

INITIATIVES AND ACCOMPLISHMENTS

JUNE 2016

Preventing & Reversing Overdose | Accessing Effective
& Individualized Treatment | Supporting & Championing Recovery



Pennsylvania, along with the rest of the nation, is experiencing the worst overdose death epidemic in history. Fatal drug overdoses are the biggest public health crisis to hit the Commonwealth and nation in the last 100 years. In 2014, nearly 2,500 Pennsylvanians died of overdose¹. The total number of deaths for 2015 will be higher when the final number is tallied. We expect 2016 will be even higher.

IN 2014, NEARLY 2,500 PENNSYLVANIANS DIED OF OVERDOSE (PRIMARILY HEROIN AND OTHER OPIOIDS).

To address the public health crisis, the Department of Drug and Alcohol Programs (The Department or DDAP) has undertaken many initiatives to prevent and treat substance use disorders, reduce deaths to drug overdose, and increase public health and safety awareness.

Equipping municipal police with naloxone. The Department led efforts to equip law enforcement and others with naloxone. Act 139, also known as “David’s Law,” made naloxone available to police, firefighters and family members and friends of those at risk of heroin or other opioid overdose. Naloxone rapidly reverses overdoses and has saved thousands of lives. As of May, more than 320 municipal police departments across the Commonwealth were equipped with naloxone through DDAP’s efforts. Nearly 1,000 overdoses have been reversed. Additionally, 1,200 State Police patrol cars are equipped with naloxone in every county. Under DDAP’s leadership, district attorneys and municipal

police chiefs have developed naloxone programs. The Department has initiated and continues to oversee several initiatives to provide training, technical support and funding, as well as closely track those efforts, including the number of departments carrying naloxone and the number of overdoses reversed.

On March 1, 2016, Lt. Gov. Mike Stack, along with DDAP Secretary Gary Tennis, Physician General Dr. Rachel Levine, Pennsylvania lawmakers, and representatives from the Pennsylvania District Attorneys Association (PDAA), Pennsylvania Chiefs of Police Association (PCPA), Pennsylvania State Police (PSP), and health insurance providers recognized more than 300 municipal police departments, PSP and hundreds of individual police officers for their life-saving work resulting from the use of naloxone.

Overdose Task Force (OTF). The Department established OTF in July 2013. It is comprised of representatives from the national, state, county and local levels and continues to meet approximately quarterly. The initial goal of the OTF was to develop a rapid response mechanism to break down information silos so that law enforcement and emergency medical services could have real-time trends information more readily available to them.

Given the nature of this public health crisis, in June 2015, the OTF expanded its leadership to include Physician General Rachel Levine, MD, as co-chair of the group and simultaneously expanded its focus from its initial rapid response goal to include: 1) informing and driving public policy on the issue of overdose; 2) informing overdose response; and 3) strategizing and planning robust responses to the crisis.

“Warm hand-off” policy. With the assistance of OTF, the Department is implementing a warm hand-off process whereby overdose survivors are

1. Pennsylvania State Coroners Association Report on Overdose Death Statistics 2014

transferred directly from the emergency department (ED) to a drug treatment facility. The Department has incorporated contractual changes with the Single County Authorities (SCAs) in its 2015-2020 grant agreement that establishes the overdose survivor as a priority population and requires each SCA to create a process for direct referral from the ED. These new requirements went into effect in January 2016 and are expected to be fully operationalized by the end of 2016.

Police Intervention Efforts. The Department is researching various national police-assisted referral to treatment models to develop a Pennsylvania model. Once the model is complete, the Department will work with various interested police departments to encourage implementation.

Treatment bed capacity. Under guidance from OTF, the Department is reviewing treatment bed availability and a process for tracking it across the Commonwealth in real time. While this process is still under way, some initial barriers and strategies to remediate these concerns have been identified. The Department has also engaged partners, including the Hospital and Healthsystem Association of Pennsylvania (HAP) to identify solutions.

Prescription Drug Take-Back Program. Department leadership has led to a greatly expanded prescription drug take back program. Many young people who abuse prescription drugs are stealing them from medicine cabinets. Keeping unused opioids or other common drugs of abuse in a medicine cabinet is no longer safe or responsible. The Department, working in partnership with Pennsylvania Commission on Crime and Delinquency (PCCD) PDAA, the Attorney General's (AG) office and the National Guard, has continued to increase the availability of permanent prescription take-back boxes across the Commonwealth, with the goal of reducing the amount of prescription drugs available for potential misuse/abuse. Since 2015, approximately 100,000 pounds of prescription drugs have been collected and properly destroyed. To date, this program has placed nearly 450 take-back boxes across 60 of the Commonwealth's 67 counties, primarily at municipal police departments. So far in 2016, nearly 25,000 pounds of prescription drugs have been collected and destroyed.

Prescription Drug Monitoring Program (PDMP). The Department is working with health care providers to educate them on identifying those with substance use disorder through PDMP and effectively directing them to treatment.

Improving Licensure Regulatory Standards and Processes. The Department has developed a simplified and easy-to-understand template to guide treatment provider applicants in acquiring new treatment program licenses. Typical time for the Department's review and approval process has been reduced to a few weeks. The Department also is working on a new initiative that would extend licenses for exceptional program compliance, increasing the amount of time between inspections for the free-standing drug and alcohol facilities that for the previous two years have not had any citations in four critical areas (conduct or omissions that jeopardized the safety of any persons, compromised the quality of treatment provided, violated a client's confidentiality rights or resulted in treatment being provided without informed consent) and have reasonably and timely taken any remedial measure requested by the Department.

In addition, working with the Department of Human Services (DHS), the Department has begun to

THE RX TAKE-BACK PROGRAM HAS COLLECTED AND DESTROYED APPROXIMATELY 100,000 LBS. OF PRESCRIPTION DRUGS.

coordinate efforts to regulate programs that provide co-occurring mental health and substance use disorder treatment, eliminating duplicative efforts and making for a more efficient process. Along with DHS, the Department is also coordinating licensure application processing with PROMISE applications, reducing the amount of time before a treatment program can take Medicaid patients, making treatment beds available faster, and preventing waste at the government and provider level.

Lastly, the Department's Licensure Division

processed 70 applications for new facilities or expansion of facilities in 2015 as evidence of the need and demand for new treatment facilities.

Workforce Development. Workforce development efforts are under way to provide new professionals entering the drug and alcohol treatment field a more effective and successful entry to employment while at the same time reducing treatment provider staff turnover by providing and maintaining a clear career path with concise objectives for candidates.

“Pathways to Pardons.” Working with the Board of Pardons (BOP), the Department has initiated the “Pathways to Pardons” program. This program allows individuals with a substance abuse history who have been convicted of certain crimes to apply for a pardon from BOP. For those individuals who have fully committed to their recovery as evidenced by approximately five years in recovery and no criminal activity, “Pathways to Pardons” makes it possible for the crime(s) to be completely expunged from the person’s criminal record. The number of applications for this program has nearly tripled since this initiative began.

Employment in Recovery. Two new projects are under way under direction from the Department. In collaboration with the Department of Agriculture, the Greene County Single County Authority and a Greene County recovery house are working to provide individuals in recovery with employment through a Penn State University program. As part of the program, those in recovery will have the opportunity to join the ranks of the agricultural workforce. Those in recovery will gain job skills while helping to address a workforce shortage. Additionally, the Office of Vocational Rehabilitation is working to expand payment for training for individuals in recovery to become Certified Recovery Specialists.

New Data System. The Department has begun the process to procure a new data system to enhance data collection efforts and allow for more detailed data analysis, while meeting its requirements under the Substance Abuse Prevention and Treatment Block Grant (SAPTBG).

Using State-owned Facilities for Use as Drug and Alcohol Treatment Facilities. In collaboration with the Departments of General Services and Human

Services, the Department has identified a list of potential properties to potentially be made available for use as treatment facilities. All interested parties will work through the Department to use or acquire the properties.

Substance Abuse Treatment Funding and Federal Grants. The Department has engaged in an unprecedented level of grant-seeking initiatives, continually seeking major federal grants from SAMHSA as well as other partners. The Department’s collaboration with Staunton Farm Foundation on a grant for prescription drug collection boxes is one example of these efforts.

Working at the federal level, Secretary Tennis has testified at Congressional briefings to urge Congressional support for the full continuum of treatment services, including long-term residential treatment (i.e., therapeutic communities). Secretary Tennis also has testified on behalf of NASADAD to increase SAPTBG funding. He also testified before a joint conference of the Council of State Governments and Department of Justice, Bureau of Justice Assistance on behalf of NASADAD to discuss the critical importance of clinically matching drug and alcohol treatment for criminal justice offenders to their level of need.

In addition to SAPTBG, which is the Department’s main source of federal funding, the agency continues to pursue federal categorical grant opportunities for special initiatives. The Department’s recent and still active federal grant opportunities include: the Cooperative Agreement to Benefit Homeless Individuals (CABHI), and the Strategic Prevention Framework – Partnerships for Success (SPF-PFS) grants.

In collaboration with the City of Philadelphia and the Mental Health Association of Southeast Pennsylvania, the CABHI grant addresses the issue of chronic homelessness and increases the dissemination of best practice models. Additionally, a supplemental CABHI grant was awarded to Pennsylvania that focuses on homeless veterans with and co-occurring mental health and substance abuse issues.

For the SPF-PFS grant, the Department, as the lead agency, coordinates with five high-need counties (Blair, Bucks, Delaware, Lackawanna and

Westmoreland) to reduce underage drinking among 12-20 year olds and reduce prescription drug misuse and abuse among 12-25 year olds.

Most recently, the Department was awarded a Targeted Capacity Expansion: Medication Assisted Treatment-Prescription Drug and Opioid Addiction (MAT-PDOA) grant. The grant will assist individuals who suffer from opioid use disorder. The Department also received a Pennsylvania Screening, Brief Intervention and Referral to Treatment (PA-SBIRT) grant. The grant will enable implementation of SBIRT training and protocols in seven primary counties.

Life Skills Training (LST). An evidence-based program, LST reduces drug, alcohol and tobacco use by 60 percent to 70 percent among 6th, 7th and 8th grade students. During 2015, the Department continued collaboratively working with the Pennsylvania Department of Education (PDE) and PCCD to raise awareness and encourage school superintendents to use this program. Through Pennsylvania's Evidence-based Prevention and Intervention Support Center (EPISCenter) and Blueprints/University of Colorado, free training, supplies and technical support, including covering the cost of substitute teachers while teachers are being trained, is provided to any Pennsylvania school district that wants it. More than 60 school districts participated statewide in this grant throughout 2015 and that number greatly exceeds the total number of school districts participating in any other state that was eligible for this grant.

Building Bridges to Recovery (BBTR). This Department initiative encourages increased collaboration of our recovery community with medical providers. BBTR programs take place in September during National Recovery Month to raise awareness around substance use disorders and recovery from the disease. In 2015, BBTR efforts included a press conference in observation of International Overdose Awareness Day.

Get Help Now: Let's Work Together! In 2015, the Department launched a first-of-its-kind mobile website that offers a new starting point for individuals seeking drug and alcohol recovery and support services over their mobile phone or other mobile device. The mobile website gives Pennsylvanians the ability to find addiction treatment services

for adolescents and families statewide and offers treatment information resources. The Department led a collaborative effort as part of the Mobile PA Challenge by partnering with a student team from Harrisburg Community College and the Office of Administration.

Driving Under the Influence (DUI) Treatment Compliance Project. With this project, the Department is working to ensure that quality, pre-disposition assessments and treatment services with clinical integrity are being provided for DUI offenders with substance abuse disorders in every county in Pennsylvania and accurate and complete reports are being made, as required by statute and best practice standards of public administration.

The Department, in collaboration with PennDOT, is auditing compliance with existing laws, identifying and troubleshooting obstacles to compliance and promoting innovative local practices in substance abuse treatment/criminal justice program development and improvement. The Department and other key DUI compliance stakeholders have a commitment to continuous improvement to treatment, working together toward a more integrated case management approach and communicating and collaborating with other key DUI compliance stakeholders.

To date, the Department has conducted a survey of all 67 district attorneys, and 37 of 67 counties report that they are in full compliance with the statute. Of the 30 counties reporting noncompliance, the Department thus far has met with county criminal justice advisory boards in more than 20 percent of those counties and those counties are either now in full compliance or are working to achieve compliance. The Department has worked with treatment providers and the information technology experts at PennDOT to identify the source of the reporting gap and proposed a change in reporting and analyzing the required data. The Department has assisted in recruiting a wide array of treatment and criminal justice experts as an oversight committee and regularly communicated with treatment and criminal justice professional groups. The Department staff have conducted site visits to seven counties and currently are confirmed to visit an additional 10 counties by the end of May. The current goal is to complete more than 50 percent of the

counties visits by mid-August.

Maximizing Medicaid Funds for Offenders. A portion of state and federal funds being administered through the Department to the Commonwealth's Single County Authorities (SCAs) are being used effectively to transition offenders to residential drug and alcohol treatment facilities immediately following their release from county prison, thereby bridging a treatment gap that exists in Pennsylvania. At its inception, four SCAs participated in this program and reported an estimated \$950,000 of Medicaid funds used for offenders entering drug/alcohol treatment facilities. Since then, the Department has required all 47 SCAs to participate in this program. During SFY 2015-2016, 1,077 offenders received various levels of residential treatment services: 326 went to long-term inpatient rehab; 363 went to short-term inpatient rehab; 132 went to short-term inpatient to be treated for mental health and substance use disorders; 56 went to a halfway house; and 194 went to long-term inpatient to be treated for mental health and substance use disorders, where the average length of stay was 32 days.

Compulsive and Problem Gambling Program. Outpatient problem gambling counseling services continue to be enhanced and expanded with new treatment providers. There are more than 100 provider locations currently. With money provided to them from the Compulsive and Problem Gambling Treatment Fund, SCAs provide problem gambling needs assessments, prevention programs, outreach, educational programs and other Department-approved services. Client treatment retention has increased from an average of 17 treatment sessions used in 2012 to an average of 23 treatment sessions used in SFY 2014-15. Nearly 75 percent of clients discharged from treatment during SFY 2014-15 achieved or partially achieved treatment goals. Of the clients discharged from treatment during SFY 2014-15, 67 percent were no longer gambling or reported reduced gambling.

Problem Gambling Prevention Program. A new two-year Problem Gambling Prevention Program (PGPP) funding initiative is providing comprehensive, evidence-based problem gambling prevention programming across the Commonwealth. Forty SCAs applied for funding and were awarded a total of \$4,373,021 in SFY15-16 and \$4,358,916 in SFY16-17.

In SFY 2014-15, through the PGPP funding initiative, 16 SCAs expanded their student assistance program (SAP) services, including SAP consultations, core team meetings, training, parent/consultant/teacher meetings and educational groups.

In addition, the Department collaborated with PDE and PCCD to develop the next Pennsylvania Youth Survey (PAYS), a survey of school students in the 6th, 8th, 10th and 12th grades aimed at learning about their behavior, attitudes and knowledge concerning alcohol, tobacco, other drugs and violence. Additional gambling questions were included in the 2015 PAYS, allowing for more information to be collected about student gambling activities. During the spring of 2016, the SCAs began to analyze the PAYS data. Plans are under way for them to use the data to identify gambling trends and communicate the need for problem gambling prevention pro-grams and services within their local communities.

In Conclusion. The problems and solutions underlying the current overdose death epidemic are complex.

Without the necessary resources brought to bear, no solutions for the effective prevention and treatment of addiction will work. As we shift public policy toward fully funding the actual need for drug and alcohol prevention and treatment in our communities, we will dramatically reduce the suffering felt by one in four families in Pennsylvania.

Pennsylvania will have safer and healthier families and communities when these goals are fully realized, resulting in reductions in health care costs, less crime (resulting in the need for fewer jails and prisons), less domestic violence, less child abuse, safer highways, and a safer and more productive workforce. It's time to move forward. We know what works. Let's work together!

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pennsylvania

DEPARTMENT OF DRUG AND
ALCOHOL PROGRAMS

Saving one life at a time.

Governor Tom Wolf
Secretary Gary Tennis