

Colorado Consortium for Prescription Drug Abuse Prevention

Affected Families & Friends Work Group Meeting Minutes

February 20, 2025 via Zoom

Present:

Sarah Werner and Tracy Ritter, Co-chairs
Becca Barnhart, CDC Foundation
Amy Walker, Peer Recovery Coach
Annette Marquez, Purple Mountain Recovery
Lorraine Hoover, Raymond Rountree, Jr. Foundation
Julie Wright, Maddie Wright Foundation
Debbie Binks, Castle Rock Police Department
Karina Schorr, Eagle County Opioid Abatement Council
Aiden Ridley, Community Member
Paul White, West Metro Fire Department
Chief Austin Wingate, Grand County EMS
Cmdr. Curt Smith, Poudre Fire Authority
Dep. Paul Smith, Garfield County Sheriff's Dept.
Aaron Vestal, XFoundation
Sara Briggs, Spanish Peaks Regional Health Center
Fran Babrow, Adams County Health Department
Jessy Jiao, Denver Department of Health & Environment
Colorado Springs Fire Department: Capt. Andrew Cooper, Kellie Helderman
Consortium: Jose Esquibel, Gina Olberding, Hilary Bryant, Jen Place, Eric Barker, Shayna Micucci, Jessica Eaddy, Rosemarie MacDowell

Absent: See attached roster.

Work group program manager Hilary Bryant called the meeting to order at 12:05 p.m. She reviewed the work group mission statement and provided a brief history of the Consortium, including the structure of work groups and recent activities sponsored by the Affected Families & Friends Work Group. Hilary also reviewed the state lawsuit against pharmaceutical companies that awarded settlement funds to be distributed by 19 state regional opioid abatement councils. The funding is earmarked for issues related to substance use disorders.

Approval of Minutes:

A motion was made to approve the November meeting minutes. Motion approved.

Presentation: Colorado Springs Fire Department (Capt. Andrew Cooper and Kellie Helderman):

Kellie Helderman is a Community Medical Supervisor with the Colorado Springs Fire Department. Kellie oversees fire department community response teams, including a mental health response team. Prior to the fire department, Kellie worked for a community mental health agency as a licensed counselor. Presentation summary:

The department has homeless outreach and opioid response programs that deal with substance use and overdoses. They also work with individuals discharging from the criminal justice system

and provide referrals to outpatient MAT services. A licensed addiction counselor oversees these programs.

Capt. Cooper spoke about other department programs, including an aging-in-place program that focuses on keeping people in their homes as they age and a super utilizer program. The super utilizer program works with people who often use the 9 1 1 system. Department personnel contact these individuals to determine the reasons for their heavy use of the 9 1 1 system. Reasons for calling 9 1 1 are varied, i.e., drug addiction, overdose, a mental health issue, and isolation and loneliness. Fire Department personnel often engage with family members to provide resources. Many of the programs were initiated with the support of grant funding and, because of the success of these programs, the city has provided support through the general fund.

Comments/Questions:

Hilary Bryant asked Captain Cooper about suggestions he might have for smaller communities that may not have the funding to support co-responder programs. Capt. Cooper suggested starting small and then building community relationships with town officials and hospital systems. His department began with a small amount of funding from two local hospitals. Support from community partners is paramount to building a strong coalition across the entire community.

Kellie Helderman commented that their community began a Naloxone Leave Behind Program, and they are starting to see a shift in the culture of stigma.

Jose Esquibel said he was very pleased to hear about the work being done in Colorado Springs and suggested it would be beneficial to share their successes by attending the State Opioid Response Conference and the quarterly Fentanyl Response Stakeholder Sessions.

Jen Place spoke about the Medication Assisted Treatment program and plans for expansion. She said she would follow up with Kellie.

Discussion/Questions:

The work group co-chairs and program manager prepared the following questions for discussion during the meeting. Work group members were encouraged to share their experiences.

- When responding to an overdose emergency, how do first responders interact with family members?
- Are there gaps in services for families affected by the opioid/fentanyl crisis?
- Do cultural considerations (ethnicity, race, gender, family structure, etc.) have a role when responding to emergency calls?
- How can the Consortium work group members support first responders when dealing with families?

Comments:

Shayna Micucci: As a sibling I received very little information. Most information was directed to my parents. I think topics could be discussed more broadly rather than directed to a primary contact. Examples might include resources for sibling grief and sibling therapy groups.

Tracey Ritter: From an affected family member point of view, I think siblings need to be involved and supported. The entire family is part of the recovery process.

Julie Wright: I agree with Shayna that other family members should be involved and should also be educated about drugs, including drug withdrawal symptoms.

Sarah Werner: The Affected Family & Friends Work Group would like to help coordinate conversations to facilitate family integration. I found the Consortium on my own, and it has opened a whole world to me regarding how much I didn't know and wish I had known. Families can help educate others.

Austin Wingate: I've been involved in EMS for almost 20 years. I spent the first decade of my career working in an urban city environment where the frequency of drug misuse was high. One of the things I think is significantly lacking in any of our training is compassionate communication and how to interact with people. A lot of training focuses on handling immediate situations and taking action. Dealing with conversations is difficult once the situation has been handled. Many first responders have not received formal training about having these difficult conversations and are hesitant to initiate them. The best lesson I ever learned as a responder about how to communicate with people during a tragic situation was from a pastor who happened to be a neighbor of the person requiring assistance.

Hilary Bryant asked Austin if he would like to collaborate on a compassionate response training program that could be shared with first responders.

Sarah Werner: The faith community can function as a way to reach families.

Shayna Micucci: I help support a Black leaders work group that is specifically looking at services and resources for the Black community. There are higher rates of overdose in the Black and the Indigenous communities as well as gaps in services for their families.

Aaron Vestal: Education and awareness are needed for families that have not yet been directly affected. There is a significant amount of stigma surrounding substance use and pre-emptive education to raise awareness would benefit communities.

Hilary suggested that Aaron join the Consortium's Public Awareness Work Group as the work group is currently working on a number of public awareness campaigns throughout Colorado.

Amy Walker worked with the Hard Beauty Foundation to provide Narcan training at the Youth Police Academy, Castle Rock Police Department and with the local fire department. Hard Beauty educated teens on the dangers of illicit drugs and the Good Samaritan Law. She said more programs like this would be of great benefit.

Aidan Ridley said his son might have been saved had they had a better understanding of an overdose.

Hilary Bryant said the CDPHE fentanyl campaign will be addressing overdose responses. The campaign will begin in June.

Sara Briggs, Spanish Peaks Regional Health Center, said stigma is a major barrier in her small town, and there are challenges in getting people into treatment. Multi-generational living situations also complicate communications.

Lorraine Hoover started the Raymond Rountree Foundation a number of years ago after the loss of her brother to a fentanyl overdose. She recently lost a nephew, even though he had been in rehab at CeDAR.

Julie Wright began the Maddie Wright Foundation after her daughter was given fentanyl represented as oxycontin. The foundation works to educate people regarding the signs of overdose, the Good Samaritan Law, and the use of Narcan.

Work Group Meeting Summary:

The meeting minutes will be sent to all meeting participants, including guests.

Hilary will provide compassion cards to agencies and follow up with Aaron Wingate regarding compassionate training.

The Stories in Black and White project will be continued this year.

Adjournment/next meeting date:

The meeting adjourned at 1:30 p.m. The next meeting will be held on Thursday, May 15, 2025 from 12 to 1:30 p.m. via Zoom (speaker and topic TBD).

The work group will be meeting quarterly in 2025: February 20, May 15, August 21, November 20.

Attachment: Work group roster

CC: Meeting speakers and guests