

CARROLL COUNTY RESPONDS TO SUBSTANCE USE DISORDER

Agenda – December 3, 2024

Prevention – Continuum of Care Workgroup

Meets First Tuesday of Feb, Apr, Jun, Oct, Dec.

FMI: (603) 301-1252

Jennifer Thomas, jennifer.thomas@graniteuw.org

Catalina Kirsch, catalina.kirsch@graniteuw.org



See Minutes and Agendas here:

<http://www.c3ph.org/initiatives/continuum-of-care-for-substance-use-disorders>

See Shared Folder for flyers and announcements here:

https://drive.google.com/drive/folders/1BFsX-kCE6IZ2VfKwWa2gB6IJ0vWaV_wr?usp=sharing

8:55 Register for Zoom Meeting <https://us02web.zoom.us/meeting/register/tZwtceigqDIuHtRorTn80ou-lizThDOxggR8>

Attendance:

- Strategic Planning for Fiscal Year 2025

Objectives	Updates	Follow up items, By Who
Assets and Gaps Analysis –	<ol style="list-style-type: none"> 1. Resources and programs for LGBTQIA – per 2023 YRBS 2. Resources/curricula for Healthy Relationships -Per 2023 YRBS 3. Need for more Youth Behavioral Health options, especially LADC/MLADC 4. Carroll County Sequential Intercept Mapping Event – Bridging Criminal Justice System and Mental Health/SUD Services. Report out and follow up Subcommittees - MH Court for Carroll County – Jen Thomas is a member 	

	<ul style="list-style-type: none"> - Increasing Behavioral Health Providers – Catalina Kirsch is a Member - Transitional Housing for Re-entry from Corrections – Caleb Gilbert is a member <ol style="list-style-type: none"> 5. Memorial Hospital Community Health Needs Assessment. Report out and follow up. 6. NH Care Connections (Unite Us NH) is rebooting in Carroll County. 7. NH Coalition to End Homelessness Regional Roundtable Update 	
<p>Increasing Awareness of and Access to Services -</p>	<ol style="list-style-type: none"> 1. Tobacco/Nicotine resource list 2. LGBTQIA resource list coming soon 3. Youth BH/LADC list options (in-person, virtual etc) 4. Avenues Recovery Center- Jack O’Conner - Jack: 603-703-9549 5. Continued resource table events 6. Naloxbox Installation. See attached flyer. 7. See all our Resource Guides at https://www.c3ph.org/resource-center/resource-guides 	
<p>Communication and Collaboration among providers – Capacity and Delivery of Services</p>	<ol style="list-style-type: none"> 1. Alternative Peer Groups – recruitment and referrals <ol style="list-style-type: none"> a. APG family night at Makers Mill – Create Recovery Night- in the works b. Working with Starting Point on “Healthy Relationship” curricula/information for GWRSD 2. LICSWA Program https://naswnh.socialworkers.org/Professional-Development/LSW-LSWA 3. NH MCAP Access Line – see flyer. Fmi https://www.nhpiip.org/nh-mcap 4. Other announcements about services delivery or capacity? 	
<p>Disseminating resource guides and other information - Catalina</p>	<ol style="list-style-type: none"> 1. For service members, veterans and their families – www.carrollcountyveteranscoalition.org 	

	<ol style="list-style-type: none"> 2. See C3PH.org https://www.c3ph.org/resource-center/resource-guides 3. Carroll County Transportation: https://keepnhmoving.com/region/region-2/ 4. YRBS Resource Guide and Infographic <ol style="list-style-type: none"> a. https://www.c3ph.org/assets/pdf/YRBS_2021_Carroll_County-School_Leadership-final_2021_10_01.pdf b. https://www.c3ph.org/assets/pdf/YRBS_2021_Carroll_County-Public_final_2024_10_04.pdf 5. NH DMI Drug Environment Report Sept 2024 New Hampshire's Drug Environment Summary: <ul style="list-style-type: none"> • There are currently 201 confirmed overdose deaths for 2024 with 48 pending; at this time in 2023 there were 297 confirmed deaths and 61 pending. • Confirmed overdose deaths so far in 2024 are over 32% less than at this time in 2023. • The NHIAC is tracking the presence of the potent synthetic opioid, Carfentanil, in the state and around the region. • Through the first 9 months of 2024, the number of suspected opioid overdoses in both Manchester and Nashua continue to trend double digit percentage points below last year. Manchester is on track to have 22% less suspected opioid overdoses than last year and 19% less deaths. Nashua is on track to have 15% less suspected opioid overdoses than last year and 35% less deaths. 	
Stakeholder assistance in information dissemination - Catalina	See CC Responds to SUD Flyers Folder here	
Strategic Prevention Model: assessment, capacity development, planning, implementation, evaluation - Jen	Update on Prevention objectives for 2024-2025 <ol style="list-style-type: none"> 1. Going to work with Carroll County Adult Ed and their students to assess Carroll County and involve them in strategic planning 2. 2023 YRBS priority indicators – mental health/suicide, dating violence, vaping, alcohol 	

	<ul style="list-style-type: none"> 3. Identifying military families. Working with DOE, DMAVS, VA, DHHS. <ul style="list-style-type: none"> a. Utilizing Ask The Question Ask the Question (nh.gov) b. Schools and youth servicing organizations identified as an area of focus 4. Providing technical assistance with strategic planning to partners who are assessing substance use or mental health needs in their organization 	
Reducing Risk Factors and Strengthening Protective Factors - Jen	<p>Update on Prevention Objectives for 2024-2025</p> <ul style="list-style-type: none"> 1. Carroll County Veterans Coalition- PTSD/STSD Presentation on December 19 at Tamworth Visiting Nurse (behind Town Hall) 1100-1300 2. Additional CCVC trainings and activities coming soon, including our conference! <ul style="list-style-type: none"> 1. Alternative Peer Groups – peer to peer support for youth intersecting with substances in some part of their lives and substance free activity opportunities with resources <ul style="list-style-type: none"> a. North with MWV Supports Recovery and TERRA Equine Therapy Center – b. South with Kingswood Youth Center and White Horse Recovery 2. Continued interest and feedback from you on what our community needs for programming! 	
Community engagement and mobilization – Catalina	NH Charitable Foundation Grant for 2024-2025	
Leadership Team membership and structure	Are we going in the right direction? What else should we be doing?	
Other updates? Early ID & Intervention Treatment & Recovery		

10:25 Other updates? Announcements?

10:30 Adjourn.

Happy Holiday Season! Thanks for all you do! If you would like to unsubscribe from this email list, send a message that says "unsubscribe" to continuum@c3ph.org .

Jennifer Thomas, jennifer.thomas@graniteuw.org

Catalina Kirsch, continuum@c3ph.org

Next meeting:

When: Feb 4, 2025 09:00 AM Eastern Time (US and Canada)

Register in advance for this meeting:

<https://us02web.zoom.us/meeting/register/tZwtceigqDluHtRorTn80ou-lizThDOxqgR8>

After registering, you will receive a confirmation email containing information about joining the meeting.

NH LSW/LSWA LSW and LSW-A Information ([click here](#) to download the info sheet)

July 2024 This [video](#) can answer many of your questions about LSW and LSW-A

- Why tiered licensure?

Billing requirements from insurance providers for licensure to provide/receive care	Professional development & career ladder
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- LSW covers primarily case management and counseling:** Psychotherapy, top signature on treatment plans, differential diagnosis are NOT in the scope of practice for LSW's

- LSW (Licensed Social Worker)**

Attend and graduate from an accredited BSW program	2 years/100 hours of supervision
UNH and Plymouth State (St. Anselm College working towards this also)	ASWB BSW Exam required
Supervision agreement on file and approved by Board of Mental Health Practice	You can sit for the exam once you've been supervised for 18 months
Supervision Agreement in on OPLC website under "Education"	You can find the request to sit for the exam on the OPLC website under "Education"
Can be someone outside the organization (off-site supervisor)	Application for the full license at the end of the two years
You will receive your LSW-C (Licensed Social Worker - Conditional) once the supervision agreement is on file	

- LSWA (Licensed Social Work Associate)**

For people who have attended a program other than a BSW (AA, BA, BS) with courses in human services (psychology, addiction, etc.)	You will receive your LSWA-C (Licensed Social Work Associate - Conditional) once the supervision agreement is on file
Supervision agreement on file	ASWB BSW Exam (ASWB might be able to offer an associate's exam, stay tuned)
Supervision Agreement in on OPLC website under "Education"	You can sit for the exam once you've been supervised for 18 months
Can be someone outside the organization (off-site supervisor)	You can find the request to sit for the exam on the OPLC website under "Education"
If Bachelors (BA/BS degree): 2 years/100 supervision hours (from an LICSW, LCMHC, LMFT)	Bachelor's degree - 4000 hours of work, no fewer than 2 years
If Associates (AA) degree: 3 years/150 supervision hours (from an LICSW, LCMHC, LMFT)	Associate's degree - 6000 hours of work, no fewer than 3 years
Sometime between when your supervision agreement is on file and when you complete the required supervision hours, you will need to complete a 30-hour training (prior to full licensure)	
What if I've been practicing for 10 years and have already have supervision but no supervision agreement on file? Submit a request to the Board for a waiver	
If you are in between your MSW and LICSW with a supervision agreement on file, you will have your LICSW-C (Conditional)	
Conditional licenses can only be renewed once	

You can find the rules, application, and supervision agreement information on the NH Board of Mental Health Practice website. <https://www.oplc.nh.gov/board-mental-health-practice>

You can find the application [here](#) . On the top of the form where it says "Profession for which application is being filed" you will put "Conditional Social Work License". Some parts of this application will not apply to you and you can leave those parts blank.



What Are Alternative Peer Groups?

Creating Connections NH is building supportive recovery communities called Alternative Peer Groups (APGs) for youth and young adults with substance use challenges. APGs offer young people a chance to connect at least once a week with peers in an environment that is fun, safe, substance-free, and recovery-focused.

APGs Provide...

- Connection through a supportive peer environment
- Fun, substance free activities
- Sense of belonging
- Focus on health and wellness

More Than Just Meeting Up

- APG Facilitators are trained recovery support professionals
- Youth help choose fun group activities that match their interests
- Opportunities for family/ caregiver involvement

Connect with a Group Near You

Southern NH

Revive Recovery (Nashua)
reviverecovery.org | 888.317.8312

Seacoast Area

Safe Harbor Recovery Center (Portsmouth)
granitepathwaysnh.org | ph. 603.570.9444

Live Free Recovery (Dover, Somersworth)
livefreerecovery.com | ph. 603.702.2461

Franklin/ Tilton/ Concord/ Plymouth Archways of Greater Franklin and Plymouth
archwaysnh.com | ph. 603.286.4255

Carroll County

Kingswood Youth Center (Carroll Cty. South)
zachary.porter@thekyc.org | ph. 603.569.5949

Terra Equine Center (Carroll County North)
ph. 603.487.6745



**University of
New Hampshire**

✉ IOD.CBH@unh.edu

🌐 iod.unh.edu/creating-connections-nh

Creating Connections NH is a project of the UNH Institute on Disability (IOD).

The IOD promotes full access, equal opportunities, and participation for all persons by strengthening communities and advancing policy and systems change, promising practices, education, and research. *Supported by funding from the NH Department of Health and Human Services.*



★ Veterans Food Assistance Program ★

What?

Starting October 1st DVNF will be offering a one-time grant per veteran household to support their nutritional needs.

How to Apply

We have an online application that will need to be completed by the Veteran. The application can be found at <https://www.grantinterface.com/sl/dI4NjA>. The link will be open starting October 1st, 2024.

Veteran Qualifications

- Must have a DD214 or Veteran ID
- Was discharged or released under conditions other than dishonorable
- A letter of reference from a case worker or advocate may make the application more favorable.

Other Details

- This is not a monthly grant.
- The groceries will be delivered directly to the Veteran using Walmart or grocery store delivery service.
- Veterans can receive up to \$450 worth of groceries

For more information, please contact us: (202) 737-0522 - info@dvnf.org
www.dvnf.org



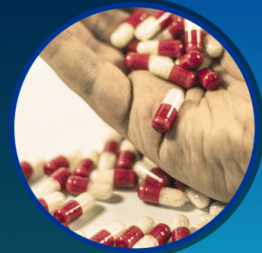
HELP CREATE A SAFER COMMUNITY

LEARN ABOUT THE OPIOID EPIDEMIC

**FREE
ONLINE
MODULE**

Opioid Use Disorder
Education
Overdose Response
Resources
for rural
New England

Free online training
on how to recognize
and respond to an
overdose



Option to receive free
naloxone (Narcan)
nasal spray by mail



Invitation to complete
an anonymous
5-minute research
survey



**University of
New Hampshire**
Extension

This research has been approved By The University of
Rhode Island Institutional Review Board



This project was supported by the Substance Abuse and Mental Health Services Administration of the National Institutes of Health under award number 1H79TI085612-01. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the NIH.



Working together to create a regional transportation network for everyone.

About Carroll County Regional Coordination Council

The Carroll County Regional Coordination Council, or CCRCC, is a group of transportation and human service providers, municipal officials, businesses, and citizens who seek to develop diverse transportation options to serve the needs of residents of all ages and abilities in the Carroll County region.

Service Area

Ossipee, Effingham, Tamworth, Madison, Tuftonboro, Albany, Conway, Bartlett, Moultonborough, Freedom, Wolfeboro, Hart’s Location, Sandwich, Eaton, Chatham, Jackson, Hale’s Location



The Role of the Carroll County RCC is to:

- Guide the development and coordination of community transportation services and information within the CCRCC area,
- Collaborate with and support regional transportation coordinators and/or mobility managers in the delivery of community transportation services,
- Advise community officials, philanthropic organizations, business leaders, and institutional leaders of the need for a coordinated approach to community transportation services,
- Monitor the implementation of a regional system of coordinated transportation services that provide all citizens access to services within the region and surrounding areas,
- Seek out additional public and private funding sources to support mobility management and transportation coordination efforts,
- Communicate with the State Coordinating Council for Community Transportation (SCC) on existing and future policies affecting community transportation services, and
- Assist in the selection and guidance of a regional Mobility Manager who will be responsible for increasing coordination of services and improving the quality of services available within the region.

Mobility Manager
Scott Boisvert
Mobility Manager, Region 2
(Carroll County)
Phone: (603) 723-4318
Email: sboisvert@tccap.org

FMI
<https://keepnhmoving.com/>

and
[Carroll County](#)
[Transportation Guide 2021](#)

[Carroll County \(Region 2\)](#)
[Transportation](#)

Members

- Carroll County Coalition for Public Health
- North Country Council
- MWV Economic Council
- Adult Day Center
- The Gibson Center for Senior Services
- CCRVSP

- Tri-County CAP
- Carroll County Adult Education
- Maine Health
- Ossipee Concerned Citizens

- White Horse Recovery
- NH Community CareGivers
- Interlakes Community CareGivers



NH MCAP

ACCESS LINE

(603) 650-4741

Provider-to-provider child psychiatry support

NH MCAP is your connection to provider-to-provider support from the Child Psychiatry team at Dartmouth Health Children's. Consults are available to primary care providers that care for children and adolescents in NH and are provided by phone, during regular business hours.

HOW IT WORKS

1

PCP needs support managing a pediatric behavioral health concern

Support needs may be patient-specific or more general and include diagnosis, medication, and other treatment options.

2

PCP or support staff call the Access Line at (603) 650-4741 to schedule a provider to provider phone consultation

Be prepared to provide patient demographic data, a direct line to the PCP (back office or cell), and scheduling availability.

3

Child & Adolescent Psychiatrist returns call at scheduled time to complete consult

Most consults are scheduled within 1-3 business days and last about 15 minutes. PCPs can bill for time spent preparing and completing the consult.

4

Consult recommendations are e-faxed to PCP

A summary of the consult is sent to include in the patient chart.



Institute for Health Policy and Practice



Dartmouth Health Children's



This program is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$850,000 with 20% financed by nongovernmental sources. The contents are those of the authors and do not necessarily represent the official views of, nor an endorsement by, HRSA, DHHS, or the U.S. government. For more information, please visit HRSA.gov.



(603) 650-4741

Provider-to-provider
child psychiatry support



Frequently Asked Questions

Q. What kind of questions can providers call NH MCAP Access Line about?

A. The Dartmouth Health Children's Child and Adolescent Psychiatrist that supports the Access Line can answer mental health questions about assessment, diagnosis, and treatment planning including medication management or other treatments. Examples include questions about specific medication dosing or side effects and help with differential diagnoses or appropriate levels of care.

Q. What's the best way to frame my question?

A. Prior to speaking with the Dartmouth Health Children's Child and Adolescent Psychiatrist we will collect some basic intake data. During the consultation, it is helpful to understand what you are looking for help with and what you have tried so far.

Q. What is the average wait time to speak with a Child and Adolescent Psychiatrist?

A. Most consults are available within 2 days of request, depending on the overall volume of requests.

Q. How long will a call take?

A. The average consultation takes about 15 minutes, but you will get as much consultation as you need.

Q. What if I need a response right away?

A. The NH MCAP Access Line is not a crisis service, but NH does have resources to help! NH Rapid Response Access Point (833-710-6477) is a 24-hour service that can help you and your patient determine next steps which may include phone support, dispatch of a Rapid Response Team, or referral to an Emergency Department. More information can be found here:

[Acute Crisis Care | Children's Behavioral Health Resource Center \(nh.gov\)](#)

Q. How do I bill for this?

A. Interprofessional telephone/internet Electronic Health Record Consultation code 99452 may be reported by the treating/requesting physician, NP, or PA for 16-30 minutes in a service day preparing for the referral and/or communicating with the consultant.

Q. How does NH MCAP manage patient data?

A. Patient data and recommendations made during the consultation are recorded in Dartmouth Health's secure, HIPAA protected electronic health record and e-faxed to the requesting provider following the consult. All data used by NH MCAP for program evaluation is de-identified.



This program is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$850,000 with 20% financed by nongovernmental sources. The contents are those of the authors and do not necessarily represent the official views of, nor an endorsement by, HRSA, DHHS, or the U.S. government. For more information, please visit [HRSA.gov](https://www.hrsa.gov).

WHAT IS CARROLL COUNTY'S

2021 YRBS

CARROLL COUNTY COALITION
FOR PUBLIC HEALTH

TELLING US?



Most Carroll County youth
DO NOT use alcohol or tobacco

In the past 30 days...

85%

of students **did not**
binge drink

85%

of students **did not**
use marijuana

72%

of students have **never used**
an electronic vapor product

Most Carroll County youth DO NOT take illicit drugs

97%

of students have **never** used ecstasy

90%

of students have **never** taken prescription
pain medication without a doctor's prescription



What increases students' chances of substance use?

Students who reported...

Ease of Access

...higher perceived ease of
obtaining marijuana had **up to
13 times greater likelihood**
of more frequent marijuana
use in the past 30 days.

...higher perceived ease of
obtaining prescription drugs
without a prescription had **up to
40.35 times greater likelihood**
of ever having used ecstasy.

Violent Relationships

...being forced by a dating partner to
engage in unwanted sexual activities
one or more times in the past 12
months are **22.2 times more likely**
to have vaped in the past 30 days.

...experiencing more instances of
physical harm from a parent or
other adult at home had **up to
12 times higher likelihood** of
using a prescription drug without a
prescription in the past 30 days.

Poor Mental Health

...more frequent days of poor
mental health are associated
with **up to 7.2 times higher
likelihood** of using prescription
pain medicine without a
prescription or contrary to a
doctor's instructions.

...missing more days of school
due to feeling unsafe are **up to
31 times more likely**
to have ever used ecstasy.

How do schools and communities use YRBS data?

- + School guidance counselors and principals use YRBS data during back-to-school nights.
- + School districts use YRBS data to develop appropriate educational health initiatives and establish curriculum objectives.
- + Teachers use YRBS data to teach students data interpretation and critical thinking by analyzing trends, comparing years, and evaluating intervention effectiveness.
- + Health education teachers use YRBS data to discuss current health issues facing youth and to compare current levels of healthy and unhealthy behaviors.
- + Schools and communities can use YRBS data to develop and strengthen health promotion and disease prevention programs and access funding for grants.

What is the Youth Risk Behavior Survey?

The Youth Risk Behavior Survey (YRBS) asks students about risky behaviors and those behaviors that keep them safe. YRBS data is used to enhance state and local grant applications, develop more effective youth prevention programs, and offer a consistent long-term tool for measuring progress in reducing youth health risk behaviors.



For more resources, go here



Granite United Way

CARROLL COUNTY COALITION
FOR PUBLIC HEALTH

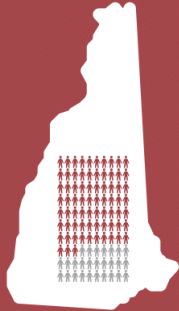


NEW HAMPSHIRE
DHHS
DEPARTMENT OF
HEALTH & HUMAN SERVICES

www.c3ph.org | Carroll County Coalition for Public Health (C3PH)
1230 Route 16 | Ossipee, New Hampshire 03864 | 603.301.1252 | info@c3ph.org

NALOXBOX Indoor Overdose Rescue Station

What were the circumstances surrounding overdose deaths in 2022, New Hampshire?



Opportunity for Change

Potential opportunities for intervention include linkage to care or life-saving actions at the time of the overdose

- 73.4% of drug overdose deaths had at least one potential opportunity for intervention
- 60.6% potential bystander present

*<https://www.cdc.gov/drugoverdose/fatal/dashboard/index.html>



Mission

To improve the capacity of bystander rescuers to save the lives of victims of opioid overdose with overdose response tools, including naloxone.

Benefits



photo credit: nalobox.org

- Increase access to publicly available overdose response tools
- Provide technical assistance for naloxone storage
- Improve the capacity of bystander rescuers
- Reduce stigma associated with substance use disorders
- Reduce morbidity and mortality from opioid overdose

COMMUNITY-BASED SOLUTION TO A NATIONWIDE EPIDEMIC

"Opioid overdose can quickly lead to death if no intervention is made. If we begin to treat opioid overdose like any other bystander enabled medical response, we will begin to reduce the stigma often associated with opioid overdose."

NaloxBox units are installed in many public-facing spaces including city and state offices, libraries, universities, public housing authorities, recovery centers, and more.

CARROLL COUNTY COALITION FOR PUBLIC HEALTH

CARROLL COUNTY RESPONDS TO SUBSTANCE USE DISORDER

fmi: continuum@c3ph.org



HELP IS A CALL AWAY.
CALL 2-1-1

