



**ARIZONA SUBSTANCE ABUSE TASK FORCE
Arizona Access to Treatment Work Group**

June 29, 2016

1:00 p.m.

**Governor's Executive Tower
1700 West Washington Street, Suite 230
Phoenix, Arizona 85007**

A general meeting of the Access to Treatment work group was convened on June 29, 2016 at 1700 W. Washington Street, Suite 230 Phoenix, Arizona 85007, notice having been duly given. The following work group members were present and absent:

Members Present (15)	
Debbie Moak , Governor's Office of Youth, Faith and Family	
Doray Elkins , Community Member	
Sherry Candelaria , Mentally Ill Kids In Distress (MIKID)	
Michael Carr , Department of Child Safety	
Jennifer Carusetta , Health System Alliance of Arizona	
Haley Coles , Community Member	
Lee Pioske , Crossroads	
Frank Scarpati , Community Bridges	
Susan Junck , Arizona Health Care Cost Containment System (AHCCCS)	
Dawn Scanlon , Community Member	
Dennis Regnier , CODAC	
Robert Johnson , Arizona Perinatal Care Center	
Peggy Chase , Terros	
Jeff Taylor , Salvation Army	
Elaine Ellis , Phoenix Children's Hospital	
Staff/Guests Present (8)	Members Absent (6)
Alexandra O'Hannon , Governor's Office of Youth, Faith and Family	Mary Hunt , Maricopa Integrated Health System
Sharon Flanagan-Hyde , Flanagan-Hyde Associates	Eddy Broadway , Mercy Maricopa Integrated Care
Alma Cano , Community Member	Reuben Howard , Pascua Yaqui Tribe
Linda Weinberg , Community Member	Michael White , Community Medical Services
Melissa Tudor , Community Member	Jonathan Maitem , Honor Health
Ingrid Brown , Community Member	Denise Dain , St. Luke Behavioral Health Center
Todd Nicholas , Presenter	
Mike Zipprich , Presenter	

A. Call to Order

Co-Chair **Debbie Moak** called the meeting to order at 1:02 p.m. A quorum of fifteen (15) members and eight (8) staff and community members were present.

B. Welcome, Introductions, and Group Norms

Sharon Flanagan-Hyde asked the work group members to introduce themselves. She reminded the group about the meeting norms which included:

- Members are to speak candidly.
- One person should speak at a time.
- Be respectful.
- Self-monitor to ensure there are no tangents.
- Work toward consensus.

C. Approval of the Meeting Minutes

Members reviewed the meeting minutes for the work group that occurred on June 8, 2016. A motion was made and seconded to accept the minutes. The minutes were accepted without modification.

D. Volunteer to Report at the Task Force Meeting

Sharon asked for a volunteer to report on the Access to Treatment work group's updates at the Arizona Substance Abuse Task Force meeting that is scheduled to occur on August 24, 2016. **Jeff Taylor** offered to provide the update.

E. Discussion: Presentations - What Stood Out?

Jeff said that the real-life stories from mothers and the information provided by the pain management doctors were powerful. Others agreed.

Jeff answered a question about his reference to a "severity index" with respect to prisons. He clarified that he should have said "level of security" (i.e., 1, 2, 3, 4, 5). He explained that he followed four cases through sentencing and classification. All four should have been classified 1, and yet all were classified 4. This is an ongoing problem. **Debbie Moak** responded that there may be a new Department of Corrections (DOC) Transition Work Group as part of the Arizona Substance Abuse Partnership (ASAP). If funding is received and the DOC Transition Work Group is formed, this entity might be able to oversee the Substance Abuse Task Force's recommendations regarding prison treatment and transition programs.

F. Treatment Provider Brainstorm

Sharon introduced **Mike Zipprich** and **Todd Nichols**, who presented on a multi-purpose substance abuse treatment facility they will be opening in Tucson as early as October 2016. The 114 room facility will have 200 beds. Mr. Nichols and Mr. Zipprich hope to open two (2) or three (3) facilities in Maricopa County. The facilities will be privately funded. The presenters were given the opportunity to hear recommendations from the work group members. The following represents information provided and recommendations made:

- The program will be patient-centered and incorporate evidence-based practices.
- The program has initiated a national search for treatment providers.

- The program is built backwards, taking the AHCCCS fee-for-service schedule into consideration.
- **Doray Elkins** stated that co-ed facilities often encounter problems. **Mike** indicated he may be able to segregate the genders in some areas.
- **Susan Junck** suggested the program address dual diagnoses. **Sherry Candelaria** supported this recommendation.
- **Michael Carr** recommended developing a facility that can serve mothers with children.
- **Jeff Taylor** agreed there is a need for additional detox facilities that can help transition patients.
- **Haley Coles** recommended the facility incorporate medication-assisted treatment.
- **Debbie** suggested the program look into using opiate antagonists such as Vivitrol and Naloxone.
- In response to a question, the developers said that the facility's medical director will make a determination on whether they can treat pregnant women.

G. What Recommendations should be in the Task Force's Report in October?

The following recommendations were made for inclusion in the Arizona Substance Abuse Task Force's final report:

- **Jeff** recommended 13% of the Department of Corrections' budget be reallocated for treatment and prevention.
- The work group agreed the felony box should be removed from housing and employment applications. North Carolina has good information about this.
- **Michael** reported the Arizona's Family F.I.R.S.T. (Families in Recovery Succeeding Together) program's numbers have dropped significantly. These services should be amplified.
- The State program to assist families facing eviction have not been funded since 2009.
- **Haley** recommended that the State provide Naloxone to community programs so they can distribute the medication without charge.
- **Doray** reported syringe programs help people suffering from addiction to trust the distributors and in doing so, increases the likelihood the individual will reach out to the distributor for help.
- **Dawn Scanlon** recommended revitalizing "211" as a resource. **Debbie** supported this recommendation and added the Treatment Locator should also be expanded.
- **Jeff** mentioned offering women with children assistance with daycare.
- **Doray** recommended having the Arizona Department of Health Service's Licensing Department hold providers responsible for administering programs safely and correctly.
- **Doray** recommended prisons and jails incorporate the use of medication-assisted treatment.
- **Robert Johnson** recommended developing and distributing a list of available resources and services to providers. Providers currently do not readily know what services are available.
- **Doray** recommended using media and marketing (including billboards and campaigns) to educate the community.
- **Dawn** recommended researching needle exchange programs in states that are similar to Arizona. **Haley** supported this recommendation and added that syringe programs are legal, but it would be helpful if the State Legislature clarified the legality of these

programs. Yavapai and Coconino Counties are considering implementing programs. She suggested requesting the program now because it may take a while for a bill to pass.

- **Lee Pioske** recommended eliminating the Regional Behavioral Health Authorities (RBHAs) and bureaucracy so that people have timely access to the services they need.
- **Sherry** reported that in Northern Arizona there are no provider network organizations so there is one less layer for patients to have to go through to access treatment.
- **Jeff** recommended simplifying the process for accessing treatment, so the system will not be so difficult to navigate.
- **Haley** recommended the State ensure there is at least one (1) medication-assisted treatment facility in each county.
- **Lee** added that special permission should not be required if a patient wants to seek services in another county.
- **Debbie** reported patients should not be able to check themselves out of a substance abuse treatment facility when they are psychotic.
- **Michael** stated that additional intensive outpatient programs need to be developed. Kids are being sent out of the state because the service is not offered locally.

H. What additional Information Do You Need?

A work group member suggested having the Department of Corrections present. **Sharon** explained there is no time to have them present because the work group is scheduled to wrap up in September.

I. Call to the Public

No members of the public requested to speak.

J. Adjourn

Debbie asked for a motion to adjourn; Doray motioned and Michael seconded the motion. Debbie adjourned the meeting at 3:00p.m.

Dated June 29, 2016
Arizona Access to Treatment work group
Respectfully Submitted By:
Alexandra M. O'Hannon
Program Administrator, GOYFF