanimously at 7:00 p.m.

The next meeting is scheduled for March 10, 2021 at 5:30 p.m., via Zoom.

Attest:




Brenda Pantelis
Executive Administrative Assistant

2/19/21

Date

Approved:



James Hadler, Chair
Board of Health Commissioners

3/10/21

Date