COUNTY CASE STUDIES
IN BATTLING NEW YORK’S HEROIN AND OPIOID EPIDEMIC
Overview

Heroin and opioid use is a major public health and safety crisis around the world. A recent report from the United Nations Office of Drugs and Crimes estimates that in 2013 there were 187,100 drug related deaths among 15-64 year olds. There were 28,647 deaths due to prescription opioid overdoses in 2014, according to the U.S. Drug Enforcement Administration. And right here in New York, there were 2,028 reported deaths in 2014, up from 1,601 in 2013.

Opioid and heroin abuse has no demographic, economic, or geographic limitations. It affects individuals of every age, race, and gender. The increased availability, lower price, and increased purity of heroin in the U.S. have been identified as possible contributors to rising rates of heroin use and overdoses. A one-dose bag of heroin costs $5-$10 and is cheaper and more accessible than highly controlled synthetic opiates like oxycontin or hydrocodone.

Statewide Epidemic

Heroin and opiates are now the leading cause of accidental death in New York State, outnumbering homicides. Between 2005-2014, the state documented a 115% increase in heroin treatment admissions in upstate New York and a 116% increase on Long Island. In all, approximately 1.4 million New Yorkers suffer from a substance abuse disorder.

The connection between prescription drugs and heroin stems from the abuse of prescription opioid pain killers, and is directly related to heroin’s growth in popularity with young people: these pills are the doorway to heroin abuse. In order to combat this growing epidemic, we must improve prevention, increase access to treatment, expand recovery options, and expand resources for law enforcement.
COUNTY CASE STUDIES

Counties across the State are creating programs to combat the growing use and abuse of heroin and opioids in their communities. The following programs are examples of the approaches that counties are taking to tackle opioid abuse and addiction.

Broome County

In 2014, County Executive Debra Preston created the Broome Opioid Abuse Council (BOAC). The BOAC was formed and goals established within the structure of four subcommittees: community education, treatment and prevention, law enforcement, and education of medical professionals. BOAC core and committee membership includes a multidisciplinary team of professionals and leaders from multiple agencies and organizations in the community. They bring their expertise to identify critical priorities for improving services and to assist in the development and implementation of a unified plan. The goals of BOAC are to improve local policy and practice and ensure systems of care are in place to reduce opioid overdoses and prevent abuse.

The BOAC focuses on developing solutions to issues resulting from the increase of drug abuse in the community including the rise of prescription drug and heroin abuse. BOAC seeks to: target factors in the community that place youth at risk for substance abuse; reduce risk factors, and enhance protective factors; increase community collaboration and awareness; and create a healthier, safer community.

Cattaraugus County Response to the Heroin and Opioid Epidemic

Mary O’Leary, LCSW, Director of Community Services

Cattaraugus County Departments of Health and Community Services recognize the impact of opioids on our community. After a public forum in April 2016, the Cattaraugus County Legislature asked the two departments to develop a plan to address the opioid problem, and the Cattaraugus County Heroin/Opioid Task Force was created. More than thirty people, representing addiction services, mental health, health care, law enforcement, the Native American population in our county, parents, and elected officials, attended two meetings to assist in the development of the plan. There has been increasing public interest in the development and outcomes of this initiative as well.

The first Task Force meeting was held May 27, 2016, and focused on defining our county’s understanding of this problem and clarifying what we need to do as a whole to have a positive impact on this crisis. Task Force Committees were assigned as follows: Provider Education, Naloxone Access/Funding, OASAS/Provider, PAARi (Police Assisted Addiction Recovery Initiative), Data Surveillance, and Parent Support. Each committee created a work plan with specific tasks that have been accomplished or that are part of ongoing goals to accomplish. This effort was an example of the amount
of collaboration evident in the participants’ desire to address this serious issue. The committees met during the month of June and reported outcomes during the July 29 meeting of the Task Force.

The following outcomes from the Committee and other meetings demonstrate the county’s commitment to stop this trend.

The Seneca Nation of Indians hosted a roundtable forum on July 12, 2016, with Patricia Zuber-Wilson, OASAS Director, Office of Government Affairs and Grants Management, and Patrick Morrison, OASAS Regional Representative, to discuss the needs of the county. This meeting reflects the commitment of both the county and the Seneca Nation to collaborate on this important issue.

One of our local substance abuse programs, CAReS (Council on Addiction Recovery Services, Inc.), has redesigned its intake process to get patients into treatment faster and at whatever level necessary. We have developed a solution to assist the police agencies (Gowanda, Salamanca and the Sheriff’s Office) through the PAARi project to find inpatient beds in and outside of New York State. Interns now contact inpatient facilities to determine what insurance they accept, to review the facilities’ program guidelines, and to send the information to the substance abuse agencies and the police who are assisting the addicted individual with getting into treatment as quickly as possible.

The Heroin/Opioid Task Force has gathered data on Narcan training and use by first responders and law enforcement (over 860 people were trained in Narcan use and 103 Narcan kits were used in the first six months of 2016). The Task Force plans to forward the data to the State to illustrate how serious the epidemic is in Cattaraugus County. Probation, Law Enforcement, and Social Services are also represented at Task Force meetings and provide data on the opioid impact to their agencies. The Task Force has scheduled training in for medical providers on non-opioid pain management options.
Cayuga County has worked to develop a multi-discipline, multi-organizational response to addiction in our community focusing on the following areas.

**Prevention, Outreach and Education**
An effective Drug Free Coalition with membership across all sectors (business, clergy, law enforcement, providers, parents, youth, schools, health department, and media) developed on-going strategies that target, youth, schools, businesses and the community. Early and ongoing activities include: prescription drop-off, prescriber education and outreach, social norming, community events, local laws on synthetics, pharmacy outreach, public forums and media coverage. The Coalition’s grassroots efforts in planning and implementation were written into a Substance Abuse & Mental Health Services Administration (SAMHSA) Drug Free Communities Grant. The state’s first Heroin Epidemic Action League (HEAL) was formed here by affected families.

**Enhancing and increasing alternate pathways into treatment**
- Expanded access to OASAS clinics;
- Changed staffing pattern in the County Clinic to have social worker/CASACs (Credential in Alcoholism and Substance Abuse Counseling) provide cognitive behavioral therapy in conjunction with Vivitrol treatment as an alternative treatment pathway;
- Added Suboxone providers;
- Began Vivitrol program in the jail with a dual track discharge for primary mental health diagnoses and primary substance use diagnoses;
- Used OASAS Part 820 regulations to redesign residential services to better serve folks in early stages of recovery with stabilization services;
- Began hospital medical detox services and planning a 10 bed in-patient program;
- Participated in planning for regional crisis center serving individuals with substance use disorders seeking immediate services;
- Increased integration of cross-system services so as not to lose individuals served by multiple agencies; and
- Increased NARCAN training opportunities and grant funds to purchase kits.

**Increasing the community’s capacity to respond**
- Embedding a behavioral health specialist in Child Protective Services to better serve families where parents are experiencing substance abuse issues that affect their ability to keep their kids safe;
- Continual recruiting of partners to increase our capacity to mobilize and reach underrepresented members of our community; and
- Identifying and using resources to coordinate and integrate strategies, reduce duplication and send effective messages.
Columbia and Greene Counties Response to the Heroin and Opioid Epidemic

*Michael Cole, LCSW, Director of Community Services, Columbia County, and Margaret Graham, APRN-BC, Nurse Practitioner, Director of Community Services, Greene County*

The Columbia-Greene Controlled Substance Awareness Task Force was formed in 2013 by the local hospital and county Local Governmental Units (LGUs) and Community Service Boards (CSBs). The Task Force is co-chaired by the Directors of Community Services in both counties. We gathered a diverse stakeholder group of concerned community members to address converging dynamics of the inconsistencies in pain management practices and the controlled substance medication prescription (and/or street drug) abuse crisis. We agreed to measure the depth and breadth of the problem, identify collaborative solutions, and collect data to determine the impact of interventions. The task force meets quarterly and the two active work groups (Practice Guidelines and Prevention & Education) meet monthly.

The Practice Guidelines Work Group focuses on the creation of responsible prescribing policies and procedures for individuals working with those who would benefit from acute or chronic pain management or behavioral health treatment requiring consideration for the prescribing of controlled substances. It promotes: use of affordable appropriate non-controlled substance treatment options, controlled substance treatment contracting, regular pain assessments, and “single message” community service coordination models among care segments (emergency department, primary care physician, behavioral health). The Prevention and Education Work Group advocates for adequate evidence-based practice (EBP) abuse prevention services, promotes addiction and recovery education activities for professionals and non-professionals, advocates for medication drop box use expansion, promotes the expansion of needle exchange programs with counseling, and inventories Mediation Assisted Treatment (with counseling) capacity and advocates for a response to the identified un-met need.

Erie County Response to the Heroin and Opioid Epidemic

*Michael Ranney, CRC-R, LMHC, Commissioner of Mental Health*

The Erie County Opioid Epidemic Task Force was initiated by County Executive, Mark Poloncarz, by way of an Executive Order
dated January 19, 2016. He declared the opioid epidemic a public health crisis and appointed the Commissioners of Health and Mental Health to head the Task Force.

Work groups were established and leads were identified as follows:
1. Law Enforcement/Police Addiction and Recovery Initiative; now known as Rapid Evaluation for Appropriate Placement (REAP)
2. Families & Consumers Support & Advocacy
3. Community Education
4. Provider Education & Policy Reform
5. Hospitals/ Emergency Room Project
6. Naloxone Access
7. Treatment Providers

The Task Force meets quarterly and kicked off February 1, 2016. Workgroups meet monthly at a minimum. Erie County has organized community educational forums which have focused on informing the community of the danger surrounding opioid use, prevention, signs, symptoms, stigma and treatment. There continues to be regular memorial activities arranged by the Family Work Group that provides education and support, and often includes a drop off site for unused prescriptions and used needles.

As a result of the Task Force, the need for a central referral hotline was determined. County Executive Poloncarz allocated resources to establish the hotline which started August 1, 2016. This is a 24 hour, 7 days a week hotline that is staffed with trained professionals who provide an assessment and referral to services. The majority have been to outpatient clinics offering same day appointments. As of week two, 265 calls have been handled by the hotline. The majority of callers are persons with an addiction asking for help. For situations that may warrant detoxification or inpatient services, the New York State Office of Alcoholism and Substance Abuse (OASAS) funded 2 assessment counselors who work in tandem with the hotline.

Also on August 1st we kicked off the Rapid Evaluation for Appropriate Placement program (REAP). This initiative is led by law enforcement where a person struggling with addiction is able to go to a local police precinct and ask for help. This is done with the assistance of volunteers known as “Angels” who are deployed by the hotline after notification by police. The hotline then connects them with the appropriate service or the assessment counselors depending on the level of the person’s need.

Additionally, the Health Department provides Narcan training on an ongoing basis across the county. Erie County was one of the first counties in New York State to initiate widespread deployment of naloxone to first responders and
the general public. Since 2014 over 10,000 county residents have been trained and equipped with naloxone. The Health Commissioner is the lead for the Provider Work Group and has been advocating for standards around prescribing of opioid medications as well as working on increasing the capacity of Buprenorphine providers. She has been working with primary care providers, addiction specialists and the Department of Mental Health in developing agreements, training and support to expand the pool of providers.

August 1st was also the kickoff of our Critical Peer Response (CPR) Team funded by OASAS. This initiative provides peer services on an on call basis to hospital emergency departments where a person with addiction is receiving medical care following an overdose. The CPR Team also includes a Family Support Navigator to assist family members in getting support and help for their loved ones who may be struggling with addiction. OASAS supports several other initiatives. A Youth Club House is about to open in September. This facility is part of Restoration Society, Inc. and is a collaboration amongst chemical dependency providers, our local community college, and prevention providers. Additionally, OASAS announced an award of $1 million for 25 beds to the WNY area to Horizon Village and $1.75 million for a Recovery Center to Lake Shore Behavioral Health and Prevention Focus. This facility will provide mobile outreach and provide support to individuals and families who are in recovery. Also, our local correctional facility is exploring the use of Vivitrol. Finally, the three methadone clinics in our county have had their capacity lifted and are expanding services.

Our local task force was developed to bring community experts together, examine all areas of the crisis and coordinate efforts to combat the epidemic. We are off to a good start and have more work to do to combat this epidemic.
Essex County Response to the Heroin and Opioid Epidemic

In 2015, Essex County established the Essex County Heroin & Opioid (ECHO) Prevention Coalition, which is a multi-agency collaboration to prevent and reduce heroin and opiate abuse and addiction in Essex County through education, awareness, support and enhancement of existing programs and services. The ECHO has collaborated with stakeholders to provide community resources that include: State legislative officials; Congressional legislative officials; local government officials; family centers; outpatient clinics; prevention teams; citizen advocacy groups; mental health services; the courts; and public health facilities. The ECHO recently received a grant from the New York State Health Foundation for their “A Coordinated Response to the Opioid Epidemic in North Country” proposal.

Franklin County Response to the Heroin and Opioid Epidemic

Suzanne Lavigne, MHA, CTRS, CASAC, Director of Community Services

The Franklin County Prevention Task Force was formed in 2004 to address issues related to underage alcohol use, prescription drug abuse, other substance use and participation in destructive/high risk behaviors. The Task Force is comprised of local and state law enforcement, local government, courts, health care professionals, schools and educators, business owners, clergy, community based organizations, behavioral health providers and prevention staff.

Over time, the Task Force expanded its purview to include addressing issues related to adult substance use trends and creating prevention strategies to educate our communities. In 2014, the Task Force coordinated a series of community forums, community awareness and prevention activities to combat the rise in opiate prescription drug abuse and overdoses.

Efforts are underway to strengthen existing behavioral health services at the County Jail through collaborations with the Sheriff’s Department, Local Governmental Unit (LGU) and behavioral health providers. These services include screening and evaluation, treatment readiness and engagement opportunities. Transitional services are available to inmates upon release to continue efforts with ongoing abstinence through referral to treatment providers and assistance with accessing other community resources.
Nassau County Response to the Heroin and Opioid Epidemic

James Dolan, DSW, LCSW, Director of Community Services and Acting Commissioner of Human Services

Below is a summary of key initiatives undertaken in Nassau County in response to the heroin and opioid epidemic. Of note, a number of these measures have involved collaborative efforts between the Nassau County Office of Mental Health, Chemical Dependency and Developmental Disabilities Services and other stakeholders, such as the probation department, law enforcement, jail, courts, District Attorney, and the Department of Social Services.

Nassau County operates the first county-run naloxone/opioid overdose prevention training program in NYS. To date we have trained over 6,800 people at 145 different trainings. Additionally, we created a Vivitrol treatment track within our Opioid Treatment Program which is also licensed as a Department of Health Article 28 health clinic.

Nassau County functions as a co-lead in the operation of one of the two Health Homes in Nassau County; and we work very closely with the other Health Home in assuring that those with a chemical dependency disorder have easy access to care management services. We expanded the availability of jail diversion case management services for chemically dependent defendants who are assigned to Probation, or are defendants at Felony Treatment Court, Misdemeanor Treatment Court, Veterans Treatment Court, Family and the DWI Jail Diversion Program. These functions enable us to divert thousands of people per year from incarceration and into the treatment that enables them to avoid recidivism and move into recovery.

We created a Behavioral Awareness Campaign that increases awareness of the prevalence of behavioral health disorders, and decreases the stigma that prevents people from seeking help. The Campaign emphasizes the benefits of receiving integrated behavioral health and physical healthcare, and underscores the benefit of prevention and early intervention services.

We established a 227-TALK (8255) 24/7 Help/Hotline that provides expert and objective guidance from licensed professionals who enable those in need to receive immediate access to information, referrals, crisis counseling, or an emergency intervention response.
Onondaga County Response to the Heroin and Opioid Epidemic

Lisa Alford, MA, Director of Community Services and County Commissioner of Adult & Long Term Care Services

The opioid epidemic in Onondaga County is mirroring other counties across the state. There are a number of local efforts to reduce the harmful impact caused by the use and abuse of opioids. Some of these efforts include:

- Onondaga County Drug Task Force (OCDTF) is conducting surveys and reviews of Opioid Reduction Activities in other NYS counties;
- A Power point presentation has been created on opioids and prescription drugs by the OCDTF’s Prevention and Education Committee to be used by a speaker’s bureau;
- A number of forums have been held in this region with guest presenters and experts representing health, law enforcement, government, and mental health, and with family members and former drug users;
- Substance use disorder treatment and prevention services have increased;
- Onondaga County Department of Health has created a Combat Heroin/Opiates webpage;
- There is a community wide Drug Take Back Initiative that includes medication drop off boxes at 7 local sites along with used needle receptacles;
- ACR Health and Syracuse Behavioral Healthcare (SBH) offer Narcan Training to the public and there has been increased distribution and availability of Overdose Rescue Kits;
- New Peer Engagement and Support Program: utilizes 3 peer specialists to work with drug overdose cases at area hospitals and emergency rooms in Onondaga, Madison, and Cortland Counties;
- Family Peer Advocate Program: a family advocate works directly with families impacted by opioid abuse;
- Additional treatment services such as methadone maintenance programs are being set up to help ease the wait times for those seeking treatment; and
- Several local Resource Lists have been recently updated that provide contact information for treatment and support services.

Ontario County Response to the Heroin and Opioid Epidemic

Diane Johnston, LCSW-R, Director of Community Services

Ontario County is similar to our neighbors across the state; we have already experienced numerous opioid related deaths, with rates increasing as the year progresses. Each situation has its own tragic set of circumstances with families, friends and the community responding in grief, shock and fear. In an effort to tackle the problem, Ontario County is attacking the heroin epidemic from all angles.

The Partnership for Ontario County, a coalition comprised of numerous private citizens, the Sheriff’s Office, county government departments and not for profit agencies has developed a multi-pronged approach. We were fortunate to receive
OASAS grant funding to assist with a Strategic Prevention Framework, beginning with conducting youth assessments and perceptions of substance use. Focus will remain on educating the community on the risks of substance use. Twelve educational presentations including professionals, family members and individuals who have struggled with opioid use have occurred across the county.

We continue to provide several “medication take back” events each year, in addition to providing medication drop off boxes at several locations across the County. Canandaigua Academy students produced three Public Service Announcements which are run on various media outlets. And lastly, Ontario County was awarded an OASAS grant for Adolescent and Young Adult Clubhouse development. The Clubhouse model being developed is an incredible partnership with numerous agencies to provide healthy, substance free social outlets for teens and young adults.

The Ontario County Jail has provided substance abuse education and referral services in partnership with Finger Lakes Addictions Counseling and Referral Agency (FLACRA) since 1983. In addition to the Living in Balance series, FLACRA also uses the evidence-based “Thinking for a Change” program to help inmates develop social and life skills. Counselors complete referrals to drug court and to rehabilitation units, when appropriate. Alcoholics Anonymous and Narcotics Anonymous groups meet within the jail, providing groups for men and women. FLACRA will soon hire a transition care manager to assist with reentry. The jail also offers medical care and mental health assessment and counseling. Nurses are trained in the use of Narcan and have it available for use, if needed. Inmates with heroin or alcohol addiction, who are seeking sobriety, may request to participate in the Vivitrol program while incarcerated. The person is given the pill form for five days to ensure there are no contraindications. If the trial goes well, the first injection is given before release, with an appointment for follow-up in the community. The jail also has a navigator to facilitate enrollment in the appropriate managed medical care plan.

In February 2016, a joint presentation to the Inter County Association of Western New York was held on the topic of heroin. The presenters represented Ontario County Public Health, Ontario County Jail, as well as a parent who lost a son to a heroin related tragedy. The goal was to increase awareness of the epidemic and encourage counties across the state to take action.
FLACRA has numerous services within the community, including expanding the Addiction Crisis Center to include medically supervised withdrawal and stabilization services. Since February 2016, this Center has provided medically supervised services to over 200 individuals. The agency has trained their staff (outpatient treatment providers, residential staff, and outreach care managers) on Opioid Overdose Prevention and each site has a Narcan kit available. Over 330 doses of Narcan have been distributed in the community.

Ontario County Public Health Department has been instrumental in organizing and providing Narcan training for our law enforcement agencies. Finger Lakes Council on Alcoholism has been fully engaged in the Ontario County Substance Abuse Coalition (via Partnership for Ontario County) and is involved in community wide education and informational events. Clifton Springs Hospital and Clinic provide both outpatient and inpatient substance abuse treatment services, including providing suboxone.

Ontario County will continue to seek additional approaches to tackle the heroin epidemic.

**Orange County Response to the Heroin and Opioid Epidemic**

*Darcie Miller, LCSW-R, Acting Mental Health Commissioner and County Social Services Commissioner*

In 2013, Orange County pro-actively became one of the first counties in New York State to create an Opiate/Heroin/Prescription Pill Task Force in response to the rising opiate epidemic. The task force was co-sponsored by the Orange County Executive’s Office, with Orange County Executive Edward Diana then presiding. The task force is co-chaired by Acting Mental Health Commissioner and Orange County Social Services Commissioner Darcie Miller, LCSW-R, and the Department of Health Commissioner, Dr. Eli Avila, and is comprised of multiple stakeholders from numerous systems including law enforcement, addiction specialists, prescribers, pain management specialists, hospitals, emergency response personnel, and education.

When our goal of producing/publishing a guidance document became realized less than one year later in May of 2014, the task force quickly embraced the need to continue meeting and strategizing as a collective entity to address this epidemic head on. The task force is mirrored after the Association of State and Territorial Health Officials (ASTHO) strategic plan, which included the President’s Challenge 15 by 15: reducing prescription drug abuse & deaths by 15% by 2015.

The task force created the following subcommittees of which various workgroups have fallen under as new strategies are deployed: Prevention/
To date, the task force has witnessed many successes as highlighted below:

- Published a Guidance Document: May 2014—see following link, www.orangecountygov.com/content/124/1348/default.aspx.
- Trained over 2030 family & community members, law enforcement, county officials, and clients themselves in Narcan Opiate Reversal.
- Trained social services staff, outpatient chemical dependency and mental health providers working in state licensed settings, all care and case managers, housing liaisons and shelter staff in Narcan.
- Expanded partnership and buy-in from local law enforcement to seek Naloxone training and be able to respond to those in an overdose state prior to the national momentum that laid the groundwork for increased Narcan training.
- As of August 5, 2016—a total of 202 Narcan administrations have been conducted by our local police departments, emergency responders and local citizens.
- Hosted the Orange County Opiate Health Symposium—led by the Orange County Executive’s office featuring National Speaker neurobiologist/Addiction Expert Dr. Robert Cory Waller.
- Hosted: HEROIN-A Public Forum on Education, Treatment, and Law Enforcement: June 2016—inclusive of the Orange County District Attorney, the Commissioners of Mental health/Social Services and of the Department of Health, the Orange County Sheriff, and the Alcoholism and Drug Abuse Council of Orange County.
- Locally led forums in partnership with local legislators—Carl Brabenec, Port Jervis NY.
- Expanded previous school based educational sessions—9 school districts have hosted the “Medicine Cabinet to Heroin Addict” presentation co-facilitated by the Orange County Office of Mental Health, the Orange County District Attorney’s office, and the Alcoholism and Drug Abuse Council of Orange County.
- Administered the first countywide school-based youth risk survey as a result of the increased attention to the current opiate epidemic - 45% of school districts participating - Fall 2014.
- Increased resources secured to address epidemic - NYS OASAS funding: A Recovery Clubhouse; OASAS funding: for Family Navigator positions; OASAS funding for Partners for Success Grant targeting the opiate epidemic specifically in the Newburgh area; Health and Human Services funding for the Middletown Community Health Center (MCHC) to administer Medication Assisted Treatment (MAT) and create a behavioral health
program for those with addiction issues in the Port Jervis area.

The New York State Department of Health/Harm Reduction Center has, on more than one occasion, praised Orange County’s efforts for pro-actively training law enforcement and claiming re-occurring successful reversals. We have been told “Orange County is doing great things and is being talked about through the state.”

**Rensselaer County Response to the Heroin and Opioid Epidemic**  
*Katherine Alonge-Coons, LCSW-R, Commissioner of Mental Health*

Rensselaer County has launched a county wide community coalition, under the direction of County Executive Kathy Jimino, that is co-chaired by Sheriff Pat Russo and County Health Department Director Mary Fran Wachunas, to address the opiate/heroin addiction plaguing the county. This coalition is comprised of community stakeholders with representation of: parents/families who have lost children to the disease of addiction; those providing education, prevention, treatment and harm reduction services; local law enforcement and criminal justice personnel; faith community; and other interested members of the public including members of other municipality’s coalitions.

In January 2016, the county in collaboration with the Hudson Mohawk Recovery Center, Inc., launched a voluntary treatment readiness program at the Rensselaer County Jail for those who have entered incarceration with active addiction. Simultaneously the county launched a voluntary Vivitrol injection opportunity for inmates who have obtained detoxification, passed assessment and seek to maintain sobriety. This Vivitrol program has been made possible via the generosity of the Alkermes Pharmaceutical Company.

The county is actively working to: increase the availability of Medication Assisted Treatment opportunities for both Buprenorphine and Methadone; increase residential opportunities for persons in recovery; develop ambulatory detox opportunities and integrated care for persons experiencing addiction and mental illness.

The Rensselaer County Health Department has increased opportunities for Narcan trainings. This has been accomplished via collaboration between the Rensselaer County Health Department and the Rensselaer County Department of Mental Health; as well as Catholic Charities. Catholic Charities’ needle exchange program is also actively serving Rensselaer County residents in an attempt to decrease HIV exposure and working to increase treatment readiness of those participating in the exchange program. Rensselaer County’s Departments of Health, Probation, Social Services, and Mental Health have been active participants in the Casey Foundation’s
interstate (VT and NY) summit to address the crisis for children impacted by parental addiction.

**Saratoga County Response to the Heroin and Opioid Epidemic**

*Michael Prezioso, Ph.D, Director of Community Services*

Saratoga County was recently named “healthiest county” in New York State, in a joint review conducted by the University of Wisconsin and the Robert Wood Johnson Foundation. Nevertheless, the county is not immune to increased addiction to heroin and opiates and the toll extracted from those affected. In recognition of this growing concern, the Saratoga County Department of Mental Health sought and received designation as an Opiate Overdose Prevention Program in the spring of 2016.

Shortly thereafter, in concert with the Sheriff’s Office and with input from stakeholders representing the courts, law enforcement, hospital systems and human service agencies, Saratoga County’s Medication Assisted Treatment/Pre-Release Program (MAT/PRP) was launched. The program capitalizes on the presence of a multidisciplinary clinical team deployed to the county correctional facility and makes Vivitrol available to inmates. Assessment, intervention and follow-up treatment are coordinated among correctional facility medical staff and Mental Health staff representing psychiatry, social work, addictions, nursing, and care coordination. Follow up treatment upon release is provided, in most cases, by the addictions treatment component of the Department of Mental Health.

Education regarding opiate addiction and the consequences of overdose is an additional, critical element in prevention efforts. Recognizing the correlation between addiction and contact with the criminal justice system, education and training in the use of naloxone (Narcan) will be made available to interested inmates upon release, and to family members and graduates of the County Drug Court.

Finally, the Department of Mental Health collaborated with the Saratoga County Prevention Council on its application to become the operator of Recovery Community Centers in several counties, including Fulton, Hamilton, Montgomery, Warren and Washington, as well as Saratoga. The Council recently received a five-year OASAS grant in the amount of $1.75 million, to establish centers to support wellness and recovery in peer-supported, volunteer settings.
Westchester County Response to the Heroin and Opioid Epidemic
The Westchester County’s Direct Treatment Alternative to Incarceration Program (DTATI) is a successful county program targeted at individuals entering the criminal justice system who have problems with substance abuse. DTATI provides criminal courts with recommendations for alternatives to incarceration for individuals charged with or convicted of felony offenses who have a drug or alcohol abuse problem.

The program consists of intensive day-long treatment services coupled with on-site probation supervision. Linking these two programs helps to ensure that participants are receiving mandated treatment in a structured program that provides efficient oversight by a probation officer. Probation officers with the DTATI Program are housed at the treatment sites, collaborating with treatment staff in preparing and monitoring the treatment plan as well as other mandated conditions. This approach has proven credible with both the courts and the criminal justice system.

The county has three DTATI sites in collaboration with St. John’s Riverside Hospital and Phelps Memorial Hospital Center. The programs provide a full spectrum of services, following the needs of program participants. One location provides an adolescent after school program.

New York City Response to the Heroin and Opioid Epidemic
In 2016, Mayor de Blasio announced the creation of the Heroin and Prescription Opioid Public Awareness Task Force. The task force will focus on double distribution of life-saving naloxone kits; create a new system to connect people who have experienced non-fatal overdose with treatment; expand outreach and engagement programs; and enhance surveillance to detect and respond to overdose trends.

The NYC Health Department also issued a Health Alert to all providers, including hospitals, emergency rooms, stand-alone clinics and private practices, alerting to them to potential opioid overdoses that could involve fentanyl. The alert included preliminary data showing an overall increase in unintentional drug overdose deaths due to heroin and fentanyl.

The new plan includes $5.5 million over three years to create the following programs:
- Staten Island Adolescent Program: Build capacity to reach additional 250 youth at risk or with substance use disorder in Staten Island;
- Establish a Nonfatal Overdose Response System;
- Prescriber Education and Training;
- Public media campaigns, and
- Training for counselors.
The New York State Association of Counties is a bipartisan municipal association serving the counties of New York State including the City of New York. Organized in 1925, NYSAC mission is to represent, educate and advocate for member counties and the thousands of elected and appointed county officials who serve the public.

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