Connection Coalition
January 13, 2020 | Noon - 1:00 p.m.
California Primary Care Association

Minutes

1. Welcome, Introductions, Additional Agenda Items
   a. Participants: Heidi Strunk; Curtis Paulins; Randall Hagar; Kendra Barnes (NASW); Lakesha Thompson (NASW); Kelli Strother; Trish McDaid-O’Neill; Dave Neilsen; Danny Offer; Cheyanne Cook; Alexandra Lamirande; Liz Oseguera; Amanda Levy; Carol Hood (via Conf Call); Kit Wall

2. Debrief on Retreat
   a. What worked?
      i. The group felt that Dr. Pfeifer and Dr. Connolly were a great get and very timely.
   b. What could be better? Attendees indicated the set up and speakers were great.
   c. What should we do in the future?
      i. Worth repeating!
   d. Discuss 2020 Priorities
      i. Randall Hagar felt the priorities need to be more focused.
      ii. Will continue working on the draft document for review at the February meeting.

3. Words to Deeds Event (Breakfast Forum - MAT, Long Acting Medications, Analytics, Reducing Recidivism)
   a. Kit Wall noted they are still working to secure a space. Their hearing room was taken by the Assembly Speaker.
   b. Speakers Include
      i. Dr. Douglas Smith from Summit County Ohio will present on MATs and LAIs
      ii. Street Psychiatry Team will report on their work, which includes LAIs
      iii. Dr. Carter and his early psychosis program will be presented, they use LAIs as well
         1. OAC contracting with Carter to provide technical assistance to counties across the state.
   c. Randall felt the event is needed to make policymakers aware of MAT/LAI best practices, as well as innovations and things that dovetail with the homeless issue.
      i. SDs psychs going to homeless on the street for research. They have some good data, hoping to engage them
   d. Randall asked the group if the Connection Coalition would like to be listed as a co-sponsor?
      i. Kelli Strother felt it was a fit with the broader focus of the coalition.
      ii. Randall noted that the California Psychiatric Association (CPA) will be a co-sponsor
      iii. The group had no objections to being listed as a co-sponsor. (no work or money required).
4. Capitol Day Planning:
   a. At the retreat the group felt that late March or early April would be best. A Capitol Hearing Room needs to be reserved. March 24th was tentatively identified as a target date.
   b. The group suggested agenda themes related to assuring or increasing access to medications, which could be tied back to specific pieces of legislation or state budget items. The Parity Bills by Senator Beall and Senator Weiner were identified as a unifying core. The Weiner bill will be addressing the issue of Medical Necessity which has an obvious tie-in to medication access, and Senator Beall’s bill specifically removes barriers to accessing MAT.
   c. Speakers were discussed:
      i. Helen Thompson
         1. Randall will invite her to speak about Parity
      ii. Randall Hagar
         1. Will conduct Advocacy 101, Meeting with Legislators, as he has in previous years
      iii. Guyton Colantuono with Project Return Peer Support Network
         1. Heidi will reach out and make the ask.
         2. Trish to provide background on Guyton
   d. The planning committee was formed – Randall, Amanda, Kelli, Trish, Kit, Danny (backup)

5. Legislation Discussion
   a. SB 803 (Beall) is the latest effort to establish a peer services system. This is widely supported but there have been issues with the administration. The new bill tries a new approach.
   b. Safe Injection Site bill (Eggman) was discussed. This is still in play.
   c. Randall talked about Loan Repayment as a way to provide incentives for psychiatrists to serve in county mental health systems and asking for more state money for primary care provider scholarships for psychiatry fellowship training.
      i. CPA works closely with the California Medical Association on Loan Repayment
         1. For two years they have worked on a bill for the Steve Thompson Loan Repayment Program. Efforts have failed because the program is limited to receiving funds up to and capped at $1 million. So this year they will be working to raise the cap.

6. Coalition for Whole Health Update
   a. Nothing to report, per Carol Hood.

7. Adjourn