#### WELCOME TO THE PINELLAS COUNTY OPIOID TASK FORCE MEETING WEBINAR

#### WE WILL BEGIN SHORTLY.



# WELCOME to our newest members and long-term partners!

#### Recommended Goals to COMBAT THE OPIOID EPIDEMIC Opioid TASK FORCE



Health care providers, law enforcement, schools, communities and families play a key role in eliminating opioid-related deaths, injuries and misuse in Pinellas County.

Raise awareness on the dangers of opioids by coordinating with schools, health care providers, pregnant women, etc.



Reduce opioid deaths by increasing the availability of life saving treatment to those who are dependent on opioids, their families and their friends.



Connect those in need to available, effective treatment and addiction therapy.



Decrease the supply of opioids by establishing a community wide approach and identifying areas at highest risk.



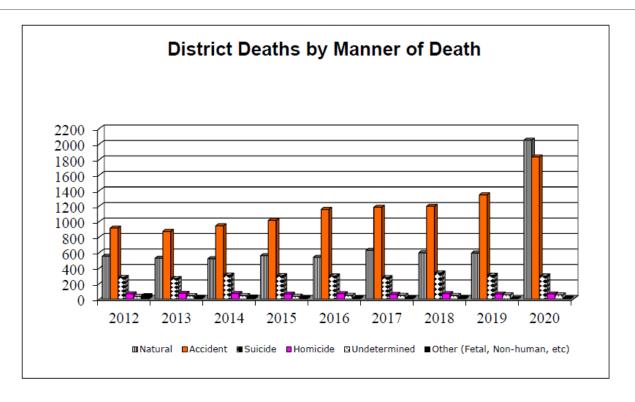
Improve information sharing efforts within our community to better examine trends of opioid misuse.



AGENDA					
Welcome & Introductions	Marianne Dean Dept. of Health – Pinellas County				
Trends and Data Review	Reta Newman Medical Examiner's Office				
Trends and Data Review	Craig Queen Pinellas County EMS & Fire Administration				
Review from Northwestern University	Wouter Vermeer; C. Hendricks Brown; Holly Hills; Kim Johnson				
COSSAP / OFR	Joshua Barnett; PCHS				
SIP / USF Update	Meghan Westbrook; PCHS Charles Dion, Mary Murrin, Kavitha G.; USF				
EIS Update	Mo Alak; FL-EIS Fellow				
Overdose Data to Action Update	Marianne Dean; DOH-Pinellas				
Open Forum	All Participants – We encourage hearing your ideas and cues to action.				
Next Meeting: Sept. 16th, 2021 via Microsoft Teams					

#### Drug Related Deaths & Trends Update

## 2020 ME Annual Report

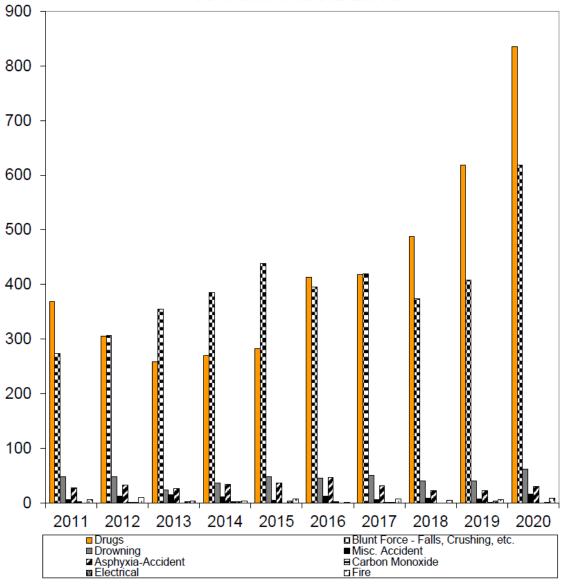


Non-natural deaths increased by 27% in 2020

 2011
 2012
 2013
 2014
 2015
 2016
 2017
 2018
 2019
 2020

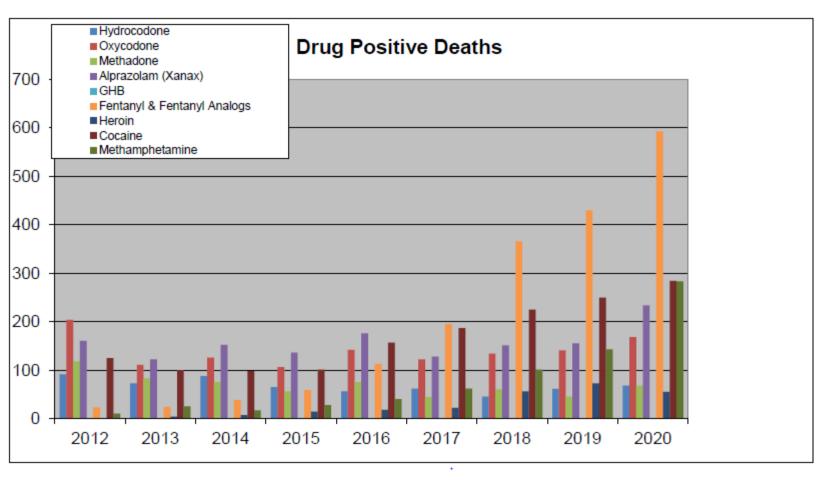
 TOTAL VIOLENT DEATHS
 1,359
 1,296
 1,253
 1,369
 1,414
 1,569
 1,568
 1,648
 1,767
 2,247

#### **NON-MVA ACCIDENTS**



Excluding MVA – Accidental Deaths increased by 42% In 2020

Drug Related Accidental Deaths increased by 35 % In 2020



	2012	2013	2014	2015	2016	2017	2018	2019	2020
Hydrocodone	91	73	88	65	56	62	45	61	68
Oxycodone	204	111	126	106	142	122	134	141	168
Methadone	118	83	75	56	75	44	60	45	68
Alprazolam (Xanax)	160	122	152	136	176	128	151	155	234
GHB	0	1	0	0	0	0	1	0	0
Fentanyl & Fentanyl Analogs	23	24	38	59	113	195	366	430	593
Heroin	1	4	7	14	18	22	56	73	55
Methamphetamine	10	25	17	28	40	62	101	143	283
Cocaine	125	100	98	101	157	187	225	250	284

# Fentanyl/Fentanyl Analog Related Deaths 2018-2020

Year County	2018	2019	2020
Pinellas	164	245	372
Pasco	77	101	199
District Total	241	346	571

Pinellas:

52% increase in fentanyl related deaths between 2019 and 2020

District:

65% increase in fentanyl related deaths between 2019 and 2020

## Current Fentanyl Submissions

## Fentanyl Fluorofentanyl

#### Benzimidazole Opioids

#### Newest trend in opioids

- Highly potent
- 39 analogs have been developed/proposed

#### Etonitazene – Schedule I in Florida

- Identified to date in Pinellas County:
  - Metonitazene
  - Etodesnitazene

Not specially scheduled - Potential analogs of etonitazene

Reported: metonitazene (substantially similar to etonitazene, CI)

#### Etonitazene

Report to be 1000X more powerful than morphine

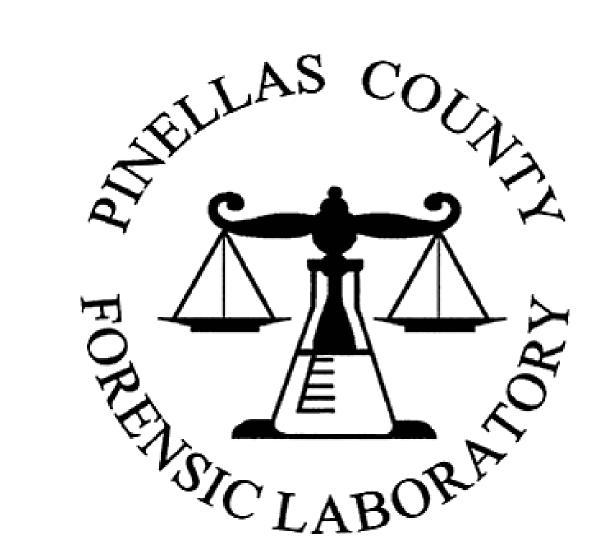
https://pubs.acs.org/doi/10.1021/acschemneuro.1c00037

Related to Brorphine class (benzimidazoles vs benzimidazolones)

Analogs are not currently scheduled under any class scheduling

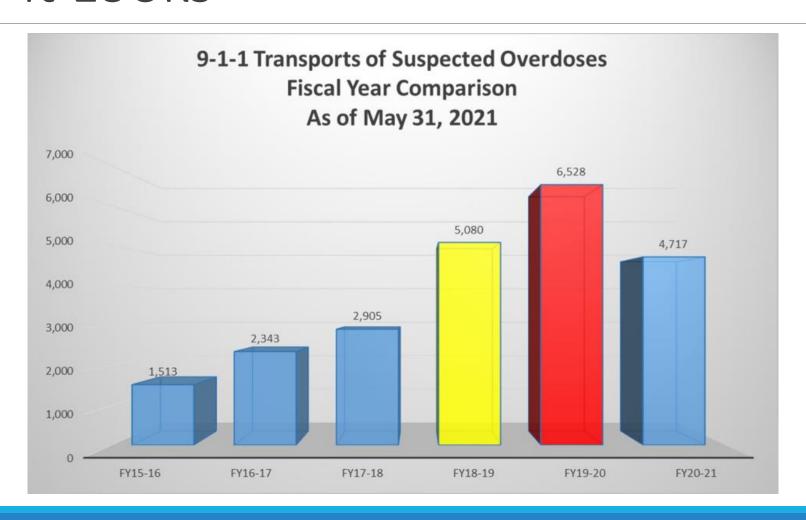
Chemical structure allow for a multitude of potential analogs

Potency of analogs unknown

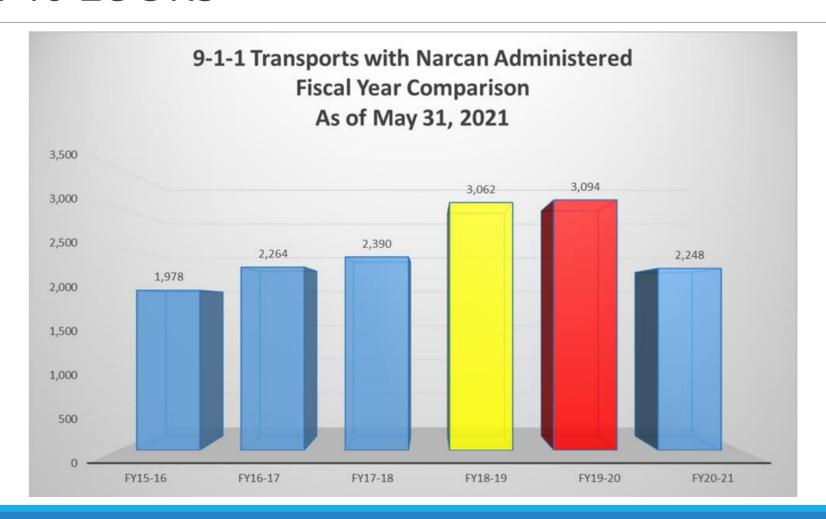


#### **EMS** Review

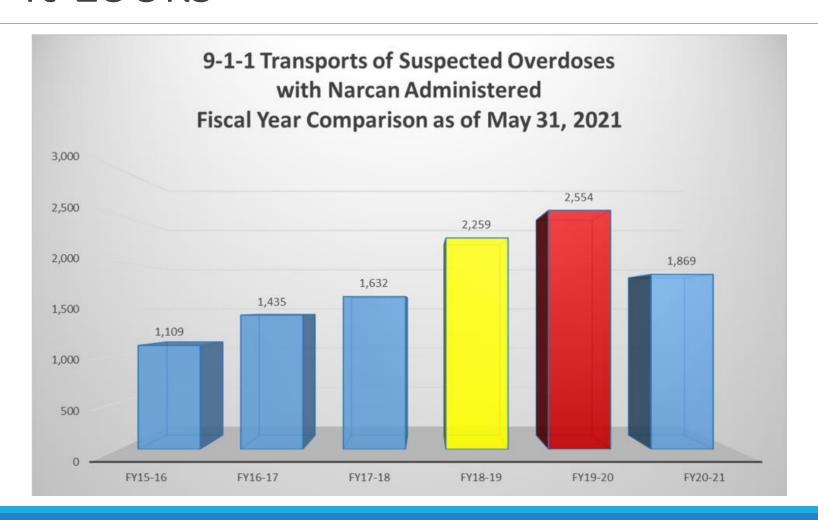
#### How it Looks



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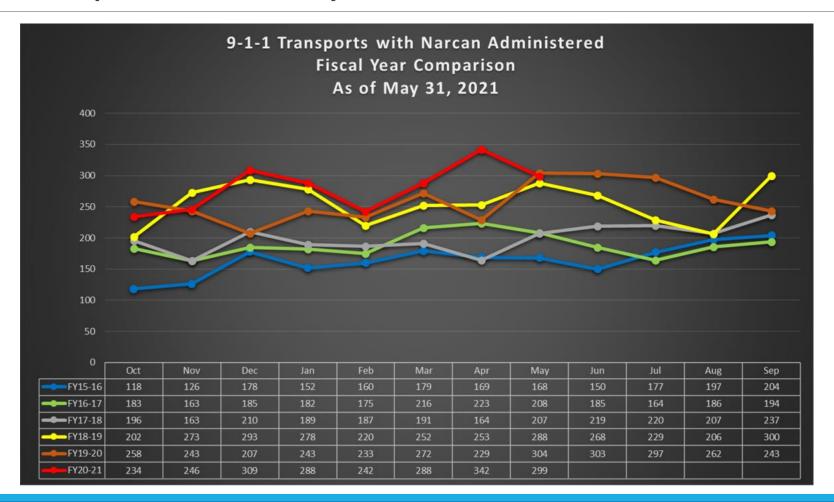
#### How it Looks



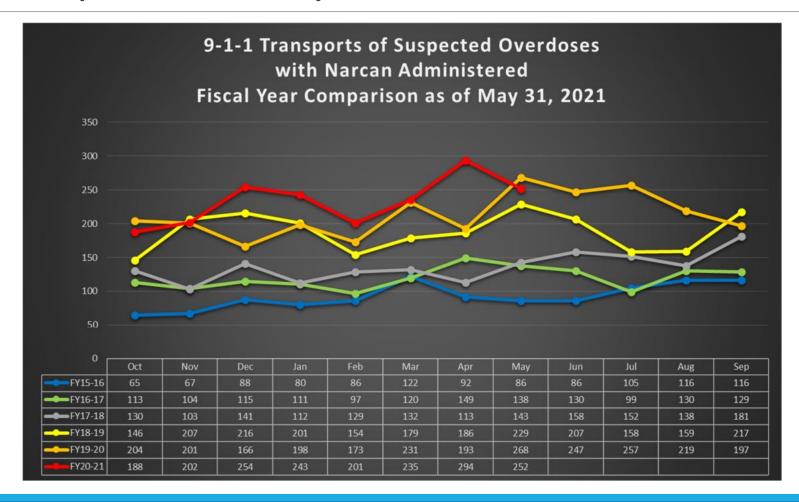
## FY Comparison by Month



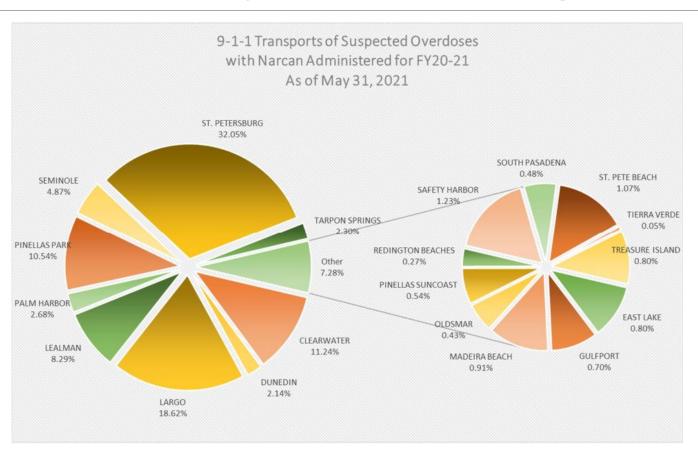
## FY Comparison by Month

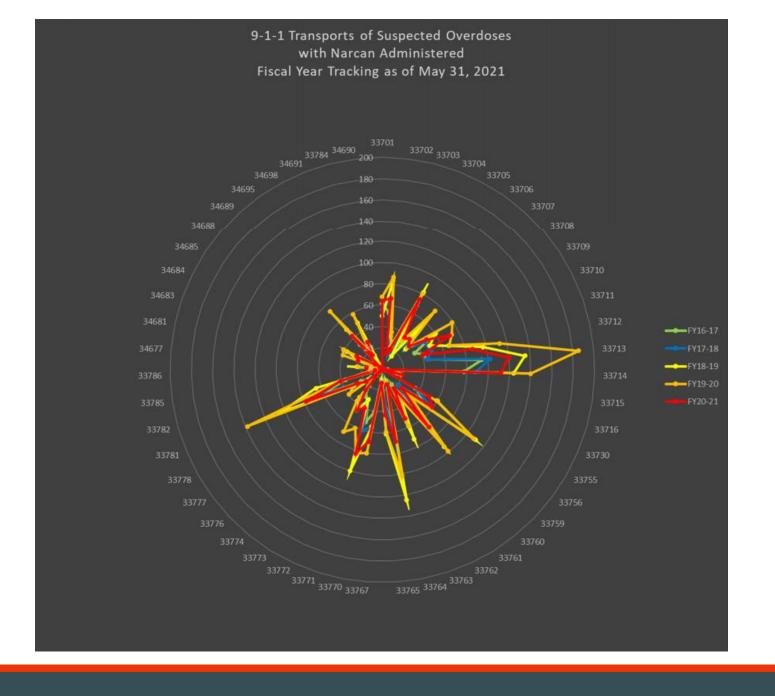


## FY Comparison by Month



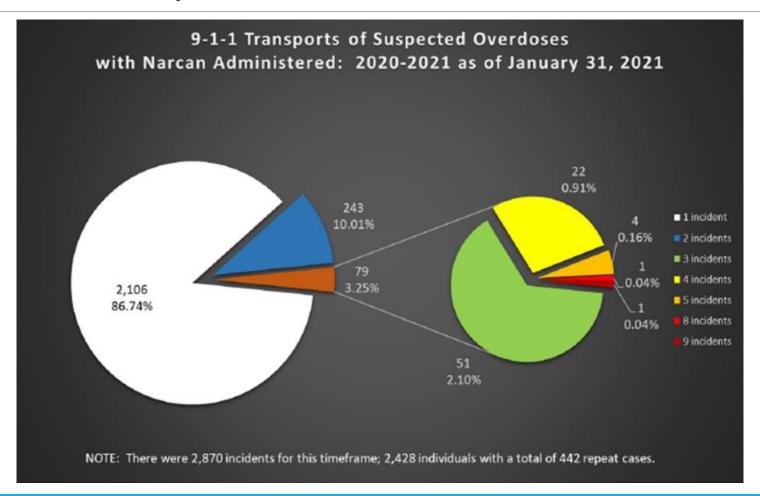
## Where are Transports Coming From?



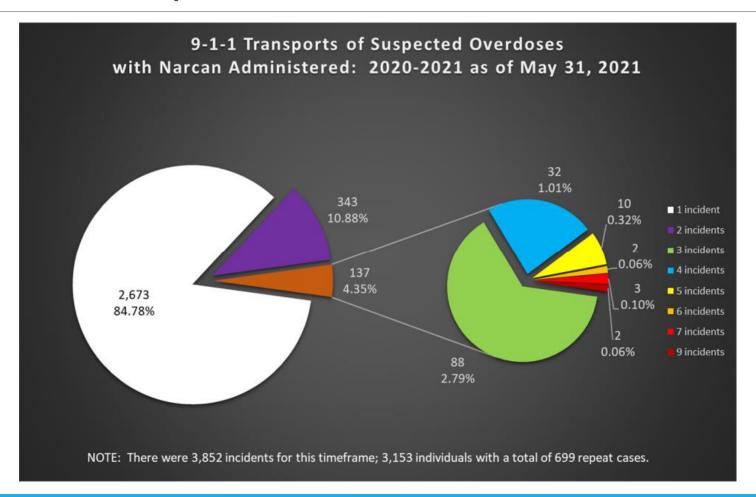


# Where are Transports Coming From?

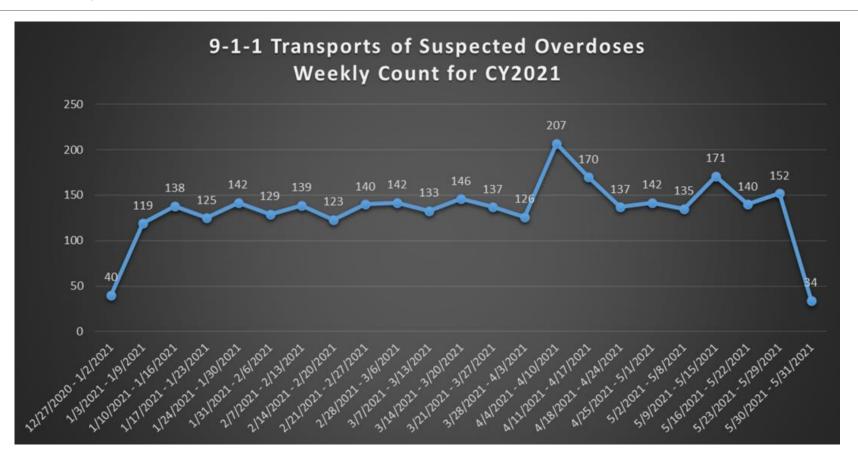
## Repeat Comparisons



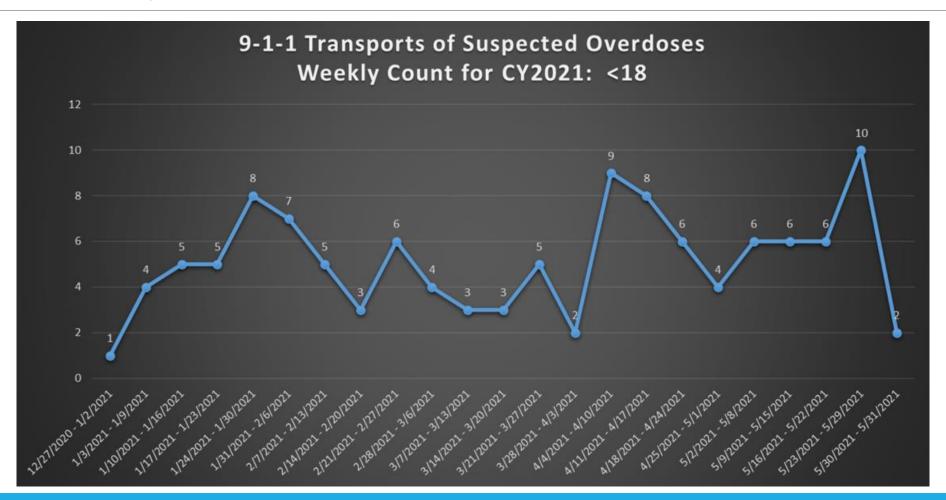
#### Repeat Comparisons



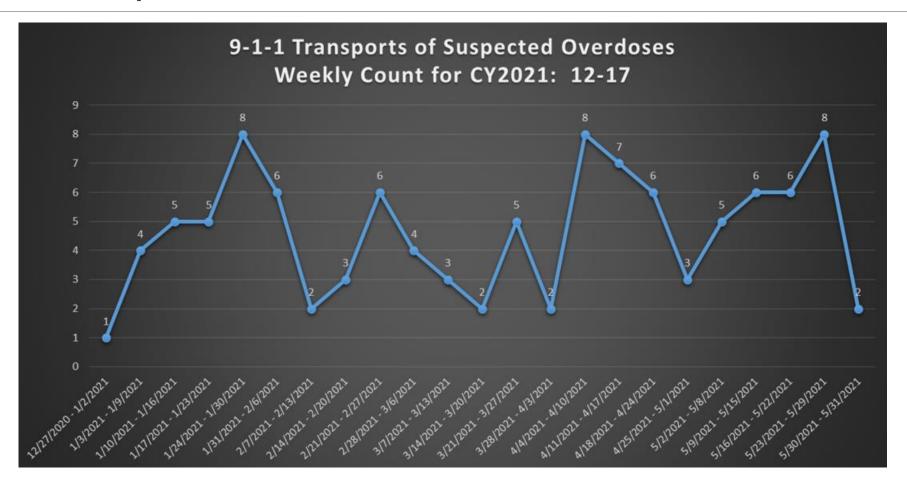
## CY21 by the Week



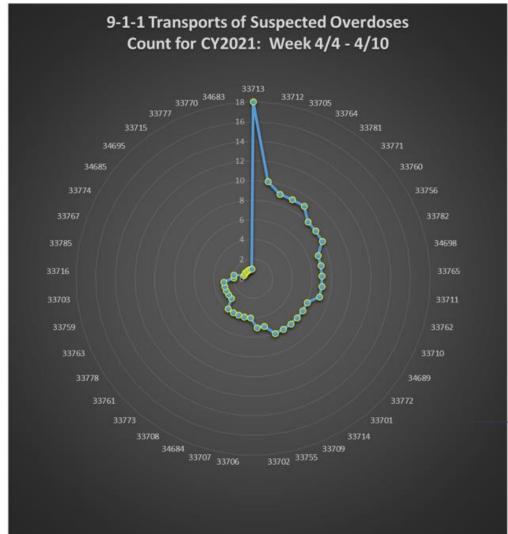
## CY21 by the Week



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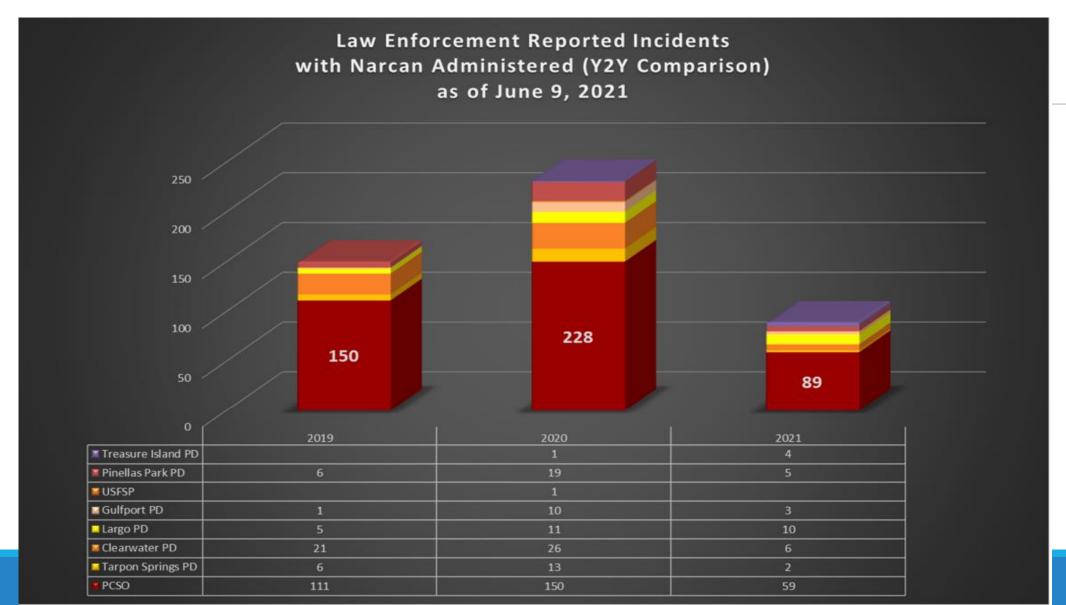




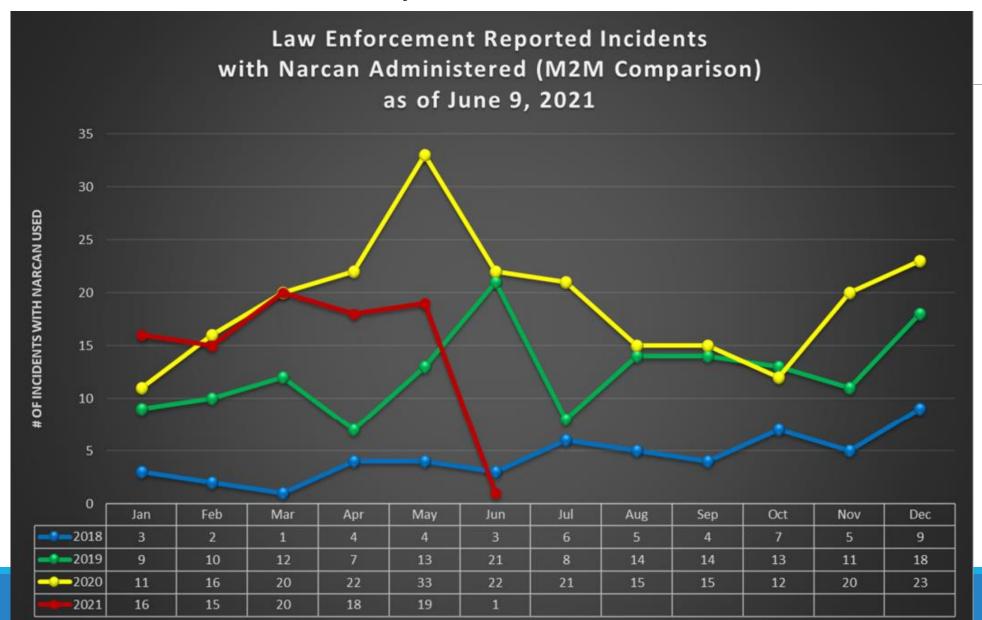


## Focused Zip Code Radar

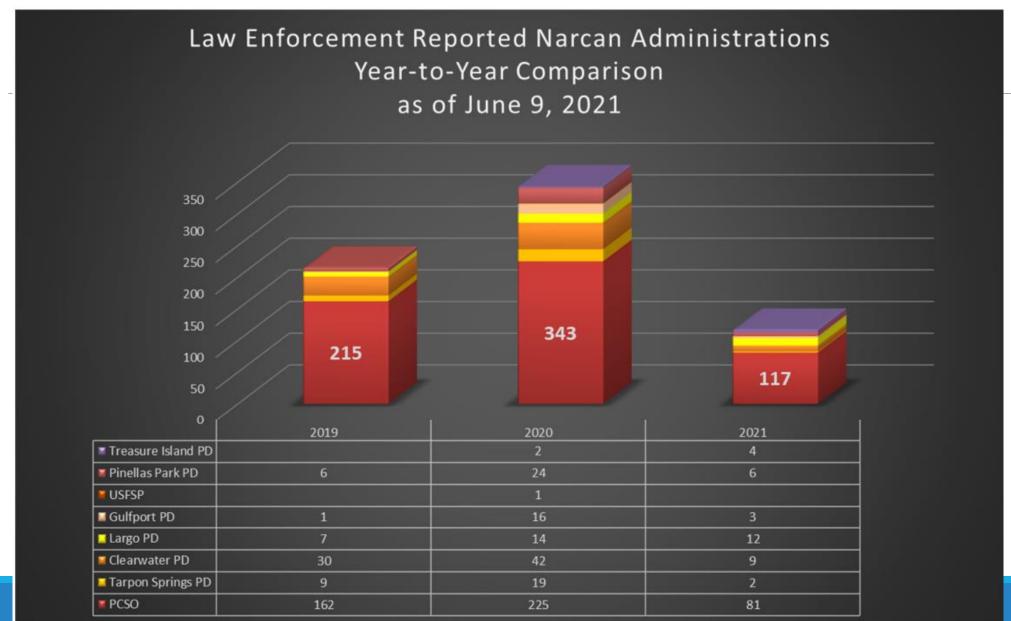
#### Law Enforcement in Action - # of Incidents



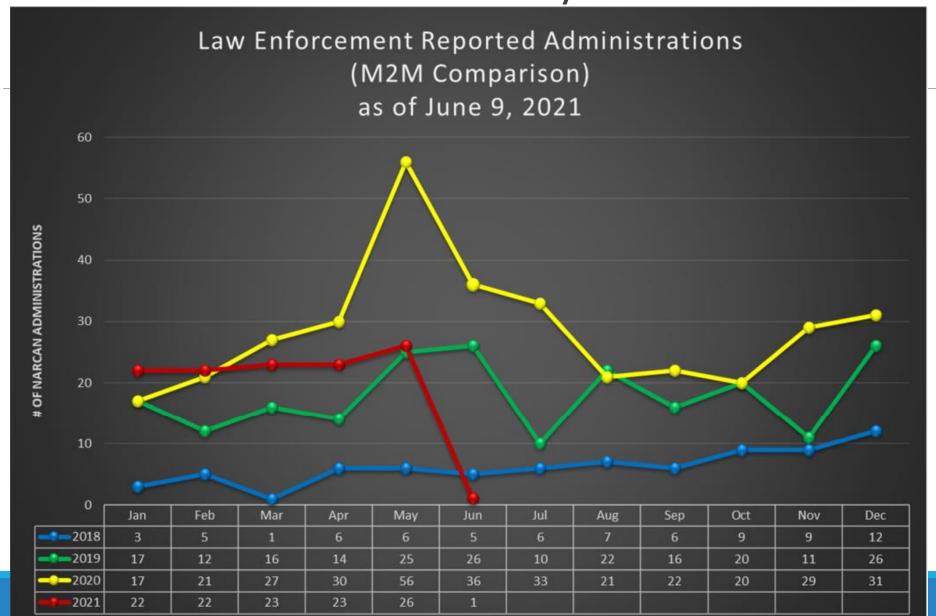
## LEO incidents by Month



#### LEO Administrations



### LEO Administrations by Month



# Review from Northwestern University

NORTHWESTERN U – HENDRICKS BROWN, WOUTER VERMEER

USF- KIM JOHNSON, HOLLY HILLS, CHARLES DION

OPERATION PAR — DIANNE CLARKE, JIM MILLER, JONATHAN ESSENBERG, ANGEL TOMLIN

WASHINGTON U - REBECCA LENGNICK-HALL Community and Modeling Approaches to Support Decision Making in Pinellas County

#### Outline

Update on Status of model building – Wouter Vermeer Update on Expert Interviews – Holly Hills

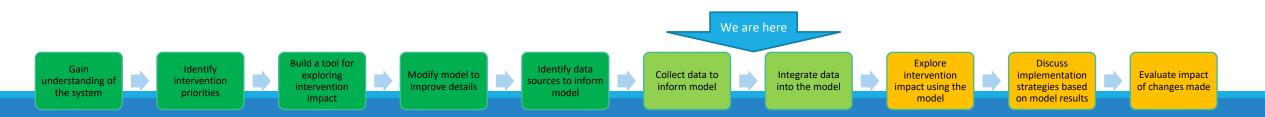
#### Where we are in the modeling process:

#### We have:

- ✓ Gained a comprehensive understanding of the system dynamics through our ongoing conversations with stakeholders
- ✓ Identified priorities for intervention in this system by conducting Stakeholder Interviews
- ✓ Built a simple model to explore the prioritized intervention, by building a Narcan distribution model

We are currently extending the simple model to cover the complete system and be informed by data.

- ✓ We have identified the critical modules that make up the system (see next slide).
- ✓ We have identified the data sources that can inform these modules.
- We are actively collecting and incorporating this data into the model

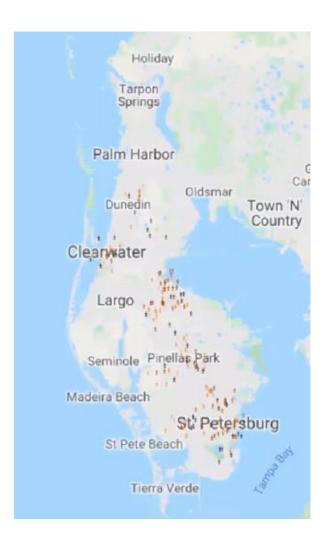


#### The model in overview

#### We have identified 8 core modules:

- 1. **Demographics module:** determining the characteristics and spatial distribution of the people in the model
- 2. Social interaction module: determining how the people interact with each other and their environment
- Usage module: determining the acquisition (supply/demand) and consumption of drugs (use preferences)
- 4. **OD module**: determining the risk of OD during consumption (mortality causes)
- 5. Narcan module: determining the chance of reversal using Narcan
- 6. Care/treatment module: determining the opioid related care provided
- 7. Jail module: determining the interactions with the jail system among the people in the model
- 8. **Intervention module:** specifying a set of interventions of which we want to explore the impact

#### Are we missing anything?



#### Qualitative Analysis of Stakeholder Interviews: Examination of Pandemic Impact and Rapid Implementation of Policy and Practice Change

- → Between November 16, 2020 and January 11, 2021, structured interviews were conducted with 20 community stakeholders
- → 35-55 minute structured interviews were recorded and transcribed
- → Dr. Hills / Dr. Lengnick-Hall independently reviewed and evaluated themes associated with responses
- → Focus of this report follows up on previous preliminary report from March 2021

# Change to service delivery for persons with opioid use disorders, during the pandemic?

- → Transferring services to a telehealth format (reported by 66% of respondents) ("service delivery had to migrate to other means"; making a "a total switch to telehealth was very impactful")
- → Moving to 'take-home' dosing (by 45% of interviewees) (".....the fact that we're able to provide extended take-home medication to patients..."

→ The loss of face-to-face contact with clinicians (a conversation..."that's private, could break down barriers more, so I think significantly losing touch with people, one-on-one, has been a challenge")

# Challenges in attempting to implement rapid practice change?

- → Training staff / clients re the use of technology, or new treatment guidelines
- → Access to needed technology / equipment / private space to engage in telehealth
- → Acclimating to delivering services, conducting meetings over Zoom

#### **Potential for Sustainability?**

- → Continued use of telehealth, continuation of 'accelerated take-home' doses
- → Both were considered largely positive changes, as expressed by respondents, increasing access to care and reducing burden
- →Continued implementation relies on endorsement and collaboration with funders, policy-makers, oversight administrators

#### Your Questions, Comments, and Guidance

#### **Our Contacts**

Hendricks Brown <u>Hendricks.brown@northwestern.edu</u>

Wouter Vermeer <u>Wouter.Vermeer@northwestern.edu</u>

Kim Johnson <u>kjohnson33@usf.edu</u>

Holly Hills <u>hills@usf.edu</u>

Charles Dion <u>cdion@usf.edu</u>

Rebecca Lengnick-Hall <u>rlengnick-hall@wustl.edu</u>

#### COSSAP

### SIP White Papers

Overdose Data to Action

### Deliverables Update

- → Welcoming a new face June 2021! We are excited to bring aboard a new OD2A team member!
- → 2021 Opioid Toolkits are printed and in transit.
- → 2,500 ordered if you are interested in toolkits, please reach out to marianne.dean@flhealth.gov
- → Drawstring backpacks are available as well.

# Deliverables Update

- → Office of Overdose Prevention is now back in office full time after serving alongside COVID-19 vaccination efforts from Jan-May 2021.
- → OD2A is engaged in outreach activities which will be steadily picking up.

# Deliverables Update

- → The APP is currently undergoing legal oversight to ensure that any functions and options are safe, secure, and that the partnering APP builder adheres to strict terms and conditions regarding data collection or sharing.
- → ETA is TBD as these topics must be thoroughly addressed.
- → Efforts to coordinate the increase of opportunities for MAT remain a priority and have been steadily increasing.

# Narcan® Emergency Kit Program

- → The Narcan® Emergency Kit is a small metal box that can either be kept on a shelf or mounted on a wall for easy access to your staff.
- → Restrictions may apply (not for residential use).
- → Contact <u>Kelci.Tarascio@flhealth.gov</u> to determine if your site qualifies for these kits.



### We Welcome Questions!

This slide concludes the presenter's portion.

- We welcome questions about any of the topics you heard today.
- Please direct questions to Marianne @ marianne.dean@flhealth.gov.
- A copy of this presentation, including meeting notes, will be provided to all members attending today.