

Westmoreland County Opioid Epidemic Response Workshop

January 17, 2018 – Westmoreland County Community College

Welcome and Introductions

Mark Nordenberg

Mark Nordenberg, Chancellor Emeritus, University of Pittsburgh, and Chair, Institute of Politics, welcomed the speaker and participants to “Addressing the Opioid Crisis in Southwestern Pennsylvania: Bridging Public Health and Public Safety.” He stated that the event would not have been possible without the valuable partnerships the Institute of Politics has formed in its work around the opioid epidemic. These partnerships have brought together leaders from the fields of public health and public safety to more holistically address the opioid epidemic in Western Pennsylvania. The Institute’s partners include:

- University of Pittsburgh School of Pharmacy Program Evaluation and Research Unit (PERU) and its Technical Assistance Center (TAC)
- Washington Drug and Alcohol Commission, Inc.
- Westmoreland Drug and Alcohol Commission
- U.S. Drug Enforcement Administration
- U.S. Attorney’s Office for the Western District of Pennsylvania

This partnership culminated in a report entitled, “A Continuum of Care Approach: Western Pennsylvania’s Response to the Opioid Epidemic,” that outlines a public health and public safety framework to the opioid epidemic in Western Pennsylvania. Following the release of the report, the partnership hosted a series of community opioid workshops, including the event today in Westmoreland County. Additionally, members of the partnership are putting the finishing touches on a special edition of *Commonwealth: a Journal of Pennsylvania Politics and Policy* devoted to the opioid epidemic and targeted to Pennsylvania policy makers.

Nordenberg stated that given a cure for addiction is unlikely to be around the corner, we need to continue to work together to address the opioid epidemic. The key to continued cooperation and developing an effective solution is strong leadership at the top. Earlier this month, PA Governor Tom Wolf issued a disaster declaration for the heroin and opioid epidemic that will streamline regulatory and legal procedures to speed up recovery efforts without legislative approval. Further, PA Attorney General Josh Shapiro has made the opioid epidemic a top priority in his office, devoting time and resources to combating this crisis. Members of the PA General Assembly have also sought to introduce legislation to increase resources and support around the epidemic. County Commissioners across the state, including Westmoreland County Commission Gina Cerilli, have likewise made curtailing the opioid epidemic the highest priority.

Gina Cerilli

Commissioner Cerilli thanked the participants for coming and for their hard work in battling the opioid epidemic. The opioid epidemic is a national issue effecting everyone regardless of race, gender, age, or location. To combat the epidemic, our region needs to be engaged and reduce the stigma with finding help for addiction.

Recovery is Possible Panel

Jana Kyle

Jana Kyle, Executive Director, Fayette County Drug and Alcohol Commission, Inc., said that the opioid epidemic is a hugely emotional issue and opinions vary widely on what the appropriate response to it is. Some of these opinions are based on information that is not fact based, especially around substance use disorder (SUD) recovery. This panel focuses on the stories of two people that have been successful in their recovery from SUD and now help others in their own recoveries.

Ashely Potts

Ashley Potts, Licensed Social Worker, Allegheny Health Network (AHN), stated that her current role with AHN is the help people in recovery. Her office responds to all of the overdoses brought into Allegheny General Hospital and Western Pennsylvania Hospital. Within the hospital setting, Potts and her colleagues must manage not only people's SUDs, but also the significant health issues associated with them. Traditional rehab settings are unable to accommodate many of the acute SUD cases that come into the hospital because of their associated health issues.

Potts stated that she understands firsthand the impacts SUDs can have on a person because of her own struggles with heroin. Her SUD resulted in becoming homeless, going to prison, and losing custody of her daughter. For Potts, becoming a heroin addict was not a rational choice but instead a series of cascading events. Having a criminal conviction has affected every part of her life. It made it difficult to reintegrate into society by preventing her from getting a job or housing. It was only through people taking a chance on her that she was able to get her life back on track. Society needs to be willing to take a chance and let people dealing with SUD feel like someone cares. If we can take a chance, more people can recover.

Austin Hixson

Austin Hixson, Certified Recovery Specialist (CRS), Southwestern Pennsylvania Human Services, Inc., believes that nobody is too far gone to recover. As a CRS, Hixson works every day to get people suffering from SUD back to their family, friends, and loved ones. The scope of the opioid epidemic requires a flexible and dynamic response. People take drugs for many different reason and therefore require different solutions to develop an effective treatment.

For Hixson, Medication-Assisted Treatment (MAT) was the right solution for him to overcome six years of drug abuse. MAT is an invaluable tool to increase someone's chance of recovery. However, it is a treatment method that has been stigmatized because of misinformation and myth. MAT allows patient to make lifestyle changes and engage in therapy that improve the chances for recovery. Communities should not be afraid of MAT clinics because they are safe and well regulated.

Open Discussion

During the open discussion speakers reiterated the importance of taking people suffering from SUD as they are, and that each person's circumstances presents its own barriers and opportunities during all phases of SUD and recovery. This means that their needs to be a variety of opportunities for recovery including faith based, secular, and MAT. Further, even if people with a SUD are not ready to stop, we need to at least reduce the harm that is done until they can find a treatment that works for them.

The open discussion also focused on increasing awareness and training among health care professionals and first responders to reduce the stigma of people with SUD, so that they are better able to receive medical treatment and recovery services.

Fentanyl and Emergent Threats: Partnering Prosecution and Public Health

Soo Song

Soo Song, First Assistant U.S. Attorney, Western District of Pennsylvania, stated that in recent years there has been a massive increase in the number of opioid related deaths in America. Every 16 minutes another person in the US dies of an opioid overdose. Last year, drug fatalities outnumbered motor vehicle deaths, the peak of the AIDS and homicide epidemics, and the entire Vietnam War. Pennsylvania and especially Western Pennsylvania has been one of the most impacted areas of the country.

Nationwide, the top drug associated with overdoses is fentanyl. It is a synthetic opioid 50 times stronger than heroin. Because it is synthetic opioid, fentanyl is cheaper and easier to produce than heroin. The rise of fentanyl has made for an environment especially dangerous for first responders because even small amounts of fentanyl can be lethal.

The U.S. Attorney's Office in partnership with DEA and other law enforcement agencies works to apprehend drug traffickers no matter where they are in the world. Drug traffickers continue to innovate and are now mixing their heroin with fentanyl, mainly produced in China, purchased off the dark web. A significant amount of drug commerce occurs on the dark web through websites like the Silk Road and AlphaBay Market.

Cheryl Andrews

In 2016, Cheryl Andrews, Executive Director, Washington Drug and Alcohol Commission, Inc., with the help of the PERU Technical Advisory Committee (TAC) established an opioid response coalition aimed at reducing overdose deaths in Washington County. The coalition brings together key stakeholders from public health and public safety organizations to address the opioid epidemic in a systematic fashion. The coalition's work is driven by data collected from across the county. This data allows the coalition to build strategies to address hotspots and create maps of overdose calls and naloxone distribution.

The coalition has five subcommittees to engage key areas more in depth in Washington County's opioid response. These subcommittees examine the areas of stigma, naloxone, education, coordination, and treatment. In 2017, Washington County had a reduction in overdoses which in some part was a result of the coalition's activities. When the coalition began, a lot of people were resistant to joining, but now because of its continued success people are eager to get involved.

Eugene Vittone

Eugene Vittone, District Attorney, Washington County, began his presentation by stating that we as a region cannot arrest our way out of the opioid epidemic. Heroin and opioids are now the number one drug in criminal cases. For our response to this crisis to be effective, the criminal justice system must continue to pursue drug dealers, but also work to build better diversion opportunities for people suffering from SUD.

Washington County has implemented a series of programs to help provide diversionary opportunities to defendants and improve public safety and health in the county. Among these programs are the implementation of a drug court, DUI court, and helping people in jail with drug treatment through a Vivitrol injection program.

Brian Dempsey

Brian Dempsey, Intelligence Specialist, DEA, discussed the rise in fentanyl use both nationally and regionally and outlined the DEA's efforts to combat it. There has been a transition by drug traffickers from manufacturing and distributing heroin to fentanyl driven by the cheaper cost of manufacturing and shipping fentanyl. The DEA is working with China, where much of fentanyl used in United States is produced, to disrupting the production and shipping of fentanyl and fentanyl analogs. Regionally in 2016, for the first-time fentanyl related deaths surpassed heroin related deaths. In 2017, Allegheny County is projected to have 712 overdose deaths, largely drive by the rise of fentanyl and fentanyl analogs.

The DEA continues to work on opioid prevention and education. Norwin School District was one of the first in the nation to pilot the Operation Prevention program, a joint initiative of the U.S. Drug Enforcement Administration and Discovery Education. The program is designed to teach students about the science behind addiction and how drugs affect the body. Additionally, the DEA is working with state and local law enforcement agencies on the Trojan Horse initiative. For this program, the DEA analyzes and coordinates law enforcement based on stamp bag identification and distribution.

Open Discussion

During the open discussion speakers and participants explored issues related to controlling equipment used in the production of illegal substances, the effect of the legalization of marijuana on opioid use, and the DEA's role in investigating companies that produce opioids.

Coordination of Tactical Diversion

Kate Lowery & John DeLuca

Kate Lowery, Single County Authority Administrator, Beaver County Behavioral Health Drug and Alcohol Program, and John DeLuca, Chief of Police, City of Beaver Falls, presented on the Beaver Falls Magisterial District Judge (MDJ) Program. Beaver County has been especially hard hit by the opioid epidemic through increases in drug activity and overdose deaths.

Chief DeLuca in partnership with the Chief MDJ launched the Beaver Falls MDJ Program to develop safe treatment options for individual who overdose in a public location. After reviving someone who overdosed, the Beaver Falls Police Department will arrest the overdose victim for public intoxication. The victim will be housed in the Beaver Falls jail for up to six hours so that they can be observed for their

safety. During this time the person who was arrested will be given the option to participate in the MDJ program. If they agree to participate, they will receive a hold on their summary citation.

For their charges to be dismissed, participants must complete a two-step program. During the first 90 days, participants are placed in the appropriate level of treatment. They are also evaluated for underlying issues that frequently occur around SUD, such as employment, housing, and other services. During the second step of the program, participants must follow additional treatment recommendations if required. They also must complete 60 days of weekly or bi-weekly meetings with an outreach group and mentor new group members.

Although the program is a recent innovation in Beaver County, there have already been encouraging results. Since the program launched in late 2016, eight out of 11 participants (73 percent) have successfully completed the program.

David Lozier

David Lozier, District Attorney, Beaver County, discussed the implementation of diversionary opportunities in Beaver County. Recognizing that recidivism cannot be solved through jail or probation alone, the Office of the District Attorney in cooperation with the Beaver County MDJs developed a diversion program for people with SUD. During the preliminary hearing, people with SUD are assessed by a caseworker looking for treatment diversion options. If program participants complete at least 90 days of treatment, their charges are dismissed. Unsuccessful participants are sent to the Beaver County Jail. While in the jail, participants have a second chance at treatment and receive a Vivitrol shot as they are released. Participants leaving jail receive a low-level misdemeanor as the final charge that does not show up on their criminal record. The only cost to the participants is a \$40 fee paid to the wellness/reentry class providers.

Since being implemented six months ago, 121 people have participated in the program and 36 people have successfully graduated from the program. Currently there are 74 participants in the program. The Beaver County Office of the District Attorney and MDJs are committed to continuing to build this program.

James Higgins

James Higgins, Supervisory Special Agent, Drug Enforcement Administration, stated that the mission of the DEA's Tactical Diversion Squad is to "disrupt the diversion and trafficking of pharmaceutical controlled substances." There are many methods of drug diversion and the internet is an ever-growing source of diversion.

In Western Pennsylvania, the DEA has engaged in a series of initiatives to meet its mission. Among these initiatives is DEA 360. DEA 360 is a strategy built on three pillars: enforcement, diversion control, and community outreach. Additionally, the DEA, in conjunction with state and national agencies, has implemented an opioid fraud and abuse pilot program. The program is run out of the U.S. Attorney's Office for the Western District of Pennsylvania. In 2017, the program indicted five doctors and received 20 voluntary surrenders.

Open Discussion

The open discussion focused on the impact of shutting down "pill mills" on patients with SUD. Before shutting down a pill mill, the DEA provides a brief notification to treatment providers to put them on

notice. The DEA engages in outreach following the raid to provide information to individuals seeking treatment. Additionally, the DEA provides patient records to the local single county authority so that they can reach out to individuals in order to prevent potential overdoses.

Community Paramedicine and the Opioid Crisis: First Responder Warm Handoff Program

Christie Hempfling

Christie Hempfling, Emed Health and CONNECT Community Paramedic Program, Community Health Team Manager, The Center for Emergency Medicine, presented on the role EMS can play in responding to the opioid epidemic. In addition to reviving people with Naloxone, EMS providers across the country have developed innovative programs to address the epidemic.

In New Hampshire, fire department-based EMS have developed a “safe stations” program. In this program, the fire station serves as a warm handoff to treatment. People with SUD can enter the fire station and request help. EMS practitioners will perform a medical assessment on them to determine if they are medically fit to enter a treatment program. The fire station will then direct the person to the appropriate level of care. Importantly for the success of the program, there is no criminal prosecution that occurs from a person receiving help.

Additionally, some EMS providers have developed a mobile MAT program. Under this program, following an emergency room overdose, emergency room doctors can order two rounds of suboxone for the patient. Community paramedics will then meet the patient in the community to administer the suboxone so that it is not diverted. During this visit the paramedics will perform a health checkup of the patient.

Following the Governor’s disaster emergency announcement, first responders will be able to leave behind naloxone following an overdose. The City of Pittsburgh will start this program soon.

CONNECT’s PORT Program attempts to strengthen the warm handoff process following an overdose. Under the program, a post-overdose response team will go out to the home of the person that overdosed to address the health determinants that caused the addiction issues. The team will help the overdose victim to navigate human services and harm reduction.

Addiction as a Disease

Mitchell West

Dr. Mitchell West, Medical Director for Addiction Medicine, Allegheny Health Network, began his presentation with a historical overview of the opioid epidemic. In the 1990s, doctors were not managing pain effectively, leading to pain being named a fifth vital sign. By 2000, treating pain became big business for pharmaceutical companies and physicians. In 2010, concern grew within the United States about analgesics and heroin use, as overdose rates tripled. By 2013, the global supply chain for opioids became much more sophisticated, especially with the rise of fentanyl use. In 2018, treatment patients are no longer going through normal drug progress, alcohol and marijuana as gateways to harder drugs. Instead, patients are starting with or moving quickly to fentanyl and heroin.

To combat the opioid epidemic as a region we need to do more to address supply and need to look at the drivers of addiction. These drivers or social determinants of addiction including: poverty, income inequality, socioeconomic factors, economic shocks, manual labor in poor communities, increased incarceration rates. Additionally, adverse childhood experience also drive addiction.

Addiction over time modifies the brain's reward pathway, transforming behaviors from being impulsive to compulsive. As these modified pathways are reinforced, people lose control over the behavior. Addiction is a disease because of the changes it causes in the brain. By addiction being classified as a disease, the stigma for seeking help is removed and finding payment for treatment is easier.

To effectively treatment opioid SUD requires recovery pathways that are suited to the needs of patients. One of the effective methods of recovery is medication-assisted treatment (MAT). MAT medications come in various forms from antagonists to partial agonists to full agonists. MAT medications, like suboxone enable people to stay engaged in recovery longer. MAT has a variety of benefits including decreasing relapses and preventing infectious diseases and overdoses.

Recovery is Possible Panel – Part II

Kendra DiLascio

Kendra DiLascio, Case Manager, Southwestern Pennsylvania Human Services, Inc., recounted her struggles with addiction and experiences with the criminal justice system.

Mary Phillips

Mary Phillips, knew early in her life that her relationship with alcohol and drugs was not normal. She entered her first detox facility at 19 years old and at 22 was finally able to stay sober for about 10 years. Three years ago, Phillips broke her leg and became addicted in opioids and heroin in the wake of recovery from the injury. Fortunately, since September 2016, she has maintained her sobriety using suboxone. Mary believes that there needs be more opportunities for intervention, especially for young adults. There needs to be more prevention efforts in high schools and college campuses and greater reinforcement for not using alcohol and/or drugs through initiatives like sober dorms or floors.

Open Discussion

Within the open discussion, speakers addressed deficiencies within the treatment system including the need for more peer support and warm handoffs. Additionally, they discussed the benefits of utilizing MAT, including suboxone, during recovery.

Substance Use Disorder Treatment: Roles for Single County Authorities and Centers of Excellence

Colleen Hughes & Elizabeth Comer

Colleen Hughes, Executive Director, Westmoreland Drug and Alcohol Commission, and Elizabeth Comer, Director, Clinical and Case Management Services, Westmoreland Drug and Alcohol Commission, outlined the role of the single county authorities (SCA) within the opioid epidemic response. SCAs receive state and federal dollars through contracts with the Department of Drug and Alcohol Programs (DDAP) to plan, coordinate, programmatically and fiscally manage, and implement the delivery of drug and alcohol prevention, intervention and treatment services to respond to the needs at the local level.

However, SCAs are more than just funding organizations and serve as the central point of contact for people seeking treatment help. Within this role, SCAs are the hub for prevention, intervention, case management, and recovery support within counties.

SCA engage in prevention initiatives through evidence based programs and engaging people in schools and community events. Intervention efforts center on naloxone distribution and training and student assistance programs to identify at risk young people. Case management services include screening and level of care assessments for treatment services. Additionally, SCAs work to identify and provide support non-treatment needs. Finally, SCAs provide recovery supports to meet people's basic needs while in treatment.

Cheryld Emala

Cheryld Emala, Executive for Innovation and Strategic Alignment, Southwestern Pennsylvania Human Services Center for Excellence, presented on the launch of the Centers for Excellence (COE) and their role within treatment delivery. The PA Department of Human Services, following a review of medical billing data showing a lack of engagement and success around opioid SUD treatment, launched 50 COE across the state. COE's are tasked with meeting the following goals:

- Deploy a community-based care management team of licensed and unlicensed professionals
- Track and report aggregate outcomes
- Meet defined referral standards for drug and alcohol, mental health counseling as well as primary care needs.
- Report on standard quality outcomes
- Participate in a learning network

To accomplish these goals, COE staff will work to facilitate admission into treatment from emergency departments and primary care physicians. Additionally, staff will work to provide support for patients transitioning from inpatient to outpatient treatment. In order to be successfully, COEs need to work with people where they are, increased access to MAT, and improve warm handoffs.

Open discussion

During the open discussion the issue of the difficulty of maintaining employment during treatment and the work of the Westmoreland coalition to address the opioid epidemic. Westmoreland County, with support of the PERU TAC, has worked to coordinate public health and public safety organizations to better respond to the opioid epidemic in a systematic and data driven manner. The coalition has also established a drug court and reentry program.

Keynote Address

Josh Shapiro

Josh Shapiro, Attorney General, Commonwealth of Pennsylvania, emphasized the importance of the opioid epidemic to the Office of the Attorney General (OAG). To combat the opioid epidemic requires a multidisciplinary approach that blends public safety and public health.

The OAG is working to make communities safer. Since taking office, Attorney General Shapiro has prosecuted five drug dealers a day. He has also worked to crack down on the diversion of legal prescription drugs for illegal uses. His office is examining the opioid supply chain to see where opioids

are coming from and where they are going. Furthermore, the OAG is working to hold the pharmaceutical industry accountable. Pennsylvania is one of four states looking into five manufacturers and distributors that manufacture and distribute 90 percent of the opioids in the United States. Through this prosecution, the OAG will recover resources for Pennsylvania and change corporate behavior.

Additionally, the OAG recognizes the need for public health to address the epidemic. Treatment options must be made more available. Currently, the treatment system faces several problems. There is a backwards incentive system in hospitals because of federal pay standards. Hospitals make more money with better pain scores, incentivizing overprescribing opioids. Additionally, insurance needs to be reformed to provide incentivize recovery. Treatment services should be easier to access and should not require preauthorization. We need to work to create an environment where people are more aware of the dangers of prescription drugs and are okay to ask for treatment help.

Attorney General Shapiro believes that the OAG has a lot still to do, but they are committed to make Pennsylvania communities safe and prevent pharmaceutical companies and doctors from taking advantage of Pennsylvanians.

Next steps and Closing Remarks

David Battiste

David Battiste, Assistant Special Agent in Charge, Drug Enforcement Administration, has been with the DEA for over 27 years and has never experienced a drug epidemic as severe as the one we are currently in. A large part of the severity is driven by overprescribing opioids. The scope of the opioid epidemic has forced law enforcement agencies across the country to engage with nontraditional partners to address the epidemic through public health and public safety.

The opioid epidemic is a problem that we can collectively address. If Western Pennsylvania is able to develop a solution, other parts of the country will seek to emulate us. We need to continue to work to address this daunting challenge.