



Pinellas County Opioid Task Force Notes

03/23/2023 – 2 pm-4 pm – Mid-County Health Department and Virtual via Teams

Welcome: Marianne Dean, MS

- Welcome and brief introduction given by Marianne Dean.

Opening Statement: Dianne Clarke, PhD

- Pinellas County is going to have a very well-planned opioid abatement plan to be able to disperse the money throughout the county as needed.
- PCOTF is working on a strategic plan. A lot is going on in substance use treatment that the PCOTF is poised to be an important part of Pinellas County's treatment moving forward.
- Dianne Clarke and Dr. Choe are stepping down from their lead roles as co-chairs of the Pinellas County Opioid Task Force to avoid any conflicts of interest with the abatement funding.
- Marianne Dean will be the new chair for the Pinellas County Opioid Task Force.
- Dianne Clarke is thankful to have been a co-chair for the past few years and is looking forward to continuing being a part of the PCOTF.

Trends in Transports: Chris Jordan, BSBA, NRP; Pinellas County EMS & Fire Administration

- 911 Transports of Suspected Overdoses Fiscal Year Comparison as of 02/28/2023.
 - Fiscal Year 21-22: 7,556
 - Fiscal Year 22-23: 3,247
 - Fiscal year 22-23 has 2 months' worth of data collected so far.
 - About 100 more per month year over year trending upward.
 - It is expected to have substantially more overdoses during Spring Break time.
- 911 Transports with Narcan Administered Fiscal Year Comparison as of 02/28/2023.
 - Fiscal Year 21-22: 3,445
 - Fiscal Year 22-23: 1,322
- 911 Transports of Suspected Overdoses with Narcan Administered Fiscal Year Comparison as of 02/28/2023.
 - Fiscal Year 21-22: 2,783
 - Fiscal Year 22-23: 1,112
- Suspected overdose locations:
 - St. Petersburg, Largo, Lealman and Pinellas Park are larger areas for suspected overdoses.
 - Based off the reported Zip Code on the call.
- Leave Behind Narcan Program Update:

- Clinician training was completed in Pinellas County EMS in December CME with the program now active.
- EMS can leave behind a packet of educational materials as well as Narcan for patients, family members or anyone in need.
- 43 kits have been given out so far and they are looking to increase that number.

Pedestrian & Cyclist Trends: Gina Harvey; Pinellas County Public Works

- Challenge: Reduce pedestrian and bicycle crashes related to opioid and other addiction beyond the realm of transportation engineering.
 - There is infrastructure and transportation in place to keep pedestrians and cyclists safe. However, when you introduce anything that alters judgement, it can cause other issues.
- 2021 Pedestrian and Bicycle crashes:
 - Over 1,200 crashes.
 - 88 were fatalities.
 - 74% of these deaths were within 500 ft. of a crosswalk.
 - 67% of these deaths showed drug and/or alcohol impairment.
 - Information provided was built with the Medical Examiner's Office.
- Steps to reduce crashes related to opioids and other addiction
 - Educational marketing
 - Transportation assistance
 - Infrastructure to create and direct safe crossings
 - Increase visibility with street lighting.

Questions:

- Are the statistics specific to St. Petersburg or is it for all of Pinellas County?
 - All of Pinellas County.
- Public Works is looking for feedback on what they can do to help.
- Public Works is trying to get reflective bracelets to try and give motorists a chance to see pedestrians when they are not making the best choices.
 - Suggestions:
 - Law enforcement may be able to assist with some funding to assist with education.
 - Create a heat map after looking at where the incidents are taking place or if there are any "hot spots" in the county.
 - Maybe having a volunteer force that could be used instead of law enforcement to hand out a formal or official warning.
 - A sign to put up to let people know that it is a more dangerous intersection so instead of deer crossing- it could be entertainment crossing- or an indicator. Could be helpful to tourists that are unfamiliar with the area as well.

EIS Update: Mohammad Alak, MPH; DOH

- Pinellas County Quarterly Overdose Report.
- In recent months, there has been an update to how the syndromic surveillance system categorizes visits of interest. This made opioids, stimulants, and some other drug category numbers more in line with what we expect to see in real world overdose activity.
- Quarter 4, 2022: Emergency Department Visits for Suspected Overdose by Quarter:
 - There was a 4% decrease in opioid related emergency department visits from the previous quarter.
 - There was a 25% decrease in stimulant related emergency department visits from the previous quarter
- Quarter 4, 2022: Suspected All Drug Overdose ED Visits Demographics:
 - Continues to be white, non-Hispanic males between the ages of 20-54.
 - There were no significant or observable demographic shifts between the quarters.
- Overdose-Related Emergency Medical Services Responses:
 - There was a small decrease in the number of EMS responses in Quarter 4 in comparison to Quarter 3.
 - EMS still administers naloxone to all that they suspect of an overdose.
- Quarter 3, 2022 Overdose Related Fatalities:
 - There is a decrease in overdose fatalities in Quarter 3 with 134, in comparison to Quarter 2 which had 149.
- If there are any questions regarding the data presentation, please reach out to Mo at Mohammad.Alak@FIHealth.gov

Overdose Data to Action: Marianne Dean, MS; DOH

- CHD Naloxone Distribution:
 - DOH has begun to distribute naloxone to individuals appearing to be 18+.
 - DOH can provide 2-5 boxes of naloxone at a time.
 - The majority of naloxone is being distributed through outreach.
 - Monthly Narcan Distribution totals:
 - November 2022- 177
 - December 2022- 149
 - January 2023- 146
 - February 2023- 172
- General Update:
 - Coordinated Opioid Response (COrE) funding will be extended through 09/30/2023.
 - The COrE program assists with a weekend prescriber for the hospital bridge in collaboration with Operation PAR.
 - Office of Overdose Prevention lead outreaches:
 - 39 total in 2022 (Goal was 35)
 - 7 for 2023
- Spring Break Naloxone Initiative:

- IDEA Exchange Pinellas, Recovery Epicenter Foundation and Florida Harm Reduction Collective have been leading this event.
- The initiative is in response to the West Point cadets overdose event in 2022.
- Groups have gone to areas along Pinellas County beaches in effort to dispense naloxone and raise awareness.
- They are operating every Tuesday and Thursday between March 1, 2023- May 1, 2023.
- Drug and Alcohol Facts Week:
 - Pinellas County Schools Prevention Program are partnering with DOH to ensure safe student interaction for Spring Break.
 - The students will be creating posters for Drug and Alcohol Facts Week.
 - The students that create these posters will be recognized by the Office of Overdose Prevention for their great work.
 - Sam has a Drug and Alcohol Facts Week table that will be at the DOH St. Petersburg center on March 24, 2023.
- Task Force Partner Training Opportunity:
 - CPR/ Stop the Bleed/ Naloxone training by Claire Hightower
 - This is no cost to anyone looking for a refresher training (no certification provided).
 - Training is available June 01, 2023- July 31, 2023.
 - Contact: claire_hightower@brown.edu to schedule.
- If you have any questions or comments, please contact Marianne Dean.
 - Email: Marianne.Dean@flhealth.gov
 - Phone: 727-568-8193
- Questions:
 - Are the Pinellas County Schools keeping Narcan?
 - Pinellas County Schools have not brought in Narcan yet, but those conversations are continuing.
 - Some School Resource Officers do carry Narcan, but it is not at all schools.
 - Does Narcan deteriorate if it is left in a car?
 - AMMENDED NOTE: Naloxone should be stored at room temperature, not to exceed 104F or drop below freezing (if frozen it will NOT spray). Naloxone may lose potency when exposed to these temperatures but may still have efficacy in case of emergency. Best practice to is keep naloxone within recommended storage temperatures at all available opportunities. While in-vehicle storage is not ideal especially in the Florida heat, it is likely that naloxone will still have some efficacy in the event of an emergency. Go to: <https://www.narcan.com/frequently-asked-questions/> for more info.
 - If you have expired naloxone, Dan Zsido will take it. He uses the expired naloxone for demonstration purposes during his Narcan administration training so individuals can see what it looks like.

- What is the data saying about overdoses occurring in schools? Are any schools being affected in particular?
 - The Department of Health does not have access to that data and there is no reporting mechanism.
 - Chris Jordan from Pinellas County EMS could potentially see that a call is being responded to on a school property.
 - Schools are required to create an incident report, but there are no specific details in the reports.

COSSUP/ FR-CARA/ Other Human Service Programs: Joshua Barnett, PhD, MHS, MA; PCHS

- Comprehensive Opioid, Stimulant and Substance Use Program (COSSUP):
 - Changed its name from COSSAP to COSSUP to be referring to substance “use” instead of “abuse”.
 - The program is operated out of the US Department of Justice.
 - Quick Response Teams (QRT):
 - 331 individuals have accepted a referral to Operation PAR from EMS (some of the numbers may be duplicates).
 - This program gives an opportunity to EMS to talk to individuals that they are responding to for an overdose about linkage to treatment and recovery opportunities.
 - In total 18% of individuals that Operation PAR has connected with have engaged in formal substance use treatment services.
 - In the most recent quarter, 27% of individuals that Operation PAR has spoken to following EMS referral have sought out formal treatment services.
 - Overdose Fatality Review (OFR):
 - Public Health approach to look at decedents from a qualitative perspective to understand what happened with their interactions with the system beyond the Medical Examiner’s Office data.
 - First meeting was held on January 31, 2023, to discuss the structure of the OFR.
 - The first OFR was conducted on February 24, 2023.
 - There have been conversations with the recovery organizations to speak about this process and invite those who are in all different stages of recovery to be a part of the process.
 - Reviewed cases using redacted identifiers on March 21, 2023.
 - The second OFR is scheduled to take place on April 21, 2023.
 - The cases are currently being selected.
 - The OFR allows the time to look at data regarding 911 calls, EMS response, social service engagement and even social media in some cases.
 - An open meeting will be scheduled on April 25, 2023, 8:30 AM- 10 AM.

- Information that has been pulled together collectively will be presented without identifiers.
 - Looking for feedback from those in recovery and treatment organizations to help and provide better insights as to what the county could be doing to prevent future overdose deaths.
- First Responders-Comprehensive Addiction and Recovery Act (FR-CARA):
 - SAMHSA funded QRT.
 - FR-CARA has been operating for 120 days and have had 223 referrals.
 - 9% of the individuals have been getting into treatment.
 - This program helps identify access gaps.
 - Workforce shortages are compromising access.
 - Dan Zsido has provided naloxone trainings to over 100 individuals since the program has started.
 - The Coordinated Access Model (CAM) will be ready to launch soon.
 - A resource for people to call if they are seeking substance use treatment services but it is not a crisis line.
 - An individual can call to be connected with a clinician. Then clinician will gather necessary information and book an appointment for formal treatment, assessment, and referral.
- SIP Group:
 - Data group that has been working closely with USF for opioid related questions.
 - The SIP Group is ready to assist on any subcommittees to work on the strategies that have been identified.
- There will be more updates provided by the director, Karen Yatchum on April 5, 2023, at 1:30 pm to the Opioid Abatement Board as well as on April 6, 2023, to the County Commissioners.
 - The presentation will give an overview of all the work that the county has been doing in this space with a data-oriented discussion.

Questions:

- Hospitals seem to be unaware of the changes in the hospital licensing law which requires them to have a policy for preventing unintentional drug overdoses. How much of the hospitals are staffing or including some type of Emergency Department (ED) diversion program?
 - Pinellas MATTERS is an ED referral and linkage to treatment program. There is a physician that is embedded in Bayfront and is linked with a certified addiction professional as well as a peer support staff.
 - The county has continued to have conversations around this model to help move it into being the standard of care.
 - BayCare has had peers in the emergency room for 3 years and is working on training their peers in the electronic medical records to have better communication with the physicians.

- A recent change is the ending of the X waiver for physicians. All physicians can prescribe buprenorphine without specialized training.
- Starting in June 2023 all physicians will be required to have 6 or 8 hours of substance use disorder training regarding MOUD.

Naloxone Modeling Update: Wouter Vermeer, PhD; Northwestern University

- Community and Modeling Approaches to Support Decision Making in Pinellas County:
 - Past presentations had focused on modeling the impact of various stand-alone interventions. Today, Dr. Vermeer will be presenting on their explorations of a more systemic set of interventions.
 - Previously explored interventions had been explored individually:
 - Increasing Narcan supply through various means.
 - Red Boxes and increased supply for treatment providers.
 - Reducing the use in isolation.
 - Increasing treatment capacity.
 - Leveraging waiver physicians for treatment.
 - Each intervention has the potential to save lives, found only moderate impact in terms of reducing OUD related deaths.
 - Exploring what kind of impact there is with a systemic approach.
 - Combining interventions yields a much higher impact on reducing opioid related deaths.
 - The effects of combining interventions seems to stack not to reinforce each other and they are more additive not multiplicative impact.
 - In the coming months, Dr. Vermeer hopes to talk with the PCOTF about what realistic interventions are, intervention settings and intervention amounts that could show what is realizable in terms of reducing OUD deaths.
- If you have any questions or comments, please contact the Northwestern and USF team.
 - Hendricks Brown: Hendricks.brown@northwestern.edu
 - Wouter Vermeer: Wouter.Vermeer@northwestern.edu
 - Kimberly Johnson: kjohnson33@usf.edu
 - Holly Hills: hills@usf.edu

Syringe Service Program Update: Amanda Bonham-Lovett, MPH, LMSW; IDEA Exchange Pinellas

- Officially opened on February 22, 2023.
- Collected and disposed of 1,363 used syringes and provided 785 new syringes.
- Provided 320 Narcan kits at their site as well as outreach in the community.
- All 14 enrolled participants have received:
 - On site counseling.
 - Education.
 - Infectious disease prevention.
 - Basic wound care and prevention.
 - Safe sex supplies.

- Linkage to social services.
- Every Monday there is the vaccine ambassador program on site in partnership with DOH, they provide 8 different vaccinations for adults as well as a \$20.00 gift certificate.
 - There has been an estimated 30 community members that have received vaccines.
- IDEA Exchange Pinellas has been able to link clients with MAT services and the Bayside clinic.
 - There have been clients with xylazine wounds that are difficult to treat, and IDEA Exchange Pinellas does provide basic wound care. The client was enrolled in the county health program, they were then referred to Bayside Health Clinic for further care.
- Operation PAR bot is on site if someone does want to access treatment or services. It is user friendly.
- Linking individuals to Love the Golden Rule for hepatitis C and HIV treatment.
- Focusing on outreach as they do not have a mobile unit, which is a barrier, but they are providing bus passes to individuals to have easier access with getting to the clinic.
- The goal is harm reduction and to make everyone safer in the community.

Questions:

- Are you finding any specific barriers that anyone could be helping you with?
 - Bus passes to get participants to the location and to please continue spreading the word.
 - The Blue Card Program provides monthly unlimited bus passes with that program for \$6.
 - There is a taxi program for the TB clients at the DOH to get them to the hospital. Bus passes can take an extensive amount of time to get where you need to go.
- Regarding not using in isolation, what can we do and how can we apply that knowledge?
 - Continue spreading education through the messaging especially while being out in the community. There is a hotline, Never Use Alone (1-800-484-3731). This hotline allows for an individual to call while using to ensure that they receive help in the case of an emergency. They will ask for your location, but nothing else and will send EMS to your location if you do not respond in a certain time.

Gap Analysis Survey:

- Marianne Dean has sent a survey to the members of the PCOTF in February 2023, to formulate a gap analysis for where we need to go and where we need to drive efforts moving forward with abatement funding coming our way.
 - The data was collected on March 2, 2023.
- There were 60 respondents out of 215 Task Force members (28% response).
 - This is an increase in response rate in comparison to 2020.
 - Marianne encourages people to respond to ensure everyone's voice is heard and recognized.

- From the responses, there was a good snapshot of where we need to go, but more information is still needed.
- The priority areas seen on the survey, were from the Florida Opioid Allocation Statewide Agreement.
 - Exhibits A and B is where we got the information for best practices.
- Gap Analysis Survey Respondent Information:
 - Two of the answers are missing from the bar graph. Anyone that responded “Other” or “I don’t know”, was removed. There is a continued focus on where people agree that we are not meeting an objective.
 - The “MAT in Jails” section had the largest response of “Not meeting”. This is a gap in which could use a lot more attention, more data driven interventions and innovation.
 - This survey has given the PCOTF a good idea of where we need to start driving our conversations and goals as we move forward in the strategic plan.
 - We need to have conversations within the task force to communicate needs and tease out the “I don’t know” or “Other” answers.
- Questions:
 - The “Prevention Supports” section looks low in the numbers. Was there a lot of other answers?
 - There was a lot of expressed information that was more specific to each section when people chose the “Other” option. The responses would need to be looked at again and categorized accordingly, because it was good information.
 - There are relatively high numbers of "I don't know" or "other" that a big gap exists in awareness and visibility, which is an issue in and of itself.

Open Forum:

- We need to discuss the gaps and what we have that works in our community. Where do we improve from here?
 - If these are the priorities that we should be focusing on, and it appears that we need improvement across the board, should we create subcommittees to start working on a plan?
 - For each of these sections, we must be able to explain what is being done, what has been doing well and further tease out the gap to be able to talk about other evidence-based things that we would be able to improve upon. The abatement money is going to have different pots that it will be going to so we must think about how to move forward without being duplicative.
 - This is a good opportunity for Task Force members to volunteer for a work group to talk about what is being done and what will be best moving forward.
 - Each section could be a subcommittee with a chair to lead the group. It would be beneficial to have people that are familiar with the type of work to be a chair of a subcommittee. We need the experts of the fields to push what the needs are. We need to build the subcommittees for action.

- JWB and the Healthy Start Coalition would be great for Maternal & Child Health because they work in that space and have a lot of knowledge.
 - The subcommittees would be able to bring recommendations, actionable items, test things and increase their membership within the subcommittees. There is a lot of work that needs to be done.
 - Human Services is supportive of the subcommittees in any way they can help with structure, strategic planning, and any other ways they can assist.
 - Groups could use Schedule B and talk about each one of the points and what is being done while they are in their subcommittees.
- Human Services is going to have a focus on increasing their Pinellas MATTERS program with the abatement money to make it a standard of care in Pinellas County when you go to the hospital. There is opportunity with the regional funds, we need to be presenting the right information to the board so they can make decisions.
- USF has also provided data analysis in some of these areas. To facilitate our movement so we don't get "stuck" in data collection/analysis. It's done and ready for use.
- Marianne Dean will be approaching the Task Force members via email to see who is available to volunteer and take lead of one of the subcommittees and to see who is actively engaged and who can interact with us to provide this information. There are a lot of great things happening in Pinellas County, but we are unaware of everything that everyone does for the cause. We need to work now because the numbers only continue to get worse, and we need to do something about it.
- It is important to include the priorities and recommendations to OAFAB to understand how they can respond to the opioid settlement funding. Karen Yatchum will be presenting on the programs and actions that Human Services is doing. Dr. Vermeer's information and research should be part of the PCOTF presentation to better illustrate that it is much more than just Narcan distribution, it's not using alone, education, and outpatient treatment. All the combined efforts will move the needle. The information will be valuable when they are coming up with strategies and making priorities for funding. This information is not part of the Human Services presentation and Karen does not want this information to get lost with the decision makers.
 - Marianne Dean stated that DOH will be sure to include the information in their presentation.
 - The abatement funding is supposed to be used for new programs and enhancing what we have already, not to supplant anything we are already doing. This is a huge opportunity to this county, and it is needed.
- St. Petersburg College has started a community work group, the Recovery Round Table. This meeting takes place monthly. The Recovery Round Table is working in conjunction with the PCOTF to develop some initiatives that they have identified.
 - The next meeting will take place April 10, 2023, at 2 PM- 4 PM at the SPC Epicenter in Clearwater.

- The following meeting will be on May 22, 2023, where Doug Simon will be presenting and there will be an opportunity to be able to speak with him regarding the CORE program.
 - These meetings would assist the PCOTF because we should not duplicate these efforts on something that has already been identified.
- Is there anything new that you would like SIP to analyze or the Northwestern team to model that they have not already done that would be helpful? Please let Kimberly Johnson know.
 - That service will be of great use, and they will be in contact. The meeting is on April 5, 2023, at 1:30 PM.
- Dr. Michael Sheehan announced the premiere of a movie called One Second at a Time: Battling the Monster of Addiction. It will be at the Tampa Theater on Monday, March 27, 2023, at 7:30 pm.
- Marianne Dean will be probing the Task Force members and will be sending Schedule B. She is looking to have the Task Force members look at Schedule B and rank the items from what is most important to the least for you and the organization. As well as information on daily operations and programs to be more knowledgeable as well as being able to send individuals to the right place if need be.
- Dan Zsido's naloxone training is more than just a Narcan administration training. It is also a training on drug information, to give a good understanding of why you would use Narcan, and to meet individuals where they are.
 - The largest hurdle is liability in the business sense.
 - There is a new kit that has gloves, a barrier mask, and a button to press to hear how to use naloxone in the case of an emergency.
- As a part of the Spring Break initiative with handing out Narcan on the beaches of Pinellas County, Amanda Bonham-Lovett states that a lot of the businesses were very interested in having naloxone but are unaware of how to get it and that they are worried about liability but were very grateful to have this initiative taking place and educating the public.
 - Expanding the initiative would be great, but no one is responsible for providing naloxone to the business and that is something to work on.
 - 2 years ago, there was a very different response and businesses seem much more open to the conversation now.

Next meeting: June 15, 2023