

ALLEGANY COUNTY HEROIN & OPIOID ABUSE AD HOC COMMITTEE

July 14, 2016
NOT APPROVED

Committee Members Present: J. Hopkins (Chairman), T. O'Grady, L. Ballengee, M. Biddle, A. Buchholz, M. Carbone, K. LaForge, W. Penman, B. Riehle, C. Zenoski (Absent: M. Biddle, J. Chaffee, M. Chamberlain, M. Damiano, V. Grant, L. Haggstrom, C. Ivers, G. Muscato, R. Root)

Others Present: S. Decker, G. Kocsis, Dr. Kevin Watkins (Public Health Director, Cattaraugus County Department of Health), C. Whitwood

Call to Order: The meeting was called to order at 1:05 p.m. by Committee Chairman Judy Hopkins.

Approval of Minutes:

A motion was made by Mrs. Ballengee, seconded by Mr. Penman, and carried to approve the Allegany County Heroin & Opioid Abuse Ad Hoc Committee minutes of June 23, 2016.

Dr. Kevin Watkins, Public Health Director, Cattaraugus County Department of Health

Chairman Hopkins remarked that Cattaraugus County is ahead of Allegany County in addressing the Heroin and Opioid Epidemic and so she asked Dr. Kevin Watkins, Director of the Cattaraugus County Department of Health to share what they're doing in Cattaraugus County.

Dr. Watkins started by saying that they hadn't prepared themselves like they should have when the epidemic hit Cattaraugus County. They've since put together a task force to address the problem. He remarked that this is the third heroin epidemic. The first was after World War II, and the second was after the Vietnam War. The third epidemic started in the 1990s, and that's the epidemic we're seeing today. The abuse of opioids many times starts with the need to manage pain. Medical practices started measuring pain levels in their patients and opioids became the drug of choice by physicians. Unfortunately, addiction rates weren't being looked at and patients kept getting refills. Physicians are required to continue to treat pain, but they have now learned to change the way pain is managed. Dr. Watkins also mentioned that many of the drugs today are coming from South and Central America and that they are more potent. Because of their potency, nothing needs to be added to them, but other drugs are being added.

Dr. Watkins shared information that he had presented to the Cattaraugus County Board of Legislators. This included statistics on death rates attributed to heroin. It also included incarceration statistics as well as rates of children displaced by heroin. It was realized that they had resources in Cattaraugus County that weren't being tapped into. There was no identifiable agency to get services, or the wait list became so long or discouraging that people chose to continue to use rather than seek help. Cattaraugus County has since formed a task force for putting these resources together. They held their first meeting back in May. The task force includes individuals from the community. They have put together a centralized calling center for the county. Prior to this, residents complained that there was no central office to call and that people were placed on hold or didn't get a call back. Now the county can follow up with these individuals. The task force has also discussed the need for expanded treatment. The jails are filled with addicts and there is no continuation of service once they've been released.

Community based Narcan training is being offered. They've also begun to address prescribing practices of physicians. He noted another important facet is the reduction in drug trafficking through the work of law enforcement agencies. He mentioned they would also like a parent support group. Parents have expressed the difficulties in getting treatment for those under the age of eighteen.

Dr. Watkins stated that they have looked at Senate and Assembly task force recommendations and hope to use those as guidelines for their task force. One obstacle to overcome is lack of funding. The resources are easy to identify but difficult to obtain. He remarked that rural counties are less likely to receive funding because they have a smaller volume of people in need. He said that Cattaraugus County is still learning, but he did offer some suggestions for Allegany County. He feels a community task force works really well. Physicians and pharmacists are excited to get involved. Don't set goals so high that you don't get a measurable achievement. He suggested working together with other counties in order to get treatment beds in the area. Expect that you're going to see a number of relapses. It doesn't show a failure of the program.

Carrie Whitwood, Executive Director of Ardent Solutions, Inc. asked if it would be possible for anyone from the Allegany County task force to be part of the Cattaraugus County task force. Dr. Watkins indicated that he would love to have someone from Allegany County participate with their task force and vice versa.

Committee Chairman Hopkins asked about legislation for getting additional treatment beds. Mr. Penman replied that he is still waiting to hear from New York State as to how they're going to allocate money for services. He said that rural areas tend to get the short end of the stick for funding. He feels that counties working together for a regional effort might be more attractive. Dr. Watkins mentioned that although a county may receive funding, by the time the money is allocated, communities come together to fight against having the treatment centers. A suitable location must be found. Another issue is having doctors available who are able to prescribe Suboxone, Vivitrol and Methadone. There is some limit on how many Suboxone prescriptions can be given by a doctor at one time. Mr. Penman said his organization is working to get another physician to come into their clinic. At this time, there is only one provider in Allegany County who can prescribe Suboxone.

The committee discussed the ability of a person to get high from a drug like Suboxone and also selling it in order to buy heroin. They also discussed people using these treatment drugs long term when they should have been weaned.

Chief O'Grady asked what attraction there might be for a doctor to become involved. Dr. Watkins noted that they have a couple of retired physicians who have offered to work on the problem. Chief O'Grady asked if it's difficult for physicians to be involved in treatment. Dr. Watkins replied that it is. Physicians must follow a patient who is receiving Suboxone. They have to be in a treatment program in addition to taking the Suboxone. They have to be followed to make sure they are getting additional treatment. Mr. Penman stated that this is why they are looking to get another physician in their facility. With a prescribing physician on location, everything can be done in one spot. It will help cut down on abuse of the system. It can be a hassle to have to get drug testing and therapy. Primary care physicians don't want to get involved. County Administrator Tim Boyde shared his experience in working in mental health. He remembers a number of overdoses after people were released from incarceration. Dr. Watkins said that in meeting with their Probation and Sheriff's organizations, these things work

great while the inmates are there. Vivitrol seemed to be the best drug they've found for use once released. It only has to be taken once per month. Probation staff still needs to follow up. Mr. Boyde added that when it's in a controlled environment it works, but once they are released the temptation is there.

Mrs. Ballengee asked about a Standard of Care for pain medications and if it is something done in Cattaraugus County. Dr. Watkins indicated that they have included the CEOs of the area hospitals, the Olean Medical Group and others to be part of the task force. They have agreed to work on a standard protocol to wean people off from opioids. Mrs. Ballengee asked Dr. Watkins to share the protocol with the group once it is developed.

Old Business:

Update on Ardent Solutions Proposal for Allegany County:

Carried Whitwood disseminated a proposal that Ardent Solutions has been working on. The first step would include looking at and developing the following: Current State and Federal Legislative Landscape, Asset Mapping – What's Available, Community Engagement, Data Collection and Analysis Strategies. The second step would include a Prioritization Process and Shared Ownership of Community Health. Committee Chairman Hopkins asked about three areas that would be worked on by different teams of people. Ms. Whitwood indicated that the groups would be Asset Mapping, Community Engagement, and Data Collection/Analysis. Mrs. Hopkins remarked that there are so many people who want to get involved, and this is a way to have them participate. She feels it's important to align with what the State is doing. The focus should be prevention, treatment, recovery and enforcement. Requests for people to get involved will be sent out. Chief O'Grady remarked that he thought it made sense to break it down by area of expertise, similar to how the County Legislature is set up. Committees report back to the whole group. Legislator LaForge asked about funding. Mr. Penman stated that he hasn't received specific information yet. Funding of \$66 million for new residential beds is expected, but nothing has been said about how to access that. He feels regionalization makes sense. Ms. Whitwood remarked that it's important to have the groundwork laid so when money is available we're all set. Mr. LaForge asked if it made sense for Allegany and Cattaraugus County to work together. Dr. Watkins said that he thinks it makes sense and we could welcome other counties to refer patients as well.

Update on PPAC Heroin Group:

Mr. Penman stated that they spent a good amount of time talking about asset mapping. They are willing to participate also. They discussed the town hall meeting and re-initiation of a state-wide tip line. The tip line is back and they've actually done some radio spots for it. We will get some statistics on it. It is set up so the calls go to an 800 number and then are referred to dispatch. We are working with the Sheriff on that. A panel has been set up for the Town Hall Meeting on July 21 at the County Fair. In addition to the drug problem, underage drinking will also be discussed.

Update on Meeting Location:

The group decided that it worked well to sit at the Legislator's desks in the Legislative Chambers.

Mandatory Action for Using Narcan:

Legislator LaForge addressed the idea of putting together a motion to go to the Human Services Committee to request legislation to petition the State of New York to come up with some sort of action for after the administration of Narcan. Currently there is no penalty for receiving Narcan. After tossing some ideas back and forth he asked, "Is it a disease or a crime?" Dr. Watkins remarked that this issue has been argued over and over again. When EMS goes out to an overdose they see repeat offenders. Sometimes it's only a matter of three hours before they go out to the same residence. In one case, they revived one individual five times in one day. Dr. Watkins' opinion is that it is a disease. An addict's mind has to have the sensation satisfied, and they will do anything to make it happen. Currently it's not against the law to have Narcan administered. EMS does not have to call it into the police. Narcan can be expensive. The State is going to make insurance providers begin paying for this. Legislator LaForge remarked that some think we should just let people die, but he doesn't subscribe to that. Dr. Watkins added that some people don't like to see tax dollars spent on this. However, families want their loved ones to be taken care of. Police Chief O'Grady mentioned the Good Samaritain Law which waves criminal penalties so a person can get help. He feels sometimes the only way to truly help these people is to force treatment. There has to be something where people say I need to change what I'm doing. There aren't any consequences. Somehow we have to change the behavior. There has to be a happy medium. I just don't know what it is. Dr. Watkins stated, "It's still against the law for them to possess." Referrals to a recovery clinic can be made at the ER, but if they're not willing to go, ACASA won't take them. A discussion was had about how often an addict voluntarily asks for help. There is the idea that if you get someone into treatment involuntarily, you may have a better chance of getting them long-term treatment. Mrs. Hopkins suggested that maybe some of this discussion should be part of the assessment process. If they decide to go ahead with a resolution, we want to make sure it's workable, legal, possible, and that the people will support it. The group discussed tracking data about Narcan usage. Due to privacy laws, tracking would more likely be of usage by area, not individual. The group feels it should be a priority to create one database. Dr. Watkins pointed out that now that pharmacists are going to be able to give out Narcan, it's going to be harder to track. Ms. Zenoski suggested that pharmacists could record when they dispense it.

Next Meetings:

- * Town Hall Meeting on July 21 @ County Fair (*after the Legislative Board meeting.*)
- * Ad Hoc Committee Meeting, Thursday, August 11, 1 p.m. @ Legislative Chambers

Adjournment

There being no further business to come before the committee, the meeting was adjourned at 2:45 p.m. following a motion by Mr. LaForge, seconded by Mr. Penman, and carried.

Respectfully submitted,
Sarah M. Decker, Journal Clerk/Deputy Clerk of the Board
Allegany County Board of Legislators

ALLEGANY COUNTY HEROIN & OPIOID ABUSE AD HOC COMMITTEE

August 25, 2016

NOT APPROVED

Committee Members Present: J. Hopkins, L. Ballengee, M. Biddle, M. Carbone, J. Chaffee, M. Chamberlain, M. Damiano, L. Haggstrom, C. Ivers, K. LaForge, W. Penman, B. Riehle, R. Root, J. Tomasi (Absent: A. Buchholz, V. Grant, G. Muscato, T. O'Grady, C. Zenoski)

Others Present: R. Starks

Media Present: C. Dutton – Cuba Patriot, B. Quinn – Wellsville Daily Reporter

Call to Order: The meeting was called to order at 1:02 p.m. by Legislator Judy Hopkins.

Approval of Minutes:

A motion was made by Ravo Root, seconded by William Penman, and carried to approve the Allegany County Heroin & Opioid Abuse Ad Hoc Committee minutes of July 14, 2016.

Update Ardent Solutions Proposal for Allegany County:

Melissa Biddle from Ardent Solutions (Rural Health Network) spoke about the recent focus groups and stated they are gearing up for the next round of ad-hoc focus groups which are Asset Mapping, Data Collections, and Community Engagement. As they wind down on the focus groups they will be bringing more information back to the committee for the next steps. The final documents that will be shared will be a list of recommendations based on the focus groups research and legislation at that time. Ms. Biddle assumed that funding will be a part of that recommendation as well.

Update on PPAC Heroin Group:

Jonathan Chaffee spoke briefly about the collection of the pill drop boxes. When the boxes are full the Sheriff's Office is contacted. The officers will pick up the boxes and weigh them. They will hold onto them to a certain point then they are sent to Niagara Falls to be incinerated. October 22, 2016, is national pill take back day at Bolivar and Belmont. They are looking at the Courthouse for a good drop off location due to Belmont being the center of the County. The hours are usually 10:00 a.m. to 2:00 p.m. Brenda Rigby Riehle recommended taking the request to the Human Services Committee first for their approval of having the Courthouse as a drop off location.

William Penman stated the pills are separated between prescription and non-prescription drugs. Over the years based on a low end street value almost one million dollars of drugs have been taken off the streets with these pill drops. There are six permanent drop off boxes throughout the County; Sheriff's Office, Wellsville Police Department, Cuba Police Department, Alfred State Police Department, Fillmore Pharmacy, Jones Memorial Hospital, and Alfred Pharmacy has a non-controlled box that he gives his customers that have the option to drop off pills such as blood pressure medications etc. but if they have a controlled substance they are asked to drop them off at the Alfred State Police Department.

Update on Town Meeting at County Fair, July 21:

Chairman Hopkins said there were a number of people who participated in the town meeting held after the Legislative Board meeting at the fair. There were questions prepared for each member on the panel that was specific to their line of work, such as law enforcement, health, and a parent. Unfortunately there were not a lot of people in the audience, but the ones that came, stayed for the whole event. Leslie Haggstrom mentioned the possibility of videotaping the event and sending it to churches, senior citizen luncheon sites, etc. to share this information with the public. It was suggested having Steve Pettenati from BOCES possibly make a recording and blur out the faces. Chairman Hopkins asked John Chaffee to look into this.

Update on School Superintendents' Meetings:

Ravo Root would like to hear an update on the educational services that ACASA and CAREs provides, but he also thinks an overview of where to go for help would be very relevant for the school superintendents to hear. He also stated they try to focus on the proactive characteristics and assets that children need to avoid drug use and abuse. Their counselors are very attuned to working with that.

New Business:

Chairman Hopkins asked William Penman to give an overview on DSRIP (Delivery System Reform Incentive Payment). Mr. Penman stated DSRIP has been going on now for about a year and a half. DSRIP is the main mechanism by which New York State will implement the Medicaid Redesign Term (MRT) Waiver Amendment. The purpose of DSRIP is to fundamentally restructure the health care delivery system by reinvesting in the Medicaid program, with the primary goal of reducing avoidable hospital use by twenty-five percent over five years. Up to \$6.42 billion dollars are allocated to the DSRIP program with payouts based upon achieving predefined results in system transformation, clinical management, and population health.

Mr. Penman also stated that New York State set up approximately twenty-five different performance provider systems throughout the state. Allegany County is in a provider system that is mainly out of the Rochester area, which is called FLPPS (Finger Lakes Performing Provider System). Listed below is a list of projects that they have chosen to work on.

- * Create integrated delivery systems that are focused on evidence based medicine/population health management
- * ED care triage for at risk populations
- * Care transitions intervention model to reduce 30-day readmissions for chronic health conditions
- * Transitional supportive housing services
- * Integration of behavioral health and primary care
- * Behavioral health community crisis stabilization services
- * Behavioral Interventions Paradigm in Nursing Homes (BIPNH)
- * Increase support for maternal and child health (including high risk pregnancies)
- * Promote mental, emotional, and behavioral (MEB) well-being in communities

- * Strengthen mental health and substance abuse infrastructure across systems
- * “Project 11” – Implementation of Patient Activation Activities to engage, educate and integrate the uninsured, and low/non-utilizing Medicaid populations in community based care

Partnership with ACASA and CAREs:

William Penman stated they would continue to work on putting together a management service organization because they both use the same billing and electronic health software. They want to strengthen the two agencies.

Narcan Training:

William Penman stated the Southern Tier Healthcare Network out of Olean will be holding a Narcan training in their clinic September 13, 2016, at 4:00 p.m. It is open to the public, their clients, and staff that need to be trained. Registration is necessary, and you can go to the PPAC website to register. There is no cost and those who participate will get a free narcan kit.

Next Meeting:

The next meeting will be held on September 8, 2016, in the Legislative Chambers at 1:00 p.m.

Adjournment

There being no further business to come before the committee, the meeting was adjourned at 2:45 p.m. following a motion by Lori Ballengee, seconded by Mike Damiano, and carried.

Respectfully submitted,
Stella L. Dewey
Allegany County Board of Legislators

ALLEGANY COUNTY HEROIN & OPIOID ABUSE AD HOC COMMITTEE

December 8, 2016

NOT APPROVED

Committee Members Present: L. Ballengee, A. Buchholz, L. Haggstrom, C. Ivers, K. LaForge, K. Monroe, G. Muscato, W. Penman, B. Riehle, R. Root, J. Tomasi, C. Zenoski

Absent: R. Ballengee, M. Biddle, M. Carbone, J. Chaffee, M. Chamberlain, V. Grant, T. O'Grady

Others Present: C. Ashley, J. Cole, S. Dewey, H. Evans, C. Mastin, R. Reynolds, T. Rodgers, R. Starks, C. Whitwood,

Media Present: B. Quinn, Wellsville Daily Reporter

Call to Order: The meeting was called to order at 1:08 p.m. by Legislator Judy Hopkins.

Approval of Minutes:

A motion was made by Ravo Root, seconded by William Penman, and carried to approve the Allegany County Heroin & Opioid Abuse Ad Hoc Committee minutes of November 10, 2016.

Announcement:

William Penman stated that they were approached by a coalition out of Erie County to work with them as a co-leader on a grant that came out from New York State for a regional coalition. This would not be building new coalitions but getting the existing coalitions together. The Western New York Chemical Dependency Coalition in conjunction with the Erie County Heroin Ad Hoc Committee has approached them to be the Southern Tier lead. This would consist of Allegany, Cattaraugus, and Chautauqua Counties.

Discussion of Report Findings:

Legislator Hopkins wanted to thank Helen Evans and Carrie Whitwood from Ardent Solutions for assembling this fact-filled report called "A Plan to Combat the Opioid and Heroin Crisis in Allegany County."

It was brought to the attention of the committee that there are a lot more "AA" (Alcoholics Anonymous) meetings in Allegany County than there are "NA" (Narcotics Anonymous) meetings. Leslie Haggstrom mentioned some individuals who suffer from narcotics addiction have found that "AA" meetings are more useful than "NA" meetings. Findings have shown that alcohol is really a "gateway" to substance abuse with drugs. It was mentioned in the meeting there was a great "AA" meeting located in Wellsville, but Ms. Hopkins is concerned that the people located in Swain, Caneadea, and other spots in the County that might not be able to get the help close to them.

Ravo Root was wondering why the mandatory drug testing the judicial system implements to monitor drug activity often fails, but under employment purposes it has actually had success. Helen Evans stated the true indicator was the individual; she feels that people in the judicial system might not have as much to lose or may not be inclined to think about the consequences. Whereas, on the other hand, the research showed that a student in the school system, did not want to lose availability of sports or extra-curricular activities, or an adult also worried about losing their job or letting down their family or face hardship if they did not comply on their worksite.

Legislator Hopkins said the treatment strengths section of the report was an important thing. Many programs and services provide treatment for co-occurring disorders simultaneously rather than concurrently. For example, mental health and substance abuse dual diagnosis. This potentially decreases the patient's length of stay and addresses the person holistically. There are a lot of people who use the addiction to cover their mental health. Many substance users report they experience multiple barriers that produce significant challenges to linking with treatment services.

The general discussion among members of the committee was they feel there needs to be some kind of protocol set for people who are brought to the hospital from an overdose and then let out within a few hours to go and do it again. Some kind of detox section should be in the hospital for these individuals who are brought in, plus counseling afterwards. Providers in the area are starting to use the I-Stop system to see what medications people are on when they see them. Ms. Hopkins still feels that the influence of parents on children in terms of not trying alcohol and drugs is very huge. There are programs out there for parents to help them talk to their children about drugs and alcohol.

Helen Evans stated the data in the chart on page 71 of the "Plan to Combat the Opioid and Heroin Crisis in Allegany County" is not the most up-to-date information. It shows a more minor problem than what they recognize. There will be a lapse in the data finding based on how long it takes before they actually get the data they need to get into the report.

Helen Evans asked the cultural question, male vs. female, we are not consistent with the national rate. William Penman stated historically they have more men than women in treatment. Women were not really seeking treatment. Most of the people they treat, about 65 – 70 percent, are through the court system so the services are designed for the population which is mostly men.

Helen Evans stated they focused on 11 key areas. When looking at this it is the general issues or opportunities, and what you will find in the report as a whole that could lend to accomplishing the key findings. Judy Hopkins asked the committee is addiction a disease, a moral failure, or is it a crime; these key findings get right to this issue. This is very important to look at. Ms. Hopkins said the traditional response to the illegal use and possession of drugs, including opiates, in the United States is incarceration, but this response is wholly inadequate to address the issue of heroin addiction and may actually contribute to the problem by placing users in situations that promote opiate use. According to this study, drug court really needs to be a priority according to this study in terms of making that happen. Probation Director Robert Starks said the goal of drug court is treatment. The individuals get numerous opportunities to go through out-patient, in-patient, and residential facilities to help get clean.

Judy Hopkins said there was a recommendation that the Allegany County Partners for Prevention Heroin and Opioid Prevention Task Force join forces with the Allegany County Board of Legislators' Heroin and Opioid Ad Hoc Committee to form a consolidated Coalition through a Steering Committee. Ms. Hopkins said "all along we have said that we do not want to duplicate, we don't want to recreate, we don't want to be in any competition with any group that is trying to work in this area, and we want to all work together." We will be developing priorities, and also developing a structure.

Judy Hopkins thought it was an interesting point that marketing, outreach, and education campaigns should be tailored to specific populations and materials should be written at an appropriate literacy level and accessible in places that reach the targeted populations. Helen Evans stated not everyone has access to computers, so print materials should be the primary

focus with electronic communication such as websites and social media, as a complimentary communication strategy. A few of the key places should be in areas that are for highest risks such as domestic violence shelters, food pantries, pharmacies, and schools to name a few.

Another key finding is that Resource Officers have been pulled from school districts due to budgetary cuts. It is recommended school administrators and law enforcement work together to build opportunities for collaboration. Law enforcement can be a major asset to teachers, administrators, parents, and youth.

Judy Hopkins said next month we will be talking about structure, where do we go from here, what are our priorities going to be, what are some of the things we want to accomplish, and all of the things we talked about earlier. Looking at Mission and Vision and how do we separate this out, and how do we keep it together.

Deputy Social Services Commissioner Julie Tomasi stated their Office with Children and Family Services purchased the "Hungry Heart" DVD because they believed this was a very powerful resource that they wanted to provide people. This video allows us to see addictions in a very different view. It was brought up by committee members to have the opportunity to view this video.

Helen Evens said there should be a mission/vision. There might be pieces or components of the report that we might want to use for the mission/vision. Depending on the structure, each sub-committee should have a purpose or mission that coincides and goes back to the larger group.

Public Health Director Lori Ballengee suggested there should be a sub-committee on current data. Leslie Haggstrom also suggested another sub-committee on people in recovery or even have them sprinkled throughout the sub-committees to make sure they have a voice in this process also.

Next Meeting:

The next meeting will be held on January 12, 2017, in the Legislative Chambers at 1:00 p.m.

Adjournment:

There being no further business to come before the committee, the meeting was adjourned at 2:41 p.m. following a motion by Kevin Monroe, seconded by Ashley Buchholz, and carried.

Respectfully submitted,
Stella L. Dewey
Allegany County Board of Legislators