9:30 Introduction and Community Announcements

Announcements:

- BCPH is offering a free Positive Youth Development training (with lunch!) on Friday, December 2nd for adults who work with youth and are interested in increasing youth leadership and youth voice. - [Registration](#) for this event!
- Out Boulder will be hosting a Recovery Holiday Gift making event on December 15th at 1443 Spruce St. Boulder, CO from 4-7pm. This event is not just for individuals in recovery from substances but in recovery among other aspects.
- CU Boulder is distributing fentanyl test strips and more naloxone to students. They will be receiving a larger shipment of narcan from the Bulk Fund after Thanksgiving. These resources can be accessed via the Health Promotion Office at the front desk, alcohol/other drug intervention programming events, counseling office, within the recovery community, and at their dorms through ‘buff boxes’ (that include both naloxone and fentanyl test strips).
- SMART Recovery is for substance abuse and process addictions. More information at [https://www.smartrecovery.org/](https://www.smartrecovery.org/)
  - Family and friends are welcome at the regular recovery meetings - family/friend meeting will be starting soon
- Community Medical Service’s new location in Aurora, CO is open 5am-8pm, 7 days a week. They are doing Intakes the entire time; so, if you have someone that lives elsewhere in the State...intakes can still be done and transferred to an opioid treatment program somewhere near them.
- There will be a donation drive for the holidays for Together: a service in Boulder that helps kids experiencing homelessness -- donations or questions can be directed to Shayla Englund from NorthPoint Recovery ([senglund@northpointrecovery.com](mailto:senglund@northpointrecovery.com))
- Trina Faatz is collaborating with the Parent Engagement Network (PEN) planning a fentanyl community wide education / myth busters. Currently, the tentative date is January 18th in the evening. BCPH and other community organizations will be there to speak. Additionally, there will be naloxone and narcan training offered.
- The new MSO (managed service organization) for the County is Signal now (they are the MSO for 65% of the state).
Signal has asked Ann Noonan to be a liaison during this transition to answer any questions and inquiries, as well as connect to community members moving forward about potential new opportunities. If you would like to reach Ann, please email them at (anoonan@signalbhn.org).

9:55 Behavioral Health HUB & NowPow Update

Kelly Veit, Strategic Implementation Manager, Boulder County Community Services (kveit@bouldercounty.org)

McKenzie LeTendre, Project Manager, Boulder County Healthy Youth Alliance, Boulder County Community Services (mletendre@bouldercounty.org)

CJ Oliveria and Naomi Segel - Behavioral Health HUB Navigators, BCCS (nsegel@bouldercounty.org and coliveira@bouldercounty.org)

Behavioral Health HUB:

- Software, staff, streamlined access
  - Coordinated, single point of entry to BH services via a central system
  - Facilitating timely and centralized service navigation; anchored and supported through an IT platform and navigation staff
  - Started in a criminal justice system, expanding to community
  - Multiple user interfaces; County program support and user driven/passive provider lookup option (BHAS)
- What do we hope to inform?
  - Service navigation: unique purpose to county programs and closed loop partners in addressing navigation ‘sticky spots’
    - Leverage evidence on recurring community needs and service gaps into BH planning
  - Infrastructure:
    - UniteUS - effective in making/tracking referrals, evaluating efforts, and determining gaps in needed services?
    - BHAS: Does this empower user driven navigation?
    - Carrot Health: how can we target interventions/investments?
- Staffing:
  - Ideal slate of expertise for navigation team to meet ongoing needs and service trends
- HUB Navigator Roles:
  - Serve as handoff point for programs hitting sticky spots with navigating to services
Establish partner workgroups to define incoming/outgoing referral processes, relevant service definitions, required supporting documentation and scope of referral partnership

Intake form with specialty questions for specific populations or needs that we can easily divert to another coordinated entry partner (like housing -> HSBC)

Behavioral Health Access Solutions:
  ● Objectives of this grant work:
    ○ Increase the # of orgs serving historically excluded populations that are represented in BHAS
    ○ Identify and recruit cultural brokers to become community connectors of BHAS in the community
    ○ Build utilization of BHAS within the Latinx population in Boulder County through multi-sector partnership development with an emphasis on informing continued access improvements
  ● BHAS Website
  ● How can SUAG engage in this work?
    ○ Utilize this online form to submit resources that are currently missing in BHAS (any added service must be tagged according to NowPow’s service category taxonomy).
    ○ Participate in a short survey and review a service category you are familiar with (non-county employees will receive a $25 dollar gift card for participation)
      ■ Email McKenzie LeTendre to get the link to this survey and/or for any questions regarding BHAS/NowPow (mletendre@bouldercounty.org)

10:20 Behavioral Health Roadmap

Marcy Campbell, Behavioral Health System Project Manager, BH Planning Team
(mcampbell@bouldercounty.org)

The Behavioral Health Roadmap Update:
  ● Why is this needed?
    ○ Unmet needs still persist. The system is difficult to navigate, has significant barriers to access, lacks a comprehensive service array, poorly coordinated, and highly fragmented
    ○ Existing opportunities at state and local level can be momentum for systemic change
● Goal: a shared, county-wide comprehensive strategic plan or roadmap, that once implemented will result in a behavioral health system that is more equitable, integrated & coordinated, and higher functioning/efficient.
● Areas of focus: systemic access issues, continuum of care, criminal justice, equitable access: priority population, workforce shortages

10:35 District Attorney’s Update on HB22:1326 and Good Samaritan Law

*Michael Dougherty, District Attorney for the 20th Judicial District, Boulder County*

(mdougherty@bouldercounty.org)

**DA Update on HB22:1326/Good Samaritan Laws:**

- What is the Good Samaritan Law?
  - Immunity from criminal prosecution for an offense when the person reports, in good faith, an emergency drug or alcohol overdose even to a law enforcement officer or to a medical provider;
  - Remains at the scene of the event until a law enforcement officer or an emergency medical responder arrives;
  - The person identifies himself or herself and cooperates with the law enforcement officer or medical provider;
  - The offense arises from the same course of events from which the emergency drug or alcohol overdose event arose
  - The immunity described above also extends to the person who suffered the emergency drug or alcohol overdose event

- **Unintended consequence:**
  - Because the new DF4 Fentanyl Possession crime got put into 18-18-403.5(2.5), it may have inadvertently eliminated the immunity for simple possession of fentanyl if a person calls in for help for another person...that’s because the old (and current) immunity provision regarding simple possession only references subsection (2) and not the new (2.5).

- **The good news:**
  - The impact on immunity for simple possession of fentanyl was unintended. Nothing prohibits the DA’s discretion in not charging in these situations; therefore, the DA will NOT file charges in these situations. There will be legislation to fix it this session.

10:40 Follow up to DA Dougherty’s Update
Jamie Feld, MPH, Deputy Director of Opioid Response in the Division of Community Engagement, Office of the Colorado Attorney General (jamie.feld@coag.gov)

★ The CO Attorney General does not have a position on this topic, and reiterating that this is ultimately a question for District Attorneys who enforce this law along with local law enforcement

10:45  Boulder Community Health (BCH) PILLAR Program Updates
Amanda Wroblewski, LCSW, PILLAR Program Coordinator, Boulder Community Health (awroblewski@bch.org)

PILLAR - Prevention and intervention for Life Long Alternatives and Recovery:
- Provides service navigation and limited scholarship dollars to get folks connected to care for treatment for SUDs and treatment for chronic pain.
- PILLAR works out of the Center for Mind, Body, and Medicine Center in BCH
  - They are 100% grant funded from the Health Equity Fund, Substance / Education Awareness Fund, BCH Foundation, Colorado Naloxone Project, and CDPHE.
- Referrals come from different sources such as: inpatient units at the hospital, emergency dept, outpatient providers
  - They do not provide direct services at BCH, but they offer free suboxone and suboxone induction in EDs.
- Amanda specifically has a higher level overview role of creating/connecting relationships with treatment providers; whereas Taylor handles the actual navigation of patients.

Taylor Bister, LSW, PILLAR Patient Navigator, Boulder Community Health (tbister@bch.org)
- Spending most of time working with patients that get referrals; start conversation with what their current use is looking like and what their goals are (some people are not ready to have complete sobriety)
- Then we talk about different levels of recovery and care, community supports, payer sources, preference in location of treatment
- PILLAR is an outpatient service so continued communication with clients is consistent

Questions:
- Are you on epic right now?
- Yes, we are on epic -- which is an electronic health record (dashboard, medical charts, all medical info for patients)

● Taylor when you make referrals is it outside of the county or inside the county?
  - Both - it really just depends on what the patient is looking for (their preference).

● If someone had a client that needed resource ideas, do they need to be a client?
  - No, they can give us a call (they don’t need to be a client with PILLAR)

11:05  Colorado Consortium Annual Meeting Recap

General Session & The Naloxone Project:
Jessica Eaddy, Senior External Relations Strategist, Colorado Consortium for Prescription Drug Abuse Prevention (jessica.eaddy@cuanschutz.edu)

★ Annual Meeting & general session recording and resources
★ The Naloxone Project

Advancing Peers & Recovery Friendly Workplace Toolkit
Jennifer Place, MA, LPC, LAC, Program Manager, Colorado Consortium for Prescription Drug Abuse Prevention (jennifer.place@cuanschutz.edu)

Recovery Workplace Workgroup:
● BHA has provided $5.9 million to be spent. This will be funneled into the SB22-181: Behavioral Health-Care Workforce Bill including on:
  ○ Enhance recruitment
  ○ Develop trainer & supervisor pipelines
  ○ Career counseling/advising
  ○ Expand access into the workforce
  ○ Address barriers to entry or career progression
  ○ Increase the # of certified peer professionals by 300