

June 2022 Substance Use Disorder (SUD) Community of Practice (CoP) planning session

June 1, 2022 9:00 AM- 10:30 AM | Central Time | 1 hr 30 minutes

- Webinar link:
<https://minnesota.webex.com/minnesota/j.php?MTID=m6587c0c60fd0f7ffe0f89a772bcdadcc>
- Phone +1-415-655-0003, 24864094793# 63878998# United States Toll
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MEETING AGENDA

Welcome and brief introduction (Facilitator: Neerja Singh)

Polling question- standard for every planning session to capture representation (Facilitator: Regina Acevedo)

Meeting Practice Guidelines

Facilitator: Regina Acevedo

A. Shared Practices

Please utilize the chat function and “raise hand” feature to engage in discussion. Open and respectful dialogue is highly encouraged. Fighting words, obscene speech, and true threats are absolutely prohibited. Persons who engage in such prohibited conduct will be given a warning; if the conduct continues, the chat feature will be disabled and/or the person will be muted. By remaining in the meeting by WebEx or phone, you are agreeing to follow these guidelines.

The following is a list of shared practices for all participants of the SUD CoP:

1. Introduce yourself and who you represent. If you'd like, you can share your preferred pronouns.
2. Stay present giving your full attention to the discussion.
3. Please share about the topic of the meeting only –including use of chat.
4. Mention your main thoughts /suggestions early when it is your time to share to make the most of limited sharing time.

5. All participants are equal and have a right to share their ideas.
6. Raise your hand and wait to be called on by the facilitator to share.
7. Keep an open mind.
8. Be respectful of the process and other participants.
9. Focus on the problem, not the person.
10. Personal information will be muted.

B. Group Expectations

What kind of group expectations and practices do we want to hold ourselves to as a community of practice? (confidentiality - sensitivity to triggers, cultural sensitivity, ableism, etc.)

Contract Vendor Deliverables

Facilitators: Neerja Singh & Regina Acevedo

A. Purpose

Request for Proposal (RFP) for a grantee to support the state in the development of the SUD CoP.

B. RFP Deliverables

- 1) Facilitate SUD Community of Practice meetings including the following tasks:
 - a. Attend pre-meeting strategy and planning sessions with identified DHS staff
 - b. Create meeting agendas
 - c. Take meeting notes to create an analysis of each meeting and furnish both meeting notes and analysis to DHS. Note-taking to start December 2022 once current contract with Alliant ends November 2022.
 - d. Provide full tech support including, but not limited to sharing polling questions and results during meetings, addressing noise disruptions, etc.
- 2) Recruit consumers and family members who have used SUD treatment services to highlight the voices and experiences of people who are Black, Indigenous, people of color, and people from other communities that are disproportionately impacted by substance use disorders and co-occurring disorders. Co-occurring disorders are not limited to mental health disorders. In addition, recruit external participants (excluding government agencies) where representation is low or missing.

- 3) Identify challenges faced in implementing American Society of Addiction Medicine (ASAM) criteria on both a national and state level with a focus on the following and the role these factors play in providing a higher quality of care when provided in combination with SUD treatment services:
 - a. Support services (supported employment, housing, life-skills, trauma-informed care)
 - b. Integrated care (receiving other needed health or behavioral health services with SUD treatment)
 - c. Culturally-specific models (addressing barriers to care due to culture)
 - d. Person-centered care (focusing on the elements of care, support and treatment that matter most to the patient, their family and their caregivers)
 - e. Any additional challenges implementing ASAM criteria

- 4) Develop reports with recommendations/outcomes including but not limited to the following topics addressed after community of practice meetings:
 - a. Gaps in substance use disorder treatment services;
 - b. Collective knowledge of issues related to substance use disorder;
 - c. Evidence-based practices, best practices, and promising approaches to address substance use disorder;
 - d. Strategic plans to improve outcomes for individuals who participate in substance use disorder treatment and related services in Minnesota;
 - e. Challenges and opportunities learned by implementing strategies; and
 - f. Capacity for community advocacy.

The ideal Responder will have the following qualifications:

- Experience or knowledge of community-based research
- Experience with or knowledge of profit and non-profit organizations
- Experience working with or knowledge of diverse communities and the unique cultural makeup of these communities
- Experience with or knowledge of outreach to communities to help with prevention
- Understanding of Native American culture and traditions
- Understanding of Minnesota's rural community and ability to reach rural areas across the state
- Ability to bring people together and manage a large group with potentially different views. Ideally vendor will be at least somewhat knowledgeable of the SUD field and current research or can quickly learn.

SUD CoP Roadmap

Facilitators: Neerja Singh & Regina Acevedo

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Discussion on how meeting objectives will be accomplished

The SUD CoP must address the following:

- 1) Identify gaps in substance use disorder treatment services
Current gaps identified:
 - Case coordination and peer recovery specialist
 - Understanding barriers in access to SUD treatment
 - Disparities in rural areas- less treatment providers, staffing shortages, transportation can be an issue, child care, treatment to serve women, children, and adolescents, and lack of peer recovery support specialists
 - Reaching out to all tribes
 - Withdrawal management services in rural areas are difficult to access
 - Lack of residential treatment programs for both men and women in rural communities
 - Lack of treatment programs which can accommodate SUD and SPMI
 - Underserved populations- veterans, seniors, LGBTQ+, Hispanics
 - Rather than focusing solely on how we can get people into the current system, think about what else works in specific communities.
 - We need to remember detox (opioid/alcohol) and our lack of detox facilities
 - Break the cycle of separate silos in the communities

- 2) Enhance collective knowledge of issues related to substance use disorder; How will a CoP do this? Build a repository? Identify those that already exist?

- 3) Understand evidence-based practices, best practices, and promising approaches to address substance use disorder
Presentations? Or just informal sharing, or both?

- 4) Use knowledge gathered through the community of practice to develop strategic plans to improve outcomes for individuals who participate in substance use disorder treatment and related services in Minnesota
Does this group have clout to develop/implement strategic plans? What is the scope of this group?

- 5) Increase knowledge about the challenges and opportunities learned by implementing strategies
Who will we need to work with/influence to develop and implement strategic plans?

- 6) Develop capacity for community advocacy
How does a CoP do this? Who do we partner with/support?

Closing Remarks

Facilitators: Neerja Singh & Regina Acevedo

Questions to consider for July's planning session-

How will we know we are ready to launch the CoP?

- Once contract vendor is on board?
- What decisions need to be made about meeting purpose and process?
- What decisions need to be made for meeting practices?

New participants- Please enter your email address in the chat box to receive information regarding the SUD CoP.

[SUD CoP webpage](#)

Thank you for joining the June SUD CoP planning session!