I. EXECUTIVE BRIEF

Title: Opioid Epidemic Response: The Palm Beach County Experience

Summary: Staff from the Community Services Department (the Department), Substance Use Disorder/Behavioral Health section, will provide an update to the County’s opioid response efforts and the systemic challenges in achieving strategic objectives. The Department will also present their work related to Recovery-Oriented Systems of Care; recovery capital measuring and monitoring; as well as, past, current and planned efforts by the Department and its strategic partners.

Background and Policy Issues: The Board of County Commissioners (BCC) adopted an Opioid Response Plan (ORP) in the spring of 2017 to guide its opioid epidemic efforts. The root causes of the epidemic discovered through the ORP’s analysis process were found to be complex which would require an integrated community response to make meaningful changes. The report documented the absence of a coordinated response effort and stated most agencies were operating within their individual silos or ‘spheres of influence’. The ORP made recommendations and identified strategic areas of focus and action steps for a path forward. The BCC subsequently identified the opioid epidemic, behavioral health, and substance use disorder as a high strategic priority and adopted a strategic goal to establish a system of care that was person-centered and recovery-oriented, which has, at its heart, neutral care coordination in order to improve quality of care and long-term recovery outcomes. Establishing a mechanism for oversight was a key component to successfully implementing the ORP. In 2018, the BCC created a position to lead coordination efforts throughout the County and the Substance Use Disorder/Behavioral Health section was created within the Community Services Department. The Department, along with key strategic partners, continue to champion and bring federal, state and local resources to bear in order to achieve long-term recovery outcome and quality of care improvements through planning, developing and executing a comprehensive recovery-centric and recovery-oriented system of care model. Countywide (HH)

Attachments: PowerPoint

9/16/2020

Department Director

Date

Approved By: County Administration

9/16/2020

Date
II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

<table>
<thead>
<tr>
<th>Fiscal Years</th>
<th>2020</th>
<th>2021</th>
<th>2022</th>
<th>2023</th>
<th>2024</th>
</tr>
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<tbody>
<tr>
<td>Capital Expenditures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Operating Costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>External Revenues</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Program Income (County)</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>In-Kind Match (County)</td>
<td></td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>NET FISCAL IMPACT</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>#ADDITIONAL FTE POSITIONS (CUMULATIVE)</td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

Is Item Included in Current Budget? Yes ___ No __
Does this item include the use of federal funds? Yes ___ No __

Budget Account No:
Fund Agency Organization Object

B. Recommended Sources of Funds/Summary of Fiscal Impact:

C. Departmental Fiscal Review:

III. REVIEW COMMENTS:

A. OFMB Fiscal and/or Contract Dev. and Control Comments:

B. Legal Sufficiency

C. Other Department Review

Department Director

(THIS SUMMARY IS NOT TO BE USED AS A BASIS FOR PAYMENT.)
Opioid Epidemic Response: 
*The Palm Beach County Experience*

Community Services Department 
Substance Use Disorder / 
Behavioral Health Section

Board of County Commissioners 
Presentation 
September 22, 2020
OPIOID EPIDEMIC RESPONSE PLAN

• Found the root causes were complex and require an integrated community response to make meaningful changes.
• Documented a glaring absence of a coordinated response effort and stated most agencies were operating within their individual silos or ‘spheres of influence’.

Summary of Recommendations
• Create a coordinated response through the designation of a primary entity responsible for the integration of all efforts relative to the epidemic.
• Provide prevention and education throughout the community.
• Expand options for access to treatment and provide oversight and monitoring.
• Support approaches to public safety and law enforcement.
OPIOID EPIDEMIC RESPONSE PLAN

Summary of Recommendations, continued

• Understand the importance of the social determinants of health and create opportunities for success through the provision of necessary ancillary services.
• Advance change through public policy and legislative advocacy.
• Support strategies to reduce illicit supply and demand.
• Generate and implement a comprehensive evaluation plan to monitor and measure achievement.
• Appoint a County “Drug Czar” and establish an ORP steering committee focused on seven strategic areas:
  • Leadership
  • Prevention and Education
  • Treatment (and Recovery)
  • Public Safety and Law Enforcement
  • Public Policy
  • Ancillary (Essential) Services
  • Evaluation and Monitoring
BCC STRATEGIC PRIORITY

Substance Use and Behavior Disorder

“To address substance use and behavior disorders by providing evidence-based prevention, medication-assisted treatment, and recovery support services.”

- Establish a readily accessible, integrated and coordinated recovery-oriented system of care that commits to quality, evidence-based addiction and mental health services and integration of the Addiction Stabilization Facility
- Promote best practices and innovative strategies and programming to reduce:
  - drug-related deaths and overdoses
  - drug-related infectious diseases and medical complications
  - crime related to substance use and behavior disorders
Common themes during qualitative analysis:

- Need for system collaboration
- Need to understand co-occurring psychiatric, substance use, and other complex conditions
- Utilize evidence-based practices
- Critical to focus on social determinants of health
- Expand community education and engagement
- Expand and enhance peer support
- Address health disparities, equity and cultural competence
- Capacity building for the behavioral health profession
PBC BEHAVIORAL HEALTH NEEDS ASSESSMENT 2019

Funding Analysis
• $55,962,390 total spending
• 55,437 individuals/families served

Funding broken into:
• Service: (Prevention, Support, Community-Based Services, Deep-End Services, Team-Based Services, Incidentals)
• Population (Children/Youth, Adult, Families, Unspecified or All)
• Category (MH, SA, SA/MH)
Recommendations

- Develop a common language across systems.
- Enhance “no wrong door policies and practices” and development of a central assessment and care coordination system for the community. Continued utilization of system-wide evidence-based practices including the development of true Recovery-Oriented Systems of Care (ROSC) and a comprehensive implementation of care coordination and wraparound services.
- Provide peer support in other systems beyond behavioral health and child welfare.
- Prioritization funding for co-occurring psychiatric, substance use, and other complex conditions.
- CSD focus its funding allocations on the Support Services category.
Community Forum Review and Analysis:

- Need for better collaboration, alignment, and partnering between entities.
- Need to address social determinants of health such as housing, transportation, education, and employment.
- Need for integration of SUD and BHD services (i.e. multi-occurring diagnoses).
- Need for adequate safe recovery housing and facilities.
- Elimination of inequity and disparity challenges.

Recommendations

- Better execute the patient-centric model of care requiring the establishment of a neutral care coordination entity.
- Support to build a ROSC community.
PBC Fire Rescue - Number of Calls

<table>
<thead>
<tr>
<th>Year</th>
<th>Qtr 1</th>
<th>Qtr 2</th>
<th>Qtr 3</th>
<th>Qtr 4</th>
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<td>2019</td>
<td>600</td>
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<tr>
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<table>
<thead>
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<th>Year</th>
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<td>2017</td>
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<td>2018</td>
<td>1559</td>
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<tr>
<td>2019</td>
<td>1526</td>
</tr>
<tr>
<td>2020</td>
<td>1204</td>
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PBC FIRE RESCUE – NARCAN ADMINISTERED

<table>
<thead>
<tr>
<th>Year</th>
<th>Count</th>
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<tbody>
<tr>
<td>2017</td>
<td>1897</td>
</tr>
<tr>
<td>2018</td>
<td>826</td>
</tr>
<tr>
<td>2019</td>
<td>596</td>
</tr>
<tr>
<td>2020_Aug</td>
<td>520</td>
</tr>
</tbody>
</table>

- Qtr 1 2017: 500
- Qtr 1 2018: 200
- Qtr 1 2019: 100
- Qtr 1 2020: 50

- Qtr 2 2017: 800
- Qtr 2 2018: 400
- Qtr 2 2019: 200
- Qtr 2 2020: 100

- Qtr 3 2017: 300
- Qtr 3 2018: 150
- Qtr 3 2019: 75
- Qtr 3 2020: 38

- Qtr 4 2017: 200
- Qtr 4 2018: 100
- Qtr 4 2019: 50
- Qtr 4 2020: 25
PBC MEDICAL EXAMINER – OPIOID OD DEATHS

<table>
<thead>
<tr>
<th>Year</th>
<th>Opioid OD Deaths</th>
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</thead>
<tbody>
<tr>
<td>2017</td>
<td>626</td>
</tr>
<tr>
<td>2018</td>
<td>402</td>
</tr>
<tr>
<td>2019</td>
<td>446</td>
</tr>
<tr>
<td>2020_Aug</td>
<td>361</td>
</tr>
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</table>
**PERSON-CENTERED, RECOVERY-ORIENTED SYSTEM OF CARE**

Why Create a ROSC in Florida?

“A ROSC is a network of clinical and nonclinical services and supports that sustain long-term community-based recovery. As local, organic entities, ROSCs reflect variations in each community’s vision, institutions, resources and priorities”

- FLDCF, Creating ROSC in Florida – A Winter 2017 Summary,

- A coordinated network of community-based services and supports that is person-centered and builds on the strengths and resilience of individuals, families, and communities to achieve improved health, wellness, and quality of life for those with or at risk of alcohol and drug problems.

- Provide self-directed approaches which respect the role of personal choice and commitment in pursuit of health and wellness.
PERSON-CENTERED, RECOVERY-ORIENTED SYSTEM OF CARE

- Neutral Care Coordination Entity central to the system of care.
- Provide assessment, referral and care coordination services oriented toward individualized service plans unique to the individuals’ needs and consideration of their choices.
- Will expand capacity by reducing lapse into deep-end services; improve quality of care and long-term recovery outcomes; produce cost savings for re-investment into social determinants of health.
• Peer support facilitates recovery and reduces health care costs. Peer support is often coupled with recovery support services which include access to evidence-based practices such as supported employment, education, and housing; assertive community treatment; illness management; and peer-operated services.
PERSON-CENTERED, RECOVERY-ORIENTED SYSTEM OF CARE

Recovery Community Organizations and Centers

- Activities and services led and driven by appropriately trained volunteers and peers. All pathways to recovery respected.
- Provide peer recovery support services to promote recovery in a supportive environment.
- Access training; social, educational and recreational opportunities; information about treatment, recovery support and other resources.

Outcomes

- Helps vulnerable individuals beginning recovery with few resources low capital.
- Offers value to many others in the early years of recovery stabilization and beyond.
- Provides a unique function in helping participants build recovery capital; increase quality of life and self-esteem; and, decrease psychological distress.

“Recovery hubs facilitating “one-stop shopping” in the accrual of recovery capital.”

Dr. John Kelly, Harvard Medical School Recovery Research Institute
OPIOID EPIDEMIC RESPONSE INITIATIVES

- Recovery Support RCO/RCC
- Family Support
- Prevention
- First Responders
- ASC
- Treatment
- Respite
HCD – MODE OF ARRIVAL – AUG 2020

Mode of Arrival for August 2020

- WALK IN: 51%
- WPB FR: 16%
- Police: 5%
- PBG FR: 3%
- Rivera FR: 4%
- PBFR: 1%
- AMR: 1%
- PBCFR: 19%
HCD – DISPOSITIONS – NOV 2019 - AUG 2020

- Discharged to a MAT or HCD: 25%
- Discharged Home: 17%
- Admitted to Med/Surg: 35%
- Admitted to Psych: 8%
- Admitted to Critical Care: 5%
- Returned to Current Program: 3%
- Returned to Jail: 0%
- Admitted to a Detox Cnt: 1%
- AMA: 6%

www.facingthecrisis.org
HCD - VOLUME BREAKDOWN - OPIATES vs. etoh
HCD - BRIEF ADDICTION MONITOR SURVEYS

Brief Addiction Monitor (BAM) Survey Date: 1/1/2019 to 8/12/2020

**Use Score**

- Assessment Time Period From Admission
- Use Score trend: 01, 3 mos, 6 mos, 9 mos, 12 mos, 15 mos, 18 mos, 21 mos, 24 mos, 27 mos, 30 mos, 33 mos, 36 mos, 39 mos, 42 mos

**Risk Factors**

- Assessment Time Period From Admission
- Risk Factors trend: Avg Risk Factor, Avg Use Score

**Protective Factors**

- Assessment Time Period From Admission
- Protective Factors trend: Avg Protective Factor, Avg Use Score

- Use Score: 0 to 30
- Risk Factors: 0 to 90
- Protective Factors: 0 to 150

- Average Scores trend: Avg Use Scores, Avg Risk Factor, Avg Protective Factor
## ORP FUNDING INITIATIVES

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Leadership</strong></td>
<td>Appoint a Professional County Staffer to coordinate efforts and Establish steering committee; Increase in federal RCSP funding; USDOJ COSSAP grant</td>
</tr>
<tr>
<td><strong>Prevention and Education</strong></td>
<td>Facing the Crisis, Recovery Is Now; Recovery Leadership Institute; LifeSkills; Family member/children at risk outreach</td>
</tr>
<tr>
<td><strong>Treatment (and Recovery)</strong></td>
<td>Two RCO / RCCs; Expanded detox/residential services; Women, women with children; Syringe Access Program; Project COPE</td>
</tr>
<tr>
<td><strong>Ancillary (Essential) Services</strong></td>
<td>Ted’s Place (respite)</td>
</tr>
<tr>
<td><strong>Evaluation and Monitoring</strong></td>
<td>Recovery Capital Indexing</td>
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### SEFBHN PBC Initiatives, Programs & Services

**PPE Distributed, March – September 2020**

<table>
<thead>
<tr>
<th>PPE</th>
<th>Dispersed</th>
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<tbody>
<tr>
<td>Gloves</td>
<td>15,650</td>
</tr>
<tr>
<td>Hand Sanitizer</td>
<td>1,188</td>
</tr>
<tr>
<td>KN95 Masks</td>
<td>6,000</td>
</tr>
<tr>
<td>Masks</td>
<td>10,000</td>
</tr>
<tr>
<td>Gowns</td>
<td>1,200</td>
</tr>
<tr>
<td>Goggles</td>
<td>110</td>
</tr>
<tr>
<td>Face Shields</td>
<td>1,500</td>
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<tr>
<td>Thermometers</td>
<td>75</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>35,723</strong></td>
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### SEFBHN PBC INITIATIVES, PROGRAMS & SERVICES

#### Summary of Services and Funding for Fiscal Year 19-20

<table>
<thead>
<tr>
<th>Program</th>
<th>State Opioid Response</th>
<th>Palm Beach County</th>
<th>Number Served</th>
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<tbody>
<tr>
<td>Prevention</td>
<td>$122,791</td>
<td>$125,000</td>
<td>1,962</td>
</tr>
<tr>
<td>Ted’s Place – Respite &amp; Care Coordination</td>
<td>$33,296</td>
<td>$564,375</td>
<td>138</td>
</tr>
<tr>
<td>Rebel Recovery’s Community Organization</td>
<td>$100,000</td>
<td>$37,500</td>
<td>1,430</td>
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</table>

**FY 19-20 Transitional Vouchers**

<table>
<thead>
<tr>
<th>Number Served</th>
<th>State Opioid Response</th>
<th>State Funds</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>172</td>
<td>$84,445</td>
<td>$135,960</td>
<td>$220,405</td>
</tr>
</tbody>
</table>
SEFBHN PBC INITIATIVES, PROGRAMS & SERVICES

RCO / RCC – Rebel Recovery (West Palm Beach)

• 1,430 participants to date
• Average weekly Classes – 15
  • Includes meetings, groups, trainings, and recreation
• Evidence Based Program Trainings:
  • Helping Others Heal for Peer Certification
  • WRAP (Wellness Recovery Action Plan)
  • Overdose Prevention
• Naloxone Kits Distributed: 7,294 doses
  • 155 Community Reversals Reported

RCO / RCC The HUB of Palm Beach County (Delray Beach)

• Organizational development completed / Staffing and virtual services implemented
• Center scheduled to open Nov 2020
<table>
<thead>
<tr>
<th>SUCCESSFUL</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1 - Successfully completed Treatment</td>
<td>6288</td>
</tr>
<tr>
<td>4 - Successfully completed Transfer to another treatment program or facility</td>
<td>193</td>
</tr>
<tr>
<td>24 - Successfully completed Transfer to another treatment program or facility that is not in the SSA or SMHA reporting system</td>
<td>125</td>
</tr>
<tr>
<td>Subtotal</td>
<td>6606</td>
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<table>
<thead>
<tr>
<th>UNSUCCESSFUL</th>
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</thead>
<tbody>
<tr>
<td>14 - Transferred to another treatment program or facility but individual is no show or transfer not successfully completed</td>
<td>4</td>
</tr>
<tr>
<td>2 - Dropped out of treatment lost contact administrative discharge left against medical advice eloped failed to return from leave and individual choice</td>
<td>1945</td>
</tr>
<tr>
<td>3 - Terminated by facility</td>
<td>181</td>
</tr>
<tr>
<td>5 - Incarcerated or released by or to courts</td>
<td>44</td>
</tr>
<tr>
<td>6 - Death</td>
<td>13</td>
</tr>
<tr>
<td>7 - Other includes aging out of the children’s MH system extended placement conditional release and all other reasons</td>
<td>1321</td>
</tr>
<tr>
<td>Subtotal</td>
<td>3508</td>
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</table>

Grand Total                                      | 10114 |

**Reasons for Discharge of Palm Beach County SUD Persons FY 18-19 and FY 19-20**
SEFBHN PBC INITIATIVES, PROGRAMS & SERVICES

SEFBHN Palm Beach County
SUD Telehealth Services FY 19-20

Southeast Florida BEHAVIORAL HEALTH NETWORK
SEFBHN Palm Beach County Total SUD Admissions and Discharges FY 18-19 to FY 19-20-Comparison

- 21% Decrease in New Admissions
- 19% Decrease in Discharges

Total Admissions
- 10/1/2018 - 9/30/2019
- 10/1/2019 - 9/18/2020

Total Discharges
- 10/1/2018 - 9/30/2019
- 10/1/2019 - 9/18/2020

Southeast Florida Behavioral Health Network
<table>
<thead>
<tr>
<th>Admissions</th>
<th>FY 18-19 Total</th>
<th>FY 18-19 PBC</th>
<th>FY 19-20 Total</th>
<th>FY 19-20 PBC</th>
<th>Grand Total Total</th>
<th>Grand Total PBC</th>
</tr>
</thead>
<tbody>
<tr>
<td>SUD and Co-Occurring Admissions</td>
<td>10,521</td>
<td>7,048</td>
<td>8,611</td>
<td>5,561</td>
<td>19,132</td>
<td>12,602</td>
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<tr>
<td>SUD/CO Unique Persons Admitted</td>
<td>9,192</td>
<td>6,368</td>
<td>6,754</td>
<td>4,298</td>
<td>15,083</td>
<td>10,057</td>
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</table>

SEFBHN Palm Beach County Adult and Children's SUD Admissions by Fiscal Year

- **FY 18-19**
  - SUD and Co-Occurring: 10,521 admissions
  - SUD/CO Unique Persons: 9,192 admissions

- **FY 19-20**
  - SUD and Co-Occurring: 8,611 admissions
  - SUD/CO Unique Persons: 6,754 admissions

- **Grand Total**
  - SUD and Co-Occurring: 19,132 admissions
  - SUD/CO Unique Persons: 15,083 admissions
SEFBHN PBC INITIATIVES, PROGRAMS & SERVICES

SEFBHN PBC Substance Use Disorder Admissions - Total and Unique Person Admissions
FY 18-19* to FY 19-20** Comparison

Oct Nov Dec Jan Feb Mar Apr May Jun Jul Aug Sep

- FY 18-19 Total Admission
- FY 18-19 Unique Persons Admissions
- FY 19-20 Total Admission
- FY 19-20 Unique Persons Admissions
Unique Palm Beach County Individuals Served by SEFBHN SUD Provider Network - FY 18-19 to FY 19-20 Comparison

- Unique Persons Served 10/1/2018-9/30/2019
- Unique Persons Served 10/1/2019 - 9/16/2020
USDOJ Comprehensive Opioid, Stimulant & Substance Abuse Program

- Focused on achieving housing stability given its key predictive value in achieving long-term recovery outcomes.
- Define and measure housing stability standards.
- Assist clients in finding recovery housing placement using the Recovery Housing Voucher.
- Recovery support services and services fund tied to individualized recovery plans.

Cares Act II, Emergency Solutions Grant

- Housing, treatment, support services and Housing First program for homeless individuals with substance use disorder, mental illness or co-occurrence.
DOH – OVERDOSE TO ACTION PROJECT

Strategies

• Collect and disseminate emergency department (ED) data on overdoses.
• Collect and disseminate descriptions of drug overdose death circumstances.
• Implement surveillance to support NOFO interventions.
• ID high prescribing behaviors re: Prescription Drug Monitoring Programs.
• Integration of state and local preventions and response efforts.
• Establishing linkages to care.
• Providers and health systems support.
• Public safety partnerships.
• Empowering individuals to make safer choices.
• Prevention innovation project.
More arrests to come in crackdown on drug-recovery industry, prosecutor vows

Battling the opioid epidemic, they've pursued 100 criminal cases against fraudsters in the area's drug-recovery industry. And they've seen a big drop in overdose deaths among mistreated addicts.

Delray Beach addiction treatment doctor arrested in $681M fraud case

STATE ATTORNEY

- Achieved 100th arrest
- Legislative and National leadership

“We have made substantial progress in the ongoing effort to save lives from this unprecedented epidemic, and we realize that there is more work to do.”

State Attorney

David Aronberg
Question and Answers