Hope for the Future
Projects & Programs Update

Nancy Sullivan, MAJ
West Virginia Department of Health and Human Resources
History

• In 2017, the West Virginia Legislature passed House Bill 2620, the West Virginia Drug Control Policy Act, which established the West Virginia Department of Health and Human Resources’ (DHHR) Office of Drug Control Policy (ODCP).
According to DHHR’s Health Statistics Center:

- In 2015, there were 735 overdose deaths.
- In 2016, there were 890 overdose deaths.
- In 2017, using preliminary data, there were 1,016 overdose deaths.
West Virginia versus United States

2001-2016 Resident Drug Overdose Mortality Rates
West Virginia and United States

Data Source: WV Health Statistics Center, Vital Surveillance System and CDC Wonder
Rates are age-adjusted to the 2000 US Standard Million
2016 Overdose Fatality Analysis

Those at highest risk

- Male
- 35-54 Years Old
- Education- High School or Less
- Unmarried
- Blue Collar Occupation
Interactions with Health Systems

• **81%** of decedents interacted with one or more systems.
• Just under **40%** of decedents interacted with only one system.

Healthcare systems included BBHHF, EMS, and CSMP. Neither Medicaid or Corrections were included.
WV’s Response to the Crisis

• WV is one of only a few states that has a Substance Use Disorder (SUD) waiver.

• WV is the first and only state to have a Neonatal Abstinence Syndrome (NAS) waiver.

• In 2017, the West Virginia Legislature passed the Ryan Brown Fund bill allocating $21.6 million to increase the number of treatment beds in the state.

• In 2018, the West Virginia Legislature passed SB 272.

• In 2018, the West Virginia Legislature passed SB 273.

• In 2018, the West Virginia Legislature reallocated $10 million to the ODCP.
In effect as of June 5, 2018:

- Local and State governmental entities that employ initial responders must:
  - Train in the use of an opioid antagonist
  - Require carrying of an opioid antagonist
  - Provide opioid antagonist rescue kits
- Statewide Standing Order for opioid antagonist from the State Health Officer
- Additional Provisions
- Amended ODCP Law regarding required reporters of overdoses
- Established Community Overdose Response Demonstration Pilot Projects
Opioid Reduction Act (SB 273)

In effect as of June 7, 2018:

• Placed limits on *NEW* opioid prescriptions
• Exceptions for cancer, hospice, palliative care, etc.
• Non-Opioid Advance Directive (Jessie’s Law)
• Enhanced Controlled Substance Monitoring Program (CSMP) reporting
• Required CSMP access prior to prescribing
• Adjusted regulations for OBMATs
Phase One services, effective January 14, 2018, included:

• Screening, Brief Intervention, and Referral to Treatment (SBIRT): Implemented statewide use of the widely-accepted SBIRT tools to identify SUD treatment needs among the Medicaid population.

• Methadone treatment and administration: Added Medicaid coverage of methadone as a withdrawal management strategy, as well as the administration and monitoring of the medication, and related counseling services.

• Naloxone Distribution Initiative: Implemented a statewide initiative to make naloxone widely available and increase awareness of the benefits of naloxone in reversing the effects of an overdose.
Phase Two services beginning on July 1, 2018 expanded coverage to include:

- **Adult Residential Treatment:** West Virginia will add Medicaid coverage of adult residential treatment levels adhering to the American Society of Addiction Medicine.

- **Peer Recovery Support Services:** West Virginia will implement peer recovery support services delivered by a trained and certified peer recovery specialist who has been successful in their own recovery process and can extend the reach of treatment beyond the clinical setting into a member's community and home environment.

- **Withdrawal Management Services:** West Virginia will now offer coverage of withdrawal management services. This licensed program provides short-term medical services on a 24-hour basis for stabilizing intoxicated members, managing their withdrawal and facilitating access to SUD treatment as needed by a comprehensive assessment.
Opioid Response Plan for West Virginia

• Assembled a panel of public health experts from Johns Hopkins University, West Virginia University and Marshall University to make recommendations for the response plan.

• Process engaged the public to submit ideas or solutions to be considered for the plan. More than 300 comments were received. A public meeting was held in late December to hear from the public and other subject matter experts about their ideas and solutions. More than 100 citizens attended.

• A proposed response plan was completed by the panel and is available at www.dhhr.wv.gov/bph.

• The final plan was submitted to the Governor and Legislature on January 30, 2018.
The report recommended immediate action across six areas of implementation:

• Prevention
• Early Intervention
• Treatment
• Overdose Reversal
• Recovery
• Supporting Families with Substance Use Disorder
Prevention

Educate and foster community awareness of substance use disorder as a treatable disease.

“Interventions are intended to prevent or reduce the risk of developing a behavioral health problem, such as underage alcohol use, prescription drug misuse and abuse, and illicit drug use.” Substance Abuse and Mental Health Services Administration (SAMHSA)
StigmaFree WV provides information about the types of stigma experienced by individuals with substance use disorder, stories of recovery, and how people can get involved.
Help & Hope WV connects people to information, tools, directory of services, calendar of trainings, and events across the state.
Intervention

• Expand promising law-enforcement diversion programs, such as the LEAD model, to help people experiencing a drug problem access treatment and achieve sustained recovery.

• Strengthen support for lifesaving comprehensive harm reduction policies by removing legal barriers to programs that are based on scientific evidence and by adding resources.
• Expand the statewide capacity of Law Enforcement Assisted Diversion (LEAD) programs to:

• Divert low-level drug offenders to treatment and support services, rather than jail and prosecution.

• Connect them to intensive interventions such as assertive community treatment, residential SUD services, comprehensive case management, medication assisted treatment, and other support.
Quick Response Teams (QRTs)

Amount: $1,000,000

• AFA to expand the statewide capacity of Quick Response Teams (QRTs).

• QRTs are composed of emergency response personnel, law enforcement officers and a substance use treatment or recovery provider who contact individuals within 24-72 hours of their overdose in an attempt to get them into a treatment program.

• In April 2018, ODCP awarded a $263,000 grant to Prestera Center to establish a QRT program in the Kanawha Valley.

• The ultimate goal is to have a QRT in every major city within West Virginia.
Drug Abuse Treatment Core Components and Comprehensive Services

Core Treatment
- Intake Assessment
- Treatment Plans
- Group/Individual Counseling
- Abstinence Based
- Pharmacotherapy
- Self-Help (AA/NA)

Support Services
- Medical
- Mental Health
- Financial
- Vocational
- Housing & Transportation
- Child Care
- Educational
- Family
- AIDS / HIV Risks
- Legal

Etheridge, Hubbard, Anderson, Craddock, & Flynn, 1997 (PAB)
1-844-HELP4WV
Drug Free Moms and Babies Program:

• Supports healthy pregnancy outcomes by providing integrated and comprehensive prevention, early intervention, substance use disorder treatment, and recovery support services for pregnant and postpartum women with substance use disorders.

• This funding will add an additional eight sites, for a total of 12 Drug Free Moms and Babies programs.
Reproductive Healthcare at HRP Sites

- Establish same day comprehensive reproductive health services (Family Planning Program clinics) at sites where harm reduction programs (HRP) occurs, with an emphasis on long acting reversible contraception (LARC).

- This project will provide support for a part-time staff person or critical supplies to develop the program, and will provide labels for syringe packages that include information for 1-844-HELP4WV.
• Provide Multiple Paths to Recovery for people with Substance Use Disorders.
Recovery Residences

• Recovery housing provides safe, healthy, and substance-free living environments that support individuals in recovery from substance use disorder.
• Grant awarded to the West Virginia Alliance of Recovery Residences, Inc. (WVARR) to support recovery residences across West Virginia.
  ▪ establish the first statewide recovery community organization to ensure that national recovery residence standards are consistent.
  ▪ develop and operate a system aligned with standards and objectives set by the National Association of Recovery Residences to provide accreditation for West Virginia recovery residences.
  ▪ incorporate a reporting requirement that aids in the gathering of data on recovery residences to inform future programming and best practices in West Virginia.
• Grants were awarded to expand the statewide capacity of recovery resources for adults in educational environments through Collegiate Recovery Programs (CRPs).

• CRPs are college or university-provided, supportive environments within the campus culture that reinforce the decision to engage in a lifestyle of recovery from substance use.

• CRPs are designed to provide educational opportunities alongside recovery support to ensure that students become healthy, productive members of society.
Recovery: Work in Progress

Recovery is a process, not an event.

1. Recovery Initiation
   The Right Help When it is Needed Most
   - Medical and Social Services
   - Recovery Courts
   - Law Enforcement Assisted Diversion

2. Recovery Maintenance
   Recovery Support in the Community
   - Collegiate Recovery Programs
   - Recovery High Schools
   - Healthy Family Life
   - Drug-Free Homes
   - Accessible Transportation
   - Outpatient Programs
   - Inpatient Treatment
   - Recovery Coaches
   - Recovery Housing
   - Recovery Supportive Services

3. Recovery Actualization
   Freedom to Live a Full Life and Give Back
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Education
   - Civic Engagement
   - Purposeful Employment
   - STIGMA
   - Higher Educati
Nancy Sullivan, MAJ  
West Virginia Department of Health and Human Resources  
One Davis Square, Suite 100 East  
Charleston, WV 25301  
Email: Nancy.J.Sullivan@wv.gov  
Website: dhhr.wv.gov