The Opioid Addiction Crisis in the Northern Shenandoah Valley

A Community Response
“We cannot arrest our way out of this problem.”
The Story we want to share

The Northern Shenandoah Valley Substance Abuse Coalition

• A dynamic, a multi-disciplinary collaboration of law enforcement (prosecution and defense resources alike), public health, child welfare, family courts, county and city leadership, and community members impacted by the crisis of heroin and opiate addiction

• Has brought together a diverse set of local, community partners that work collaboratively across disciplines to respond to a public health crisis in the Valley contributing time, talent and treasure

• Working to develop a cost-effective drug treatment court as well as compassionately and realistically expanding treatment options for community members who need this service
Addiction

Key Points

• Addiction is a disease, not a choice or moral failing
• There is an unfortunate stigma associated with this in our society
• One death is one too many for our community
Opiate Overdose Deaths
NW Virginia

- Without the use of NARCAN the death toll would be much higher.
- 2015 as of 9/11/15
Juvenile and Adult Drug Arrests
Clarke and Frederick Counties, Winchester City, and Task Force (Felony and Misdemeanor)
NWRADC
90 Day Treatment Program

• From January 2012 through October 2014, 888 inmates participated in the 90 day program at the NWRADC
• About 50% of those inmates actually graduated
• Taking just the 50% graduation figure, with the average cost per inmate at the NWRADC of $81 per day:

• $444 \times $81 \times 90 = $3,236,760

• According to staff at the jail, the majority of the inmates in the program are addicted to heroin and/or opiates
Increase in Drug Related Foster Care – Frederick County

Total Foster Care Expenditures by Year

Foster Care Expenditures - Drug Related

* Cost data through Oct 2014

Total Number of Frederick County Children in Foster Care at any Time During Calendar Year

Total Number of Frederick County Children in Foster Care at any Time During Calendar Year - Drug Related

* YTD
Foster Care – Winchester

- Total Number of Foster Children Calendar Year
- Number of Children in Foster Care - Drug Related
- Foster Care Expenditures Drug Related

* YTD
% Change in Population
2010-2013

- Clarke, Frederick, & Winchester: 3.7%
- Loudoun: 12.0%
- Fairfax (County & City): 3.3%
- State of Virginia: 3.2%

% Change in Heroin and/or Opioid Deaths
2010-2013

- Clarke, Frederick, & Winchester: 175.0%
- Loudoun: 87.5%
- Fairfax (County & City): 39.3%
- State of Virginia: 42.8%
Winchester Medical Center
Opiate and Heroin Cases

<table>
<thead>
<tr>
<th>Year</th>
<th>Emergency</th>
<th>Inpatient</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>39</td>
<td>68</td>
</tr>
<tr>
<td>2013</td>
<td>32</td>
<td>83</td>
</tr>
<tr>
<td>2014</td>
<td>47</td>
<td>84</td>
</tr>
</tbody>
</table>
The data in the bars are the average length of stay.

Winchester Medical Center
2012-2014

<table>
<thead>
<tr>
<th>Category</th>
<th>Babies</th>
<th>Length of Stay</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Nursery Babies</td>
<td>6,564</td>
<td>2.0</td>
</tr>
<tr>
<td>Methadone/Morphine Nursery Babies</td>
<td>51</td>
<td>8.5</td>
</tr>
<tr>
<td>Methadone/Morphine NICU Babies</td>
<td>35</td>
<td>22.1</td>
</tr>
</tbody>
</table>
Winchester Medical Center Opiate and Heroin Cases 2012-2014 Projected

- Uninsured: 43%
- Medicaid/Medicare: 31%
- Insured: 26%
The Community’s Response

Northern Shenandoah Valley Substance Abuse Coalition
Addiction
Select Initiatives

April 2014 –
• Summit at Shenandoah University attended by approximately 200 people representing the U.S. Attorney’s Office, Drug Enforcement Agency, Valley Health, local law enforcement, and concerned community members

June 2014–
• Implemented a system wide program to ensure proper prescriptive practices in all Valley Health Hospital Emergency Departments and Urgent Care Centers
  • Appropriate dispensing
  • PMP utilization by prescribers
  • Patient Education program
• Partnered to develop informational resources, access, and visibility for community organizations and programs relating to addiction, rehab and crisis referral.
• Increased data sharing to support regional grant applications
• Continuing local and state level advocacy for drug exposed newborns
Addiction
Select Initiatives

July 2014-
• Partnered with Casey Family Programs bringing subject matter expertise to the community
• Community outreach on substance abuse and addiction initiatives launched:
  • VHS magazine article (115,000 households) educating our community on safe medication management
  • Health & safety fairs
  • VHS social media
  • Partnering to launch of new AAC web site
Addiction
Select Initiatives

September 2014

• Valley Health sponsored an educational forum for 200 local medical providers featuring presentations from local law enforcement, the DEA, and others about the opioid and heroin crisis in our community

• Monthly Addiction Awareness program for Valley Health employees launched educating staff and medical staff on best practices

• Promotion of the use of Virginia Prescription Monitoring Program to screen prescribed controlled substances.
Addiction
Select Initiatives

October and November 2014

- Installation of Drug Take Back Boxes at the Winchester Police Department, Clarke County Sheriff’s Department, and Frederick County Sheriff’s Department through grants awarded by CVS pharmacy
- Winchester Star article regarding potential community benefit of a Drug Court
- Partnering to advertise area:
  - Prescription drug “take-back” programs
  - Community “Drop Box” program
  - RX123 program launched in partnership CLEAN, Inc.
Community Leadership Summit Action
November 18, 2014
With critical support and expertise from Casey Family Programs, we pulled together 100 local decision-makers and stakeholders in the community to address this public health crisis:

- Law enforcement, Health Care, Judiciary, Government, Community Service Board, Educators, Social Services, recovery community, private substance abuse and mental health providers, non-profit organizations, and concerned citizens
Addiction
November 2014 Summit

• The participants were presented with key data highlighting the community-wide effects of opioid and heroin addiction in our community

• Launched The Road to Recovery website with information and links to community resources for treatment and help (roadtorecovery.info)
Addiction
November 2014 Summit

Adopted Desired Future State:
By January 1, 2017 the Winchester, Frederick, and Clarke community will have a comprehensive coordinated approach to the prevention, treatment and adverse societal impact of addiction, as evidenced by:
• A decrease in mortality from overdoses
• A decrease in the incidence of substance exposed infants
• A decrease in the incidence of children needing social services intervention due to parental/caregiver addiction
• A decrease in the incidence of crimes attributable to addiction
Addiction
November 2014 Summit

Best Practices Recommendations

• Prevention and Education Programs
• Medical Provider Education Programs
• Drug Take-Back Programs
• Treatment/Detox Programs
• Options for the uninsured and underinsured patients
• Prescription Monitoring Programs
• Drug Courts
• Transitional care after incarceration
• Peer Recovery Network
Addiction
Select Initiatives

January 2015

• Northern Shenandoah Valley Substance Abuse Coalition (NSVSAC) Charter written and process initiated which has resulted in becoming a Virginia non-profit corporation with 501(c)(3) status from the IRS

February and March 2015

• NSVSAC leadership meetings with Rep Comstock, Sen. Vogel and the CSB Board
Addiction
Select Initiatives

March 2015

• Community forum
  – Attended by approximately 125 people
  – Content
    • Message of hope from a recovering addict
    • Data from the November 2014 summit,
    • Member of the Northwest Virginia Regional Drug Task Force.
    • An hour-long Q&A session that provided excellent community feedback

• Jointly funded CSB/Valley Health peri-natal substance abuse case manager
Addiction
Select Initiatives

April 2015

• Community educational forum “Your Kids Know More Than You Do.”
  – Attended by approximately 150 people
  – Dr. Will Rushton, an emergency room physician and poison control expert.

• Convened the organizational meeting of the Winchester-Frederick-Clarke Drug Treatment Court Advisory Committee with 22 participants in attendance, plus one member of the press.

May and June 2015

• Members of the Winchester-Frederick-Clarke Drug Treatment Court Advisory Committee visit State Drug Courts
Addiction
Select Initiatives

July 2015

• $60,000 each from the City of Winchester, Frederick County and Valley Health, plus $15,000 from Clarke County to enable the NSVSAC to hire an Executive Director

• Primary duties will be the planning and implementation of a Drug Treatment Court for Winchester, Frederick and Clarke
Addiction
Select Initiatives

September 2015
• Educational Forum for 160 physicians on pain management
• Community program on Addiction treatment options

October 2015
• Peer-to-Peer Recovery Coach Training funded by Casey Family Programs and conducted by the McShin
Addiction is a Disease
and
We have a Public Health Crisis

Critical Needs
Addiction
Critical Needs

• Recognize that this is first and foremost a public health crisis.
• It is the disease of Addiction and not merely opioids and heroin or we will be back in 3-5 years with the next “crisis.”
Addiction
Critical Needs

• Increase funding for drug treatment courts in the Commonwealth as a proven way to address public safety and the treatment needs of offenders in our criminal justice system in a cost effective manner
  – 2012 Cost-Benefit Analysis concluded that the 12 Drug Courts studied saved taxpayers nearly $20,000 per participant over the cost of “business as usual” case processing
Addiction

Critical Needs

• Fund all Community Service Boards so that they can provide community-based treatment to those most in need of substance abuse treatment and services including inmates released from incarceration

• Establish metrics to be used to qualify treatment programs for ongoing reimbursement from public monies based on Value. (Value = Outcomes/Cost)
Addiction

Critical Needs

• Require retail Pharmacy providers to review the Prescription Monitoring Program whenever controlled substances are prescribed and report potential abuse to the practitioner and law enforcement

• Create a PMP that covers a broader geographic area
The work has just begun