



State of New York County of Broome Government Offices

Broome County Health Department

Jason T. Garnar, County Executive · Rebecca A. Kaufman, MS, Director of Public Health

BROOME OPIOID ABUSE COUNCIL

August 4, 2017

- Present:** Katelyn Albright, Jill Alford-Hammitt, Scott Baker, Megan Brockett, Diane Brown, Katie Cusano, Megan D’Introno, Jason Garnar, Stephanie Hazelett, Dr. Julia Hunter, Rebecca Kaufman, Saima Khan, Amber Kida, Kyle King, Reginald LaBare, Lee Livermore, Jill Lloyd, Haley McCrory, Mary McFadden, Kimberly Newell, Carmela Pirich, Michael Ponticiello, Dr. Christopher Ryan, Raymond Serowik, Kara Skellett, Penny Stringfield, Kelly Storrs, Jeffrey Wagner, Susan Wheeler, Alan Wilmarth, Lorraine Wilmot, Dr. John Zevan
- Absent:** Robin Alpaugh, Iris Borilla, Don Bowersox, Stephen Cornwell, Valerie Datta, Rich David, Matthew Gawors, Andrea Guccia, David Harder, Jim Hawley, Donna Lupardo, Kevin McManus, Kate Newcomb, Dennis O’Keefe, Dr. Peter Ronan, Eric Velzis, Colleen Wagner, Chris Whalen

Coroner’s Report: Dr. John Zevan and Kelly Storrs discussed a coroner’s role in a death investigation, specifically a drug overdose. When a 911 call is placed and police determine that a death has occurred, the coroner receives a call to respond to the scene. They are called for any unnatural death. When the coroner arrives at the scene they find the scene commander and take pertinent information down about when the person was last seen alive, identify the next of kin, and examine the body and anything within plain sight. The coroner decides if the death is suspicious and then performs an autopsy. There is often not a lot of physical evidence that is forthright so toxicology reports are ordered and urine tests performed to determine the presence of drugs. That will not determine the level of drugs in the body. The lab results generally take 2-3 weeks to get back. IF the evidence correlates to what they saw at the scene they conduct a background investigation to get the person’s medical records and check ISTOP (the prescription monitoring program through the state). They put all the pieces together to build a timeline of how the person died and the cause. When there is a suspected overdose, they contact the District Attorney’s Office so they are on scene to work with the police agency investigating the crime scene. Deaths have to be investigated within 72 hours. Death certificates are finalized after toxicology and pathology reports are received. There is a lot of follow-up with families following a death to gather more input and families are generally grateful that their loved ones did not die in vain.

When coroners are notified of a death in the hospital they take it as a coroner’s case. In the past they were notified when there was an unexplained death within 24 hours of admission to the hospital. Now they are notified of cases that may need to be followed through with regardless of the length of stay in the hospital. Emergency departments notify the coroners to begin investigations related to overdoses. Coroners can be called to perform an autopsy for any death; autopsies cost roughly \$2,000.

Jeff Wagner noted that they recently made an arrest for criminally negligent homicide for someone who provided the drugs to the individual who overdosed. Many times, they have a pretty good idea who the dealer might be and information is sent to the Broome County Task Force for investigation. Sometimes the person who provided the drugs is also a victim but they must investigate and hope to find the person farther up the chain providing the drugs in this community.

ACBC: Carmela Pirich, Executive Director of the Addiction Center of Broome County, provided an overview of their programs. (Please see the attached PowerPoint presentation.) Walk-in assessments will begin in September or October. They collaborate with the Children's Home of Wyoming Conference to provide services to their adolescent population. There was a spike in overdoses between 2014 and 2015 with more than a 20% increase in fatalities and 16 upstate counties, included Broome, were awarded a SAMSA grant through OASAS to address the epidemic. There were high rates of fatal overdoses, a high rate of hospital admissions, and a high percentage of people seeking treatment out of county. ACBC will become one of eight Centers of Treatment Innovation. They will work with pre-contemplative clients before they agree to some type of intervention to make sure they have resources and guide them to treatment if they are willing. They will be able to provide Narcan administration training on site. Peers will work with people in crisis with a focus on people after they are hospitalized or incarcerated or are homeless.

Calvary's Love: Reggie (Corkey) LaBare, the Business Administrator at Calvary's Love, described their Live Free Program. In the last two and one-half years about 400 people have come through their program locally. There are groups for women, men, co-dependent individuals and an abortion recovery group to discuss their issues. He would like to work with all addiction programs in the area to assure that there is a place every night for people to come and talk about their issues.

Service Provider Event: Recap: The Service Provider Fair was well represented by substance use disorder providers and support services (20 providers) and the media. Many people stopped by to pick up information. They may schedule another one closer to the holidays when there would be more people in the mall.

Social Media Training: Grant funding was received to provide social media training which will be held at the Health Department on August 7th and 8th. Ten hours of graphic design is being provided and there is discussion about development of a logo that can be used for anything associated with BOAC and consideration in a change of BOAC's name. One suggestion was to change Abuse to Awareness to portray the council's objectives in a more positive light or Broome Opioid and Substance Abuse Council. There was discussion about adding a tag line of what BOAC is and whether other substances should be added. We are not just seeing heroin or opiate overdoses; most are mixed toxicity and there has been discussion about including other substances. Alcohol claims more lives than opioids and nicotine kills even more. The funding is available until the end of September to rebrand BOAC. Our efforts need to focus on prevention and recovery. A survey will be sent out to get input on potential names for BOAC as the focus expands.

Peer Response Team Update: A committee has been meeting to develop a Peer Response Team to reach out to people before they reach a critical point. The team is looking at a two-pronged approach by working with law enforcement for wellness checks and working with hospital emergency departments. The Intel Center can take lists of overdoses and cross reference them with Probation and police lists to develop a database to provide to ACBC and Fairview. Investigator Wagner worked with ACBC this past week to have peers go out with law enforcement for wellness checks to offer a point of contact for support and follow-up. ACBC will hire additional peer support staff and expand to evenings to reach more people. Law enforcement agencies can schedule blocks of time to have peer/law enforcement wellness check to see if the individual is interested in seeking treatment and to provide information on resources and support until they reach that point. Policies and procedures are being developed. ACBC is willing to offer 24/7 availability dependent on the volume of the need. Fairview Recovery Center staff will assist with wellness checks when the center opens. At the last meeting, there was some discussion about a diversion program where law enforcement in the field could decide not to arrest someone and direct them to the diversion program instead, which could be appropriate for first time offenders. This is in the beginning stages of discussion.

BGH has two care navigators in the emergency room who will follow up with individuals who are transported to the emergency room following an overdose. Care navigators will follow up with patients to offer support to get them into treatment. The program is being established at Binghamton General Hospital and will expand to Wilson Hospital by September 1st. Lourdes Hospital will join the committee as well to become involved in the program. Peers can meet people at the hospital to provide support and education about options for treatment. Narcan training is available at UHS and kits can be obtained at the emergency room.

Strategic Plan: We will contract with Lisa Bobby to coordinate strategic planning for BOAC beginning in October to develop a workplan to guide BOAC activities, to track progress and to reevaluate goals and objectives after looking at impacts.

Community Education Committee:

- Work is being done to get information on the school websites and to schedule sports injury forums. The Social Norms Campaign will begin this Fall.
- The STOP-DWI Program brought in Jermaine Galloway on July 12th; it was a phenomenal presentation and they are trying to bring him back to present at Superintendents' Conference Days at the schools on issues related to drug and alcohol abuse.
- Dr. Julia Hunter provided a Learning Lunch on addiction to Lourdes Hospital staff, which was well attended.
- The Drug Free Communities Grant held their first Family Fun night in Endicott on August 2nd and are looking for volunteers to assist and provide information at the Family Fun Nights scheduled at Klumpp Park in Windsor on August 16th and CFJ Park in Johnson City on August 30th.
- Kara and Katie will meet with the NY National Guard Counterdrug Task Force again about the Prevention Needs Assessment analysis which will be presented to BOAC.
- A Prevention Night at a Binghamton Devil's game is being planned for some time in December. They cannot make the whole stadium substance free but can make part of the venue substance free.
- Katie and Kara will attend training in Baltimore in September on sustainability. They will develop a strategic plan, evaluation plan and communication plan by February.

Law Enforcement Committee:

- Law enforcement personnel are working with the Peer Response Team to develop protocols.

Treatment and Prevention Committee:

- UHS recently expanded their Medication Assisted Treatment Program in a much larger location. They are admitting 1-2 more people each day and receive about 20-30 calls per day from individuals seeking treatment. They have been providing assessments in the jail for about a year and two treatment groups will start at the jail.
- Drs. Hunter and Ronan will provide training on August 19th for Buprenorphine waivers for UHS providers and hope to hold one in September for any provider in the community. Once a physician is trained for the waiver program, they can have 30 patients the first year and 100 patients the second year. UHS is using the hub and spoke model where a person is referred to Drs. Ronan and Hunter and once they are stable they are referred to their primary care provider where other medical issues can be addressed as well.
- Carole Kuklis from the Dual Recovery Project has been working with the Office of Aging to provide information at senior centers to discuss being conscious of mixing alcohol and medications. She continues to work on scheduling training within the community.
- The Family Resource Center should open in September; they are awaiting final approval.
- September is National Recovery Month. September 15th is the 22nd annual Chemical Dependency Professional of the Year Award breakfast at the Binghamton Club.
- World Suicide Prevention Day Breakfast is Friday, September 8th, 8:30-10:30 at the Binghamton Club.

Education of Medical Professionals Committee:

- The committee's work with the academic detailing project is finished. The committee will not meet again unless further need is determined.

Data and Statistics Committee:

- The committee continues to refine the indicators and information to be collected. The type of data to be collected will be discussed through the strategic planning process. It will be challenging to try to track multiple substances and will have implications for the council and committees.

Rural Committee:

- Outreach will be provided through local libraries and through outreach working with STAP.
- Susan Wheeler is coordinating a walk (Wings of Hope) for mental health, suicide and addiction awareness, which is sponsored by the Mental Health Association and scheduled for September 16th at Dorchester Park.

NYS and OASAS gave the go ahead to use the Broome Development Center as a treatment center with 50 beds. An RFP was sent out; any OASAS provider can apply.

The Overdose Mapping Project is underway and law enforcement agencies can call the information into the Broome County Dispatch Center.

The next BOAC meeting is scheduled for Friday, September 8th at 10:00 a.m. at the Broome County Health Department.