

Meeting Minutes

January 19th, 2010 6:30-8pm at Franklin Regional Hospital

Present: Chief David Goldstein & Lieutenant Stephanie Clough (Franklin Police); Sheriff Scott Hilliard (Merrimack County); Michael Loomis (CCNTR); Bill Grimm (LRGHealthcare Board); Mayor Ken Merrifield, City Manager Elizabeth Corrow, City Councilor Bob Sharon (City of Franklin), Desiree McLaughlin (Franklin School Board), Jennifer Pendarvis (Franklin High School ELO), Lilly Cote (Citizen), Alison Christy (Franklin High School), Katy Shea (CRCPC Coalition); Danielle Barker; Patricia Prescott (Youth/Student Director); Tracy Goldthwaite (Franklin School Board); Rick Silverberg (CCNTR/Health First); Lynn Haskell; Rev. Glen Carter (Hope Community Chapel); Jaime Powers & Peter DalPra (Phoenix House); Peter Doane, MD (Franklin Regional Hospital)

Review of Statistics and Data

Michael Loomis presented a power point on data related to the LRGHealthcare Emergency Department visits related to substance abuse, Franklin District Court drug charges, and Youth Risk Behavior Survey results for Franklin. Attached is a copy of the presentation as well. The Franklin Police Dept. also delivered arrest stats indicating a trouble spot among adults in their late 20's through 30's.

Discussion of Priority Substances

The data provided three priority substances for two ages groups. The substances include Alcohol, Marijuana and Prescription Drugs among teenage youth and adults in their late 20's through mid-forties.

Discussion of Grant Opportunities

Three grants are available and are listed below with the due dates:

1. NH DHHS Bureau of Drug and Alcohol Services Prevention Services Unit - Due February 18th by 4pm. CCNTR has submitted a letter of intent as a place-holder.
2. National Drug Free Communities Grant Program - Due March 19th. The 2010 Drug Free Communities Support Program Request for Applications (RFA) is now available, visit <http://www.ondcp.gov/dfc/> for more information on how to apply. Shannon Swett of the CRCPC is putting together additional resources that will be useful in putting together a proposal. In addition, the CRCPC is able to use some of their funds to pay for grant writers to assist Coalitions in the Capital region in applying for these funds. She is still determining how much will be allowed and how much they have available.
3. ARRA grant to supply summer jobs to youth

4. The Phoenix House has a grant to hold 4 presentations on substance abuse

It was widely agreed upon that before we talk about writing the grants, the task force focuses the next meeting on strategic planning between two breakout groups focusing on the different age populations.

LRGHealthcare Discussion of Prescription Drugs

Dr. Doane, who is the Assistance Chief of Staff for Franklin Regional Hospital, discussed the policy and procedure around prescribing pain medications at the LRGH practices. Pain medication prescriptions used to be only for post-operative situations until recently when more patients have been requesting them and more clinicians have been writing prescriptions for them. Dr. Doane stressed that clinicians have a large concern for their patients and if they are in pain, they want to provide a treatment to help relieve the pain and suffering. But many patients today are taking advantage of this and using them irresponsibly or selling them.

Today, LRGH practices and Health First Family Care Center have patients who are going to be on pain medication for longer than one prescription sign a contract stating many points including that they will not use the drug irresponsibly and won't sell it. Many patients who are looking to be prescribed a pain medication for other uses than pain have used many excuses to get access to the medication including faking back pain or pricking their finger and dropping blood in urine to fake kidney stones. Clinicians can provide various ways to make sure the patient is using it appropriately including asking for pill counts, testing for the presence of other legal and illegal drugs in their system or even the lack of the prescribed drug in their system. Still, patients find ways around these efforts. Some pharmacists will contact clinicians to find out if prescriptions are real in certain situations and even communicate with each other. This mostly occurs by pharmacies owned by the same company because they have electronic prescription monitoring networks. Although Dr. Doane suggested that more could be done to monitor and track medication prescription misuse, but many opponents dismiss this because of privacy infringement concerns.

Next meeting will be February 2nd at 6:30pm in Franklin Regional Hospital.