

Indiana Commission to Combat Drug Abuse

May 3, 2018

Minutes

The Indiana Commission to Combat Drug Abuse met on May 3, 2018 at 10:00 A.M., EST at Indiana State Library, History Reference Room 211, Indianapolis, IN.

Present: Chairman Jim McClelland; Superintendent Doug Carter (ISP); Director Deborah Frye (IPLA); Deputy General Counsel Sharon Jackson; State Senator Jim Merritt; Mr. Chris Naylor (Representing IPAC); Mr. Aaron Negangard (Representing the Attorney General); Director Terry Stigdon (DCS) ; Director Jacob Sipe (IHCDA); Secretary Jennifer Walthall (FSSA); State Representative Cincy Ziemke; Micah Vincent (OMB); Dan Evans; Mark Keen (DOE); Pam Pontones (ISDH); Judge Mark Smith; Director Dave Murtaugh (ICJI).

Call to Order

Jim McClelland, Chairman

Chairman McClelland called the meeting to order at 10:00 a.m. He asked if there were revisions to the Nov. 9, 2017 and Feb. 9, 2018 minutes; they were unanimously approved as presented.

Chairman Remarks

Jim McClelland, Chairman

Chairman McClelland noted that INSPECT's integration of electronic health records is proceeding ahead of pace with 34 hospitals complete and 45 in progress. He shared that reports from individuals utilizing the new system have been positive.

He then invited Indiana State Police Superintendent Doug Carter to share a report on the Apr. 28 Drug Take Back Day event and. Superintendent Carter said over 1,700 lbs. of medication were turned in at 13 ISP posts across the state in partnership with the federal Drug Enforcement Administration, which disposes of the drugs.

Chairman McClelland also invited Professional Licensing Agency Executive Director Deborah Frye to share regarding PLA's role in the Drug Take Back Day. She said that PLA and the Board of Pharmacy sponsored seven locations around the state, collecting a total of just under 1,300 lbs. of drugs at those locations. DEA final numbers have not been released, but it is estimated 9,500 lbs. were collected by all partners in total across the state of Indiana. Local communities also have locations that are open daily.

Indiana Criminal Justice Institute Report

Dave Murtaugh, ICJI Executive Director

Mr. Murtaugh said that since the start of the year, ICJI staff have visited 49 Local Coordinating Council meetings across the state and by the Aug. commission meeting, they will have visited all the LCCs in the state. So far approved totals \$1,391,732.58 for disbursements throughout the approved reports. Allen, Jay, Wayne, Gibson, Harrison and Bartholomew Counties are currently applying for federal Drug Free Community support grants and expect to hear back by September. The Comprehensive Opioid Abuse Program, administered by the U.S. Department of Justice, offered up \$13 million in grants last year. This has been substantially increased to \$145 million which will be released in the next week for six categories, including overdose outreach projects, technology assisted treatment, system level diversion, alternative incarceration projects,

statewide planning coordination and implementation projects, Harold Roger's PDMP implementation program, and data-driven response to prescription drug misuse. He will forward that information to the Grants Subcommittee upon receipt.

Mr. Murtaugh said that the Drug Free Commission was established in 1988 and modified in 1990. He discussed measures to improve the reporting of Local Coordinating Councils (LCC) according to the policies and guidelines set forth by the previous commission and said work is underway to come up with new guidelines, policies and procedures that need to be addressed or updated. There were no objections to notifying LCCs of the requirements and reminding them of timelines for reporting.

Mayor's Youth Councils

Jim Dittoe, Winning Communities

Mr. Dittoe shared that he has been in the Chamber of Commerce business for over 40 years. He shared a story of an individual who approached him 40 years ago to tell him that drugs were affecting his workplace. Now, 40 years later, the drug epidemic is affecting families, businesses, and all of society. Mr. Dittoe indicated that he founded Mayors Youth Councils (MYC) around the state to bring youth into engagement with the mayoral offices, businesses, etc. and give them the channels to tackle the issues. Mr. Dittoe introduced several students participating in the MYCs. Students from Fort Wayne spoke on the increasing drug problems that accompany the positive economic development in Fort Wayne. Mayor Tom Henry has filed a public nuisance lawsuit against the three primary distributors of prescription opioids in Fort Wayne. Mr. Dittoe shared that the councils have just started so there will be more to report in the future.

Recovery Oriented Systems of Care

Howard County

Paul Wyman, Commissioner, Howard County

Mr. Wyman shared that his community has suffered greatly due to the opioid epidemic, which prompted them to call a local opioid summit with 63 community leaders. This summit led the leaders to agree on five key subgroups to address the epidemic: 1.) mental health and addiction, 2.) youth and family support, 3.) prevention, 4.) community support and engagement, and 5.) financing sustainability. These five subgroups have recruited 100 volunteers and created their own goals and strategic plans. It was determined they needed a physical space for people facing substance use or mental health challenges. This led to the foundation of Turning Point System of Care, which oversees the work of the 5 subgroups.

Turning Point System of Care is a standalone non-profit corporation in the state of Indiana, funded by private, local, and state dollars. Their coordinator and navigator positions are funded through a public-private partnership. The Turning Point office has a \$130,000 budget funded through public-private partnerships. Turning Point's navigators work to connect people with appropriate services.

To determine where additional services are needed, Turning Point performed gap analysis. The main gaps are treatment facilities and available treatment for youth. Mr. Wyman credited local

leadership, council of Kokomo, the city council, the mayors and leadership across the private and public sector for the success of the group.

City of Lawrenceburg

Kelly Mollaun, Mayor
Brenda Konradi, Executive Director,
One Community One Family

Mr. Mollaun shared that his priority is the development of a quick response team (composed of a law enforcement officer, addiction counselor and EMS member) to visit every overdose survivor within 48 hours. He says this approach takes minimal dollars and has shown success. Mr. Mollaun said he has been in contact with representatives from the Governor's Office and FSSA, who visited Lawrenceburg and presented to 60 stakeholders. Mr. Mollaun said he has hired a consultant to do data gathering with Lawrenceburg services this Friday, and send a gap analysis and strategic plan to the city over the summer.

Ms. Konradi leads One Community One Family (OCOF) the system of care organization for Southeastern Indiana with a child focus. She shared that since 2005, they have been building collaboration across the region and implementing evidence based practices across agencies. Using funding from Project LAUNCH, over 1,000 providers have received training and over 4,000 individuals have been served in southeastern Indiana. Ms. Konradi shared a network analysis of the network of care in 2015, 2016, 2017, which shows increasing network strength every year. OCOF plans to use this same model for building a system of care for drug overdose.

Bartholomew County

Jeff Jones, Executive Lead,
Alliance for Substance Abuse Progress
in Bartholomew County

Mr. Jones shared that ASAP is a partnership between the county leadership, Columbus regional health, and the City of Columbus, founded 1 year ago. They employ a staff of three, including an executive director, project manager, and communications leader. The other ASAP members are involved on a volunteer basis.

He said that the four pillars of ASAP's strategy are Prevention, Intervention, Treatment, and Recovery. For the other three pillars, a gap analysis was performed to identify 10 key elements of opioid intervention, treatment, and recovery (housing, recovery programs, criminal justice system, county jail, in-patient treatment, out-patient treatment, prescribing practices, and county health system). The identification of these elements lead to the creation of the Hub concept. The Hub will be a resource center connecting people throughout the system, helping the client navigate with service providers through recovery support programs.

ASAP has launched 35 projects so far, and recently developed an aspirational theme ("We know. We can."). With the help of a philanthropist, Project Prevent is being launched with a \$1 million fund to engage prevention programs in the county.

Kevin Moore, FSSA

Mr. Moore commended the local leadership within the three communities that have presented, and stated that state's goal is to support local leadership. He said that a recovery oriented system of care addresses the many needs of those affected by substance abuse disorder and recognizes the diverse paths to recovery. Using CURES dollars, DMHA is supporting Richmond and Lawrenceburg as they develop their system of care. A consultant has been hired to bring together the key stakeholders, lead strategic planning for these leaders, and help them implement these plans. This will also lead to the creation of a toolkit to take what these communities have built and scale it in a way that could benefit other communities.

Open Beds Update

Dr. Jennifer Walthall, Family and Social Services Administration (FSSA)

Dr. Walthall shared that Open Beds, a software platform that connects those who need inpatient service and recovery in their time of need, has been live since March 15, 2018. The program is taking digital referrals on weekends to make this a truly 24/7 endeavor in urban and rural spaces and has connected 100 individuals to care in the last 6 weeks. Open Beds has on boarded 16 referring entities and 23 more are in the pipeline, with large hospital systems counted as only one unit in that count.

Dr. Walthall shared the story of a 23 year old male who had struggled with heroin use for 4 years who called 211 himself. Within 4 hours he was connected with treatment. Another 21 year old homeless individual called 211 for help. 211 had difficulty reaching him by phone, but they persisted and had him in treatment within 72 hours of his call.

Dr. Walthall said that as of last month, there were over 1,000 beds for treatment. The Open Beds process still has progress to make, and its next step is to expand to outpatient treatment and ongoing peer recovery. It would also be positive to make Open Beds available to the Justice System of Indiana. She said that this is a large amount of progress in a short amount of time, attesting to the cross-sector collaboration in the state of Indiana. By June 1, non-emergency medical transportation should be live from one centralized phone number.

Second Year Cures Act Funding

Rebecca Buhner, Division of Mental Health & Addiction, FSSA

Ms. Buhner shared that mobile crisis teams were developed utilizing year one funds. Approximately \$800,000 from next year's funds are also dedicated to this pilot program. \$1.5 million is dedicated to recovery coaches in hospitals. Project ECHO is receiving \$600,000 and expanding the eligibility requirements to include pregnant women and first step providers. Project ECHO is adding an RFF to coordinate and organize the recovery coaches in Indiana. Funds are also being given to the 22 beds which are being added to the Richmond Hospital. DMHA is also increasing motivational training and training for recovery residences as well as offering funding for lockboxes and naloxone expansion.

Ms. Buhner also said that DMHA has added excise police to the list of individuals who receive naloxone training and naloxone. The stigma reduction campaign is centered on treating

substance use disorder as a disease because this is central to successful treatment. During the campaign, there have been 35 billboards, 27 digital billboards, 10 street signs, over 100 million impressions online, and 41 events reaching 4,000 individuals in Indiana. The campaign will continue, with funding increasing from \$500,000 to \$750,000.

There are also several new initiatives, including \$500,000 for screening, brief intervention, and referral. DMHA is also adding \$500,000 to drive the creation and support of Quick Response Teams (QRTs). Statistics show that almost 80% of those that interact with the QRTs get access to treatment. Using the carry over funds from last year's CURES funding, they are developing a package of services for mothers who give birth, allowing them to receive treatment immediately afterwards. A pilot opportunity will be offered for a community with recovery coaches to develop a program for aftercare. DMHA will also support counselors who are trying to get credentialed in addiction in the state of Indiana.

Meeting adjourned at 11:40 a.m.

Next meeting Thursday, Aug. 23, 2018 at 10:00 a.m.