

# Science, Stigma & Solutions: A Pennsylvania Health Network Takes a Three-pronged Approach to Addressing the Substance Use Disorder Crisis

Lehigh Valley Health Network

Opioid Stewardship & Linkage to Treatment Committee

© 2018 Lehigh Valley Health Network

888-402-LVHN LVHN.org





**70,237 people**

died from drug  
overdoses in the  
U.S. in 2017

60,000

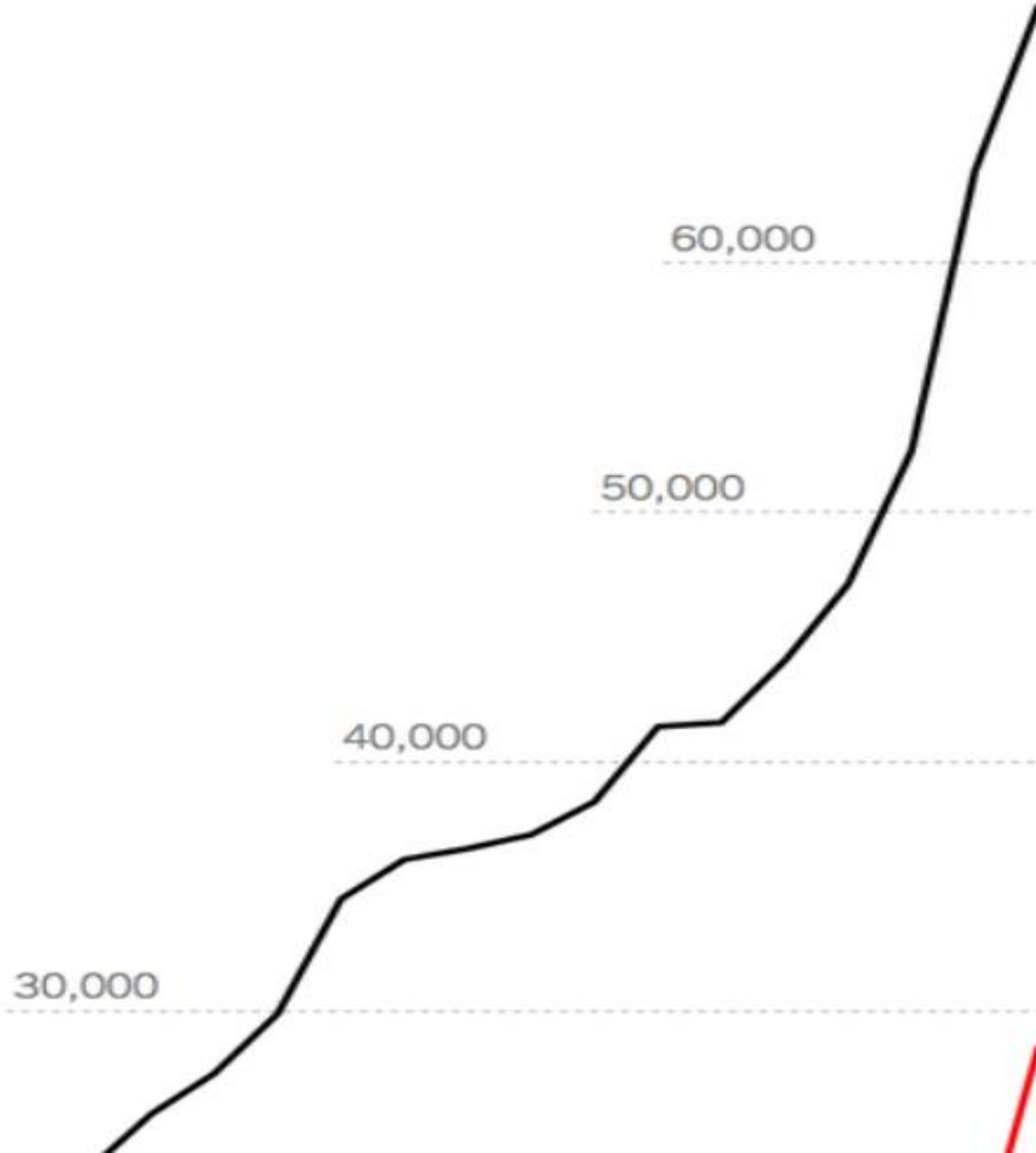
50,000

40,000

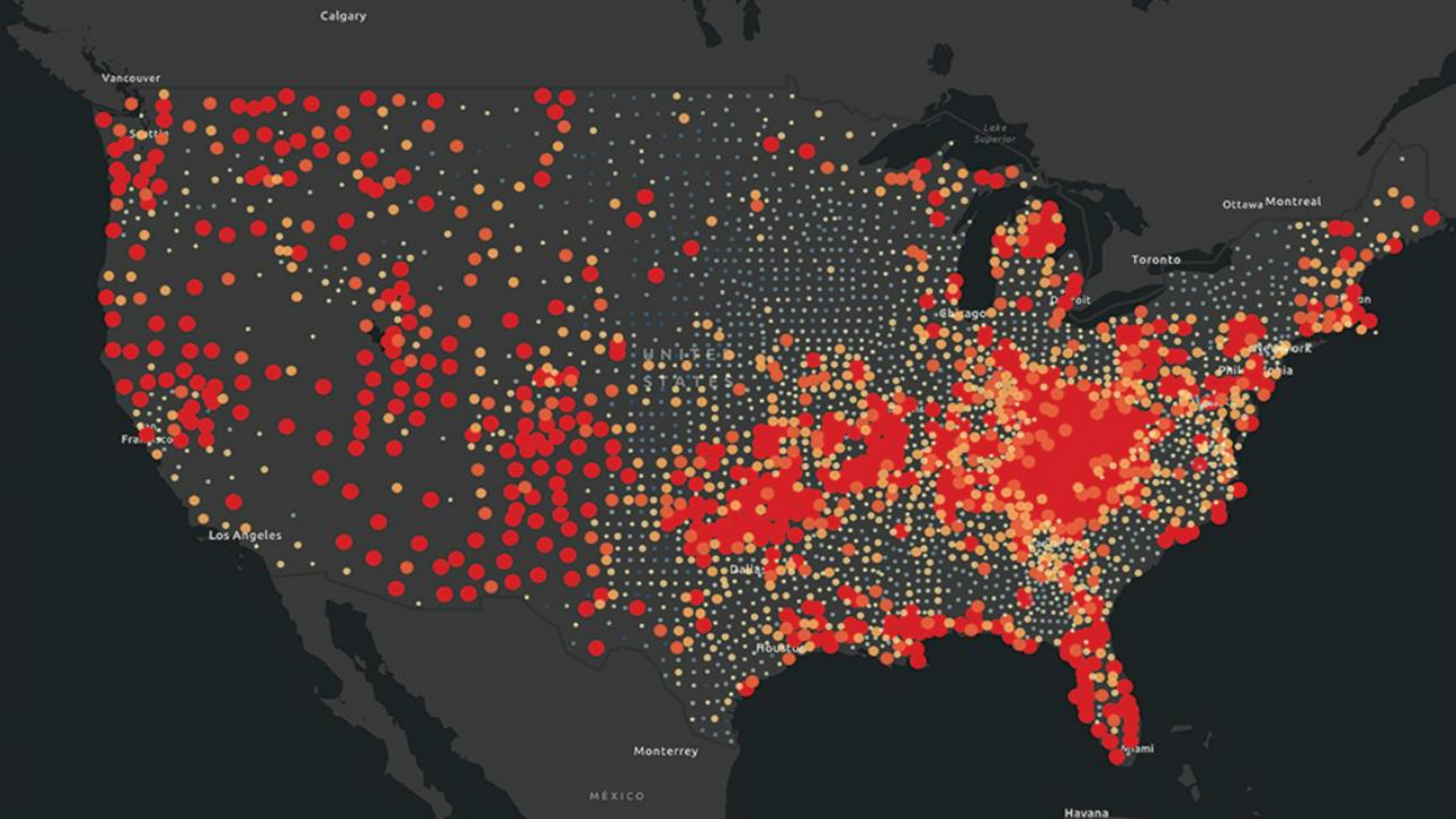
30,000

**28,466 deaths**

involved fentanyl  
or a similar drug

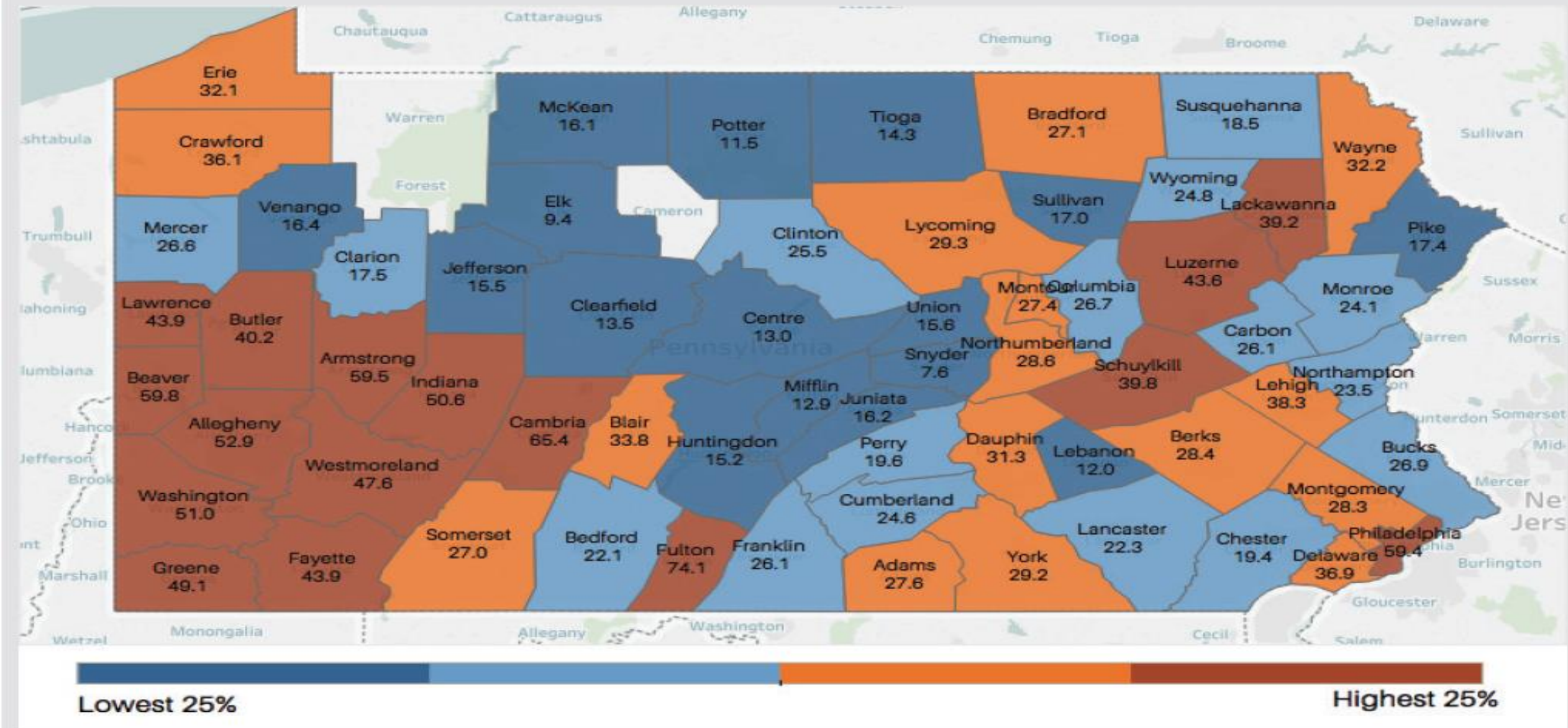








(U) Figure 2: Rate of Drug-Related Overdose Deaths per 100,000 people in Pennsylvania Counties, 2016





## Overdose Deaths are the Tip of the Iceberg

For every **1** prescription or illicit opioid overdose death in 2015 there were...



**18**

heroin

people who had a substance use disorder involving

**62**

people who had a substance use disorder involving prescription opioids

**377**

people who misused prescription opioids in the past year

**2,946**

people who used prescription opioids in the past year

Results from the 2015 National Survey on Drug Use and Health: Detailed Tables <https://www.samhsa.gov/data/sites/default/files/NSDUH-DetTabs-2015/NSDUH-DetTabs-2015/NSDUH-DetTabs-2015.htm#tab1-23a>

Rudd RA, Seth P, David F, Scholl L. Increases in Drug and Opioid-Involved Overdose Deaths — United States, 2010–2015. MMWR Morb Mortal Wkly Rep 2016;65:1445–1452. DOI: <http://dx.doi.org/10.15585/mmwr.mm655051e1>.

# How did we get here?



Pharmaceutical Industry



Health Care Industry



Patient Factors



# LVHN's Multi-Pronged Approach to the Substance Use Disorder Crisis

Prevent New SUD

Reduce Stigma

Treat Existing SUD

# 3



# Prevent New SUD

FOR \_\_\_\_\_

ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_

Rx

REFILL \_\_\_\_\_ TIMES

\_\_\_\_\_. M.D. \_\_\_\_\_ M.D.

DO NOT SUBSTITUTE SUBSTITUTION PERMISSIBLE

DEA NO. \_\_\_\_\_ ADDRESS \_\_\_\_\_

BioRx Labs 1-888-550-5452 FORM NO. PD5000

LVHN has developed opioid prescribing guidelines and resources to promote safe and effective pain management.



## Prevent New SUD

## Process Metrics



## MMED

- Average MMED per provider
- Average MMED per division
- Ratio of average MMED in 48 hours before discharge to MMED in discharge script (favorable at <1)



## Discharges

- Encounters discharged with opioids per 100 discharges
- Percentage of patients discharged with opioids that return to ED due to pain
- Percentage of patients discharged with opioids needing a refill within 30 days



## Opioid Scripts

- Wean usage per total opioid scripts
- Percentage of scripts with  $\leq 90$  MMED with a naloxone script

# Prevent New SUD

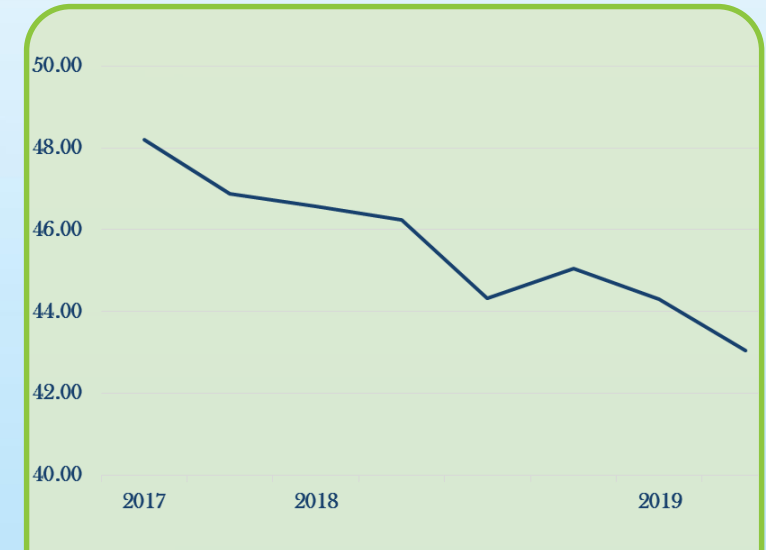
## Key Performance Indicators



PDMP  
Checked



Opioids Prescribed  
per Total Script  
Count



Average  
MMED

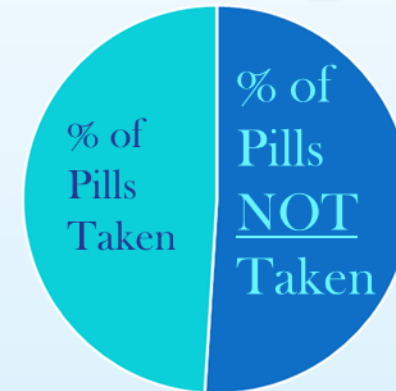




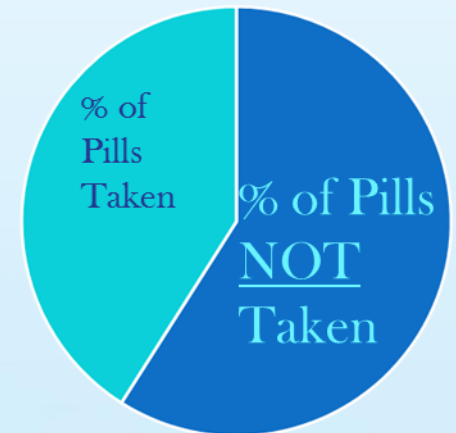
## Prevent New SUD

# Process: Opioids after Joint Replacements

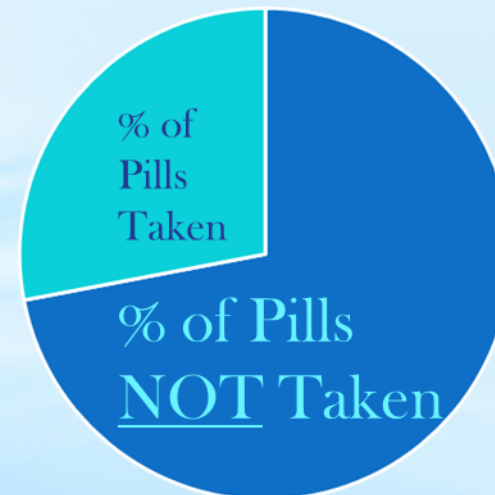
- Transition of Care (TOC) call center clinicians called patients post-op to help them transition from hospital to home care.
  - Follow-up for max of 90 days.
  - Once patient stated they were done with medication, the nurse counted how many pills were left over.
- In addition, information was pulled from patient's chart.



Total Knee Arthroplasty



Total Hip Arthroplasty

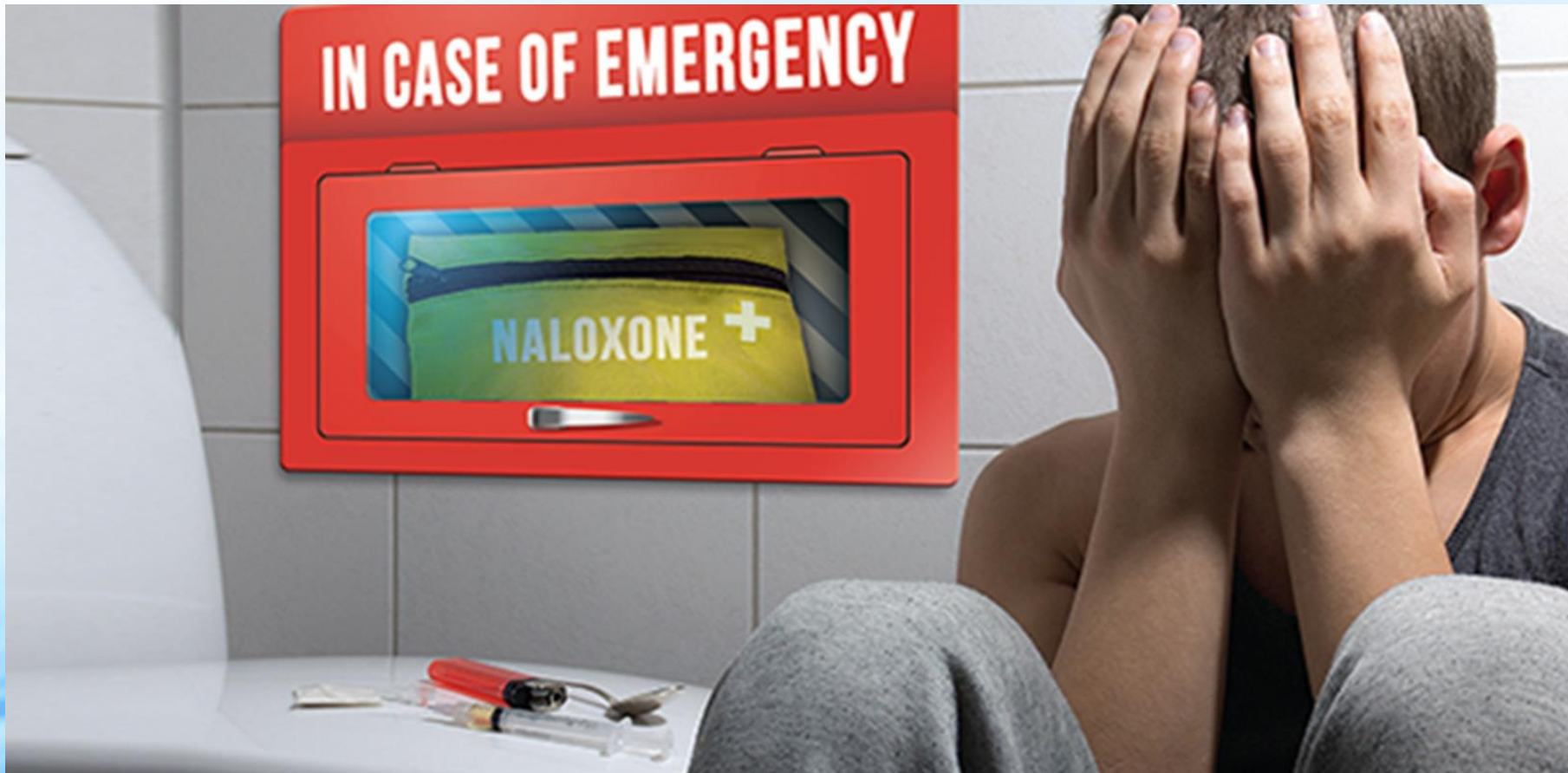


Total Shoulder Arthroplasty

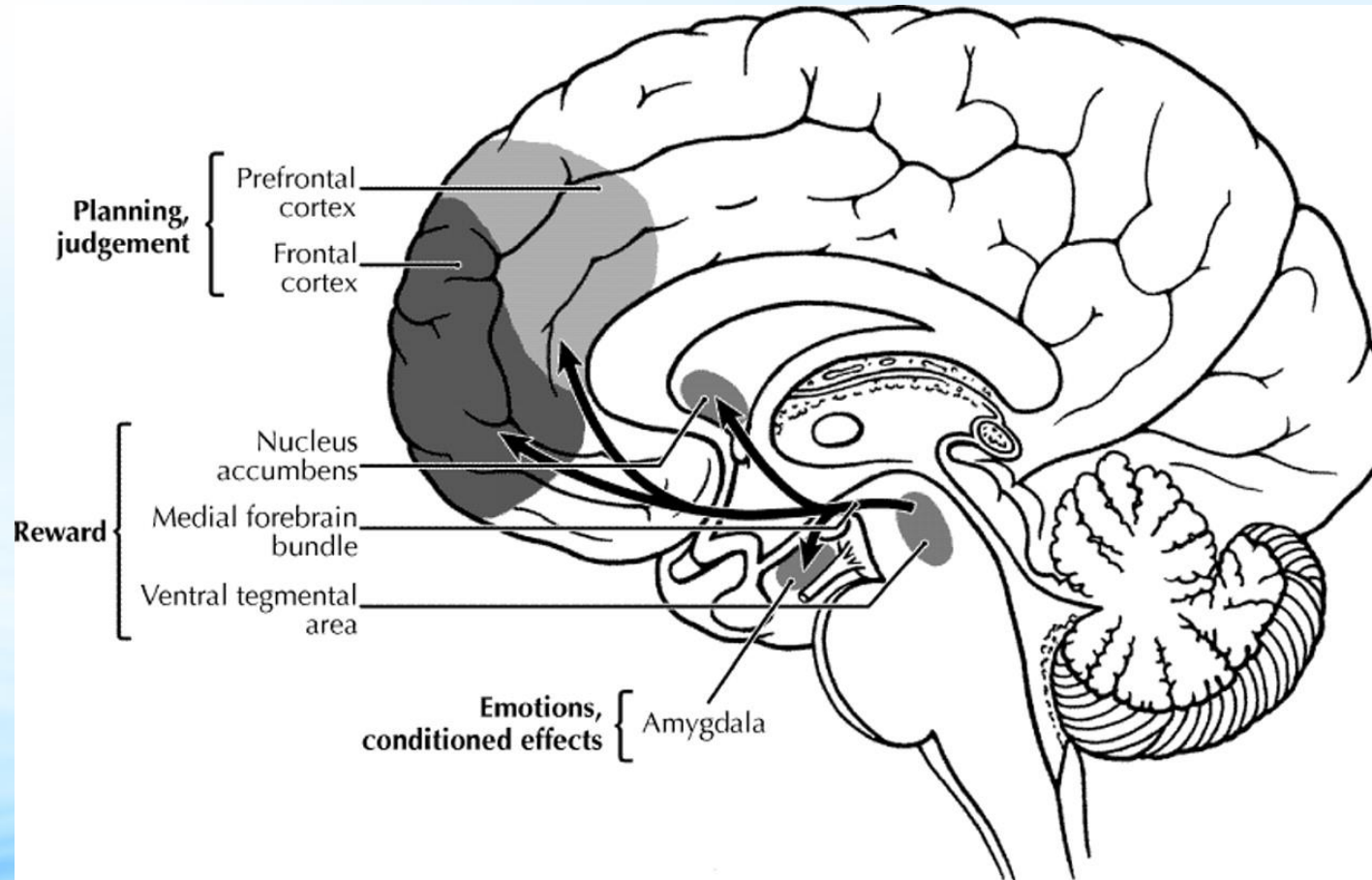
Prevent New SUD

# Harm Reduction

## Providing Naloxone for patients and community members at risk



# Reduce Stigma



By educating our network colleagues about disease of SUD, we are increasing understanding and reducing stigma.



# Reduce Stigma

LVHN is training  
our clinicians to use  
person- first language

Positive, Person-First Language	Stigmatizing Language
<ul style="list-style-type: none"> <li>Person with a substance use disorder (SUD)</li> <li>Person who uses drugs (PWUD)</li> <li>Substance use / substance misuse</li> <li>Person in recovery</li> </ul>	<ul style="list-style-type: none"> <li>Substance Abuse / Substance Abuser</li> <li>Addict, Alcoholic, Junkie</li> <li>Recovering “addict, alcoholic, substance abuser, junkie, etc.”</li> </ul>
<ul style="list-style-type: none"> <li>Person with justice-involvement; person that is justice-involved</li> </ul>	<ul style="list-style-type: none"> <li>Criminal, Felon, Convict</li> </ul>
<ul style="list-style-type: none"> <li>Person experiencing homelessness</li> </ul>	<ul style="list-style-type: none"> <li>Homeless</li> </ul>
<ul style="list-style-type: none"> <li>Positive / Negative</li> </ul>	<ul style="list-style-type: none"> <li>Clean / Dirty</li> </ul>
<ul style="list-style-type: none"> <li>SUD / OUD pharmacotherapy</li> <li>Medications for addiction treatment</li> </ul>	<ul style="list-style-type: none"> <li>Medication Assisted Treatment</li> </ul>
<ul style="list-style-type: none"> <li>Neonatal abstinence syndrome / Neonatal opioid withdrawal syndrome</li> </ul>	<ul style="list-style-type: none"> <li>Addicted baby</li> </ul>
<ul style="list-style-type: none"> <li>Recurrence of use / recurrence of symptoms</li> </ul>	<ul style="list-style-type: none"> <li>Relapse</li> </ul>

# Reduce Stigma




# Reducing Stigma in the Community

An overdose simulation for  
high school and college  
students to reduce students'  
stigma.

Kerri Green, MS, MED, Director Undergraduate  
Education

Paige Roth, ARS, CRS, MSW, LSW  
Center for Humanistic Change  
Lehigh County D&A

LEHIGH VALLEY HEALTH NETWORK YOUTH PROGRAMMING




## Opioid Use Disorder Simulation

This year, LVHN received funding from Lehigh County Drug & Alcohol to conduct 16 Opioid Use Disorder simulations serving 265 high school and undergraduate nursing students along with 21 instructors.

The simulation begins with students viewing a pre-recorded video created by LVHN and funded by The Dorothy Rider Pool Health Care Trust. The video features the experience of a standardized patient, "Sarah", who is found unresponsive by her family. In the video, "Sarah's" family finds her and calls 911 to initiate the emergency response.

The program transitions to a live simulation in the LVHN Department of Education Simulation Center, where the students observe the LVHN Emergency Medicine team conduct a "warm hand-off".



LVHN Toxicology Fellow, Andrew Koons, MD, attends to "Sarah"

Mother "MaryAnne" comforts "Sarah" as she interacts with the health care team

LVHN Addiction Recovery Specialist, Paige Roth, discusses "Sarah's" treatment plan with her

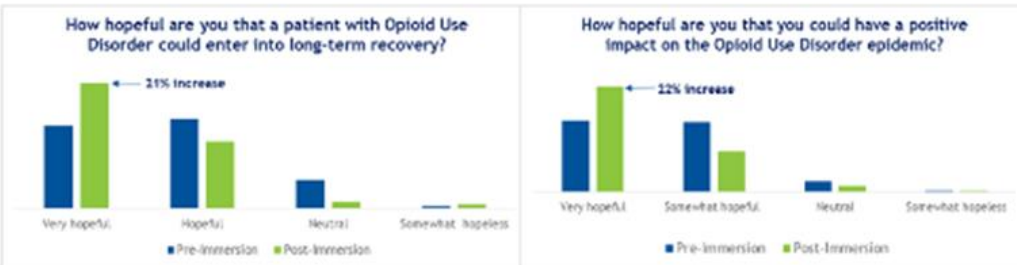
Students then debriefed and reflected upon the empathic attitudes and communication they observed between members of the health care team, "Sarah", and her family. Students also receive an educational program and hear the story of a person in recovery from the Center for Humanistic Change's HOPE Program as part of the overall immersion.



# Upstream Education

## Pre/Post Survey Results

Students accessed an electronic survey pre/post and were asked to answer the below questions as future health care professionals.



## Process Feedback

- "I thought it was very useful and that the live component of the sim was the most beneficial."
- "The simulation gave us an inside look at the appropriate care and treatment of a patient suffering from a substance use disorder."
- "Very realistic and impactful, education is important, yet seeing and observing the issue makes it ten times more personal."
- "The volunteer health care workers were so friendly and informative. The way each part of the simulation was paused and then explained was beneficial."
- "I enjoyed it a lot. It was eye opening and educational to see the process of EMS to seeking treatment. Great format."

## LEHIGH VALLEY HEALTH NETWORK YOUTH PROGRAMMING



## Opioid Use Disorder Simulation

This year, LVHN received funding from Lehigh County Drug & Alcohol to conduct 16 Opioid Use Disorder simulations serving 265 high school and undergraduate nursing students along with 21 instructors.

The simulation begins with students viewing a pre-recorded video created by LVHN and funded by The Dorothy Rider Pool Health Care Trust. The video features the experience of a standardized patient, "Sarah", who is found unresponsive by her family. In the video, "Sarah's" family finds her and calls 911 to initiate the emergency response.

The program transitions to a live simulation in the LVHN Department of Education Simulation Center, where the students observe the LVHN Emergency Medicine team conduct a "warm hand-off".



LVHN Toxicology Fellow, Andrew Koors, MD, attends to "Sarah"



Mother "MaryAnne" comforts "Sarah" as she interacts with the health care team



LVHN Addiction Recovery Specialist, Paige Roth, discusses "Sarah's" treatment plan with her

Students then debriefed and reflected upon the empathic attitudes and communication they observed between members of the health care team, "Sarah", and her family. Students also receive an educational program and hear the story of a person in recovery from the Center for Humanistic Change's HOPE Program as part of the overall immersion.

# Treat Existing SUD



**Meet LVHN's Addiction Recovery Specialist (ARS)**

**Linkage to treatment for ED and Inpatient Setting**







## MAT: Medication for Addiction Treatment

### Treat Existing SUD

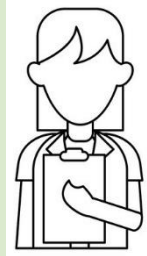
- Use of medications + counseling & behavioral therapies
  - “Whole patient approach”
  - Goal: to help sustain recovery

<https://www.samhsa.gov/medication-assisted-treatment>



# Treat Existing SUD

Since 2017, a county-funded Hospital Opioid Support Team (HOST) and Addiction Recovery Specialist (ARS) were implemented in ED & inpatient settings to screen, identify, and link patients with SUD to treatment.



## ARS

A licensed social worker and certified recovery specialist in Lehigh County, who provides bedside motivational interviewing and care management



## HOST

Provides a bedside level of care assessment and warm hand off to treatment in Lehigh County



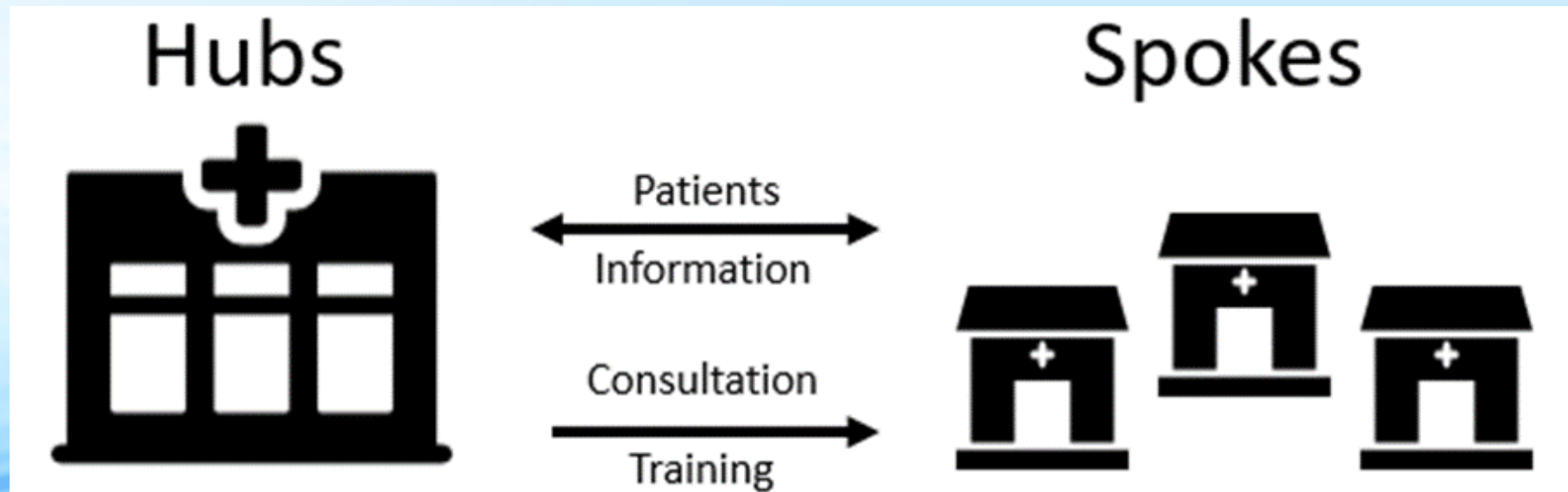
## Warm Hand Off Process

Network wide process in affect in each county

## Treat Existing SUD

### Expansion Plan: Hub and Spoke Model

LVHN continues to develop a hub & spoke model by expanding MAT services in outpatient practices across the network.





# Treat Existing SUD

## LVHN obstetrics program has developed a Perinatal Substance Use Pathway

### PERINATAL SUBSTANCE ABUSE PATHWAY – MATERNAL AND NEWBORN SCREENING AND TREATMENT



#### INDICATIONS TO ORDER MATERNAL AND/OR NEWBORN BIOLOGIC SCREENING

\* PATIENT MUST BE NOTIFIED PRIOR TO COLLECTION – WHY SCREENING IS BEING DONE, POTENTIAL URINE/MECONIUM SCREENING OF NEWBORN, POTENTIAL OUTCOMES BASED ON RESULTS

#### Psychosocial Issues

- o Insufficient prenatal care – no prenatal care, episodic care, late presentation to care
- o Prior child currently under the care of or involved with OCYS
- o Homeless or extreme poverty
- o Domestic violence
- o Mother incarcerated during pregnancy
- o Maternal age under 18 years
- o Admitted / Suspected use

#### Medical Indications

- o Maternal use or history of drug use in past 2 years, including THC
- o Maternal drug screen positive during pregnancy
- o Current maternal use of methadone or buprenorphine or chronic opioid
- o Alcohol abuse
- o Observed suspicious behavior
- o Current diagnosis of abruption especially without hypertensive disorder of pregnancy
- o Diagnosis of HIV or Hepatitis C
- o Diagnosis of Hepatitis B, Gonorrhea, Chlamydia, or Syphilis within past 2 years
- o NOTE: This DOES NOT include HSV and HPV
- o Current IUD
- o Suspicious clinical presentation
- o Depression or other psychiatric illness
- o Provider discretion

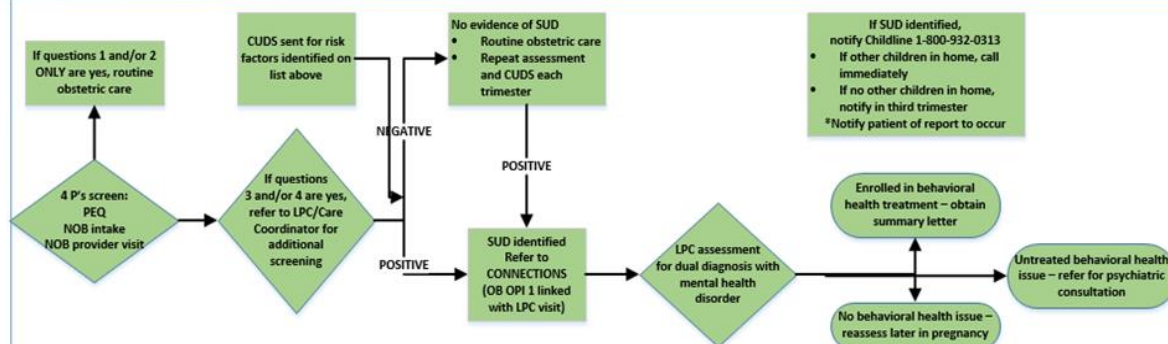
#### LEGEND

- CAC - Children's Advocacy Center
- CPM - Child Protective Medicine
- CUDS - Comprehensive Urine Drug Screen
- LPC - Licensed Professional Counselor
- MAT - Medication Assisted Therapy
- OCYS - Office of Children and Youth Services
- OUD - Opioid Use Disorder
- PDMP - Prescription Drug Monitoring Program
- PNL - Personal Nurse Liaison
- SUD - Substance Use Disorder

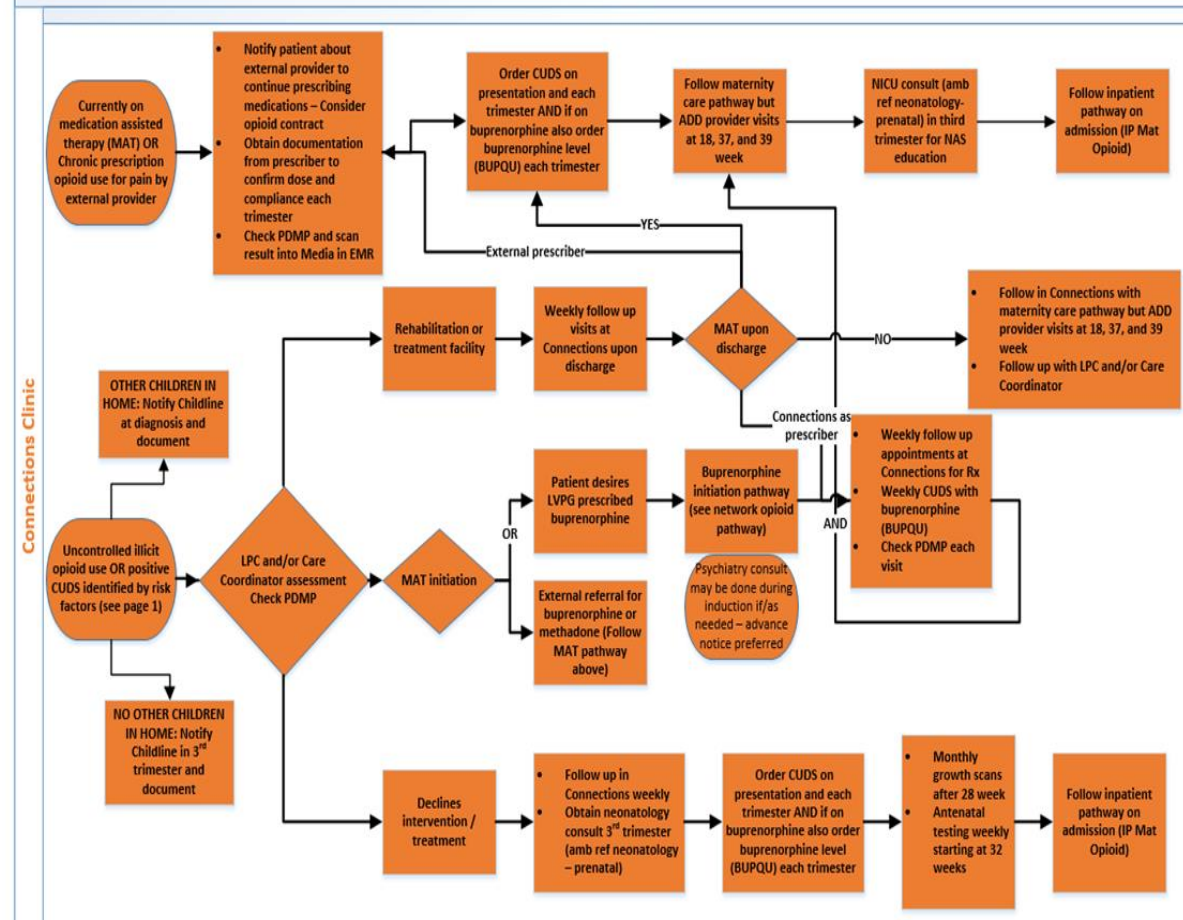
- \*\*4 P's**
1. Did any of your **parents** have a problem with alcohol or drug use?
  2. Does your **partner** have a problem with alcohol or drug use?
  3. In the **past**, have you had difficulties in your life because of alcohol or other drugs including prescription medications?
  4. In the **past month**, have you drunk alcohol or used any other drugs?

### Universal Antenatal Screening

Ambulatory



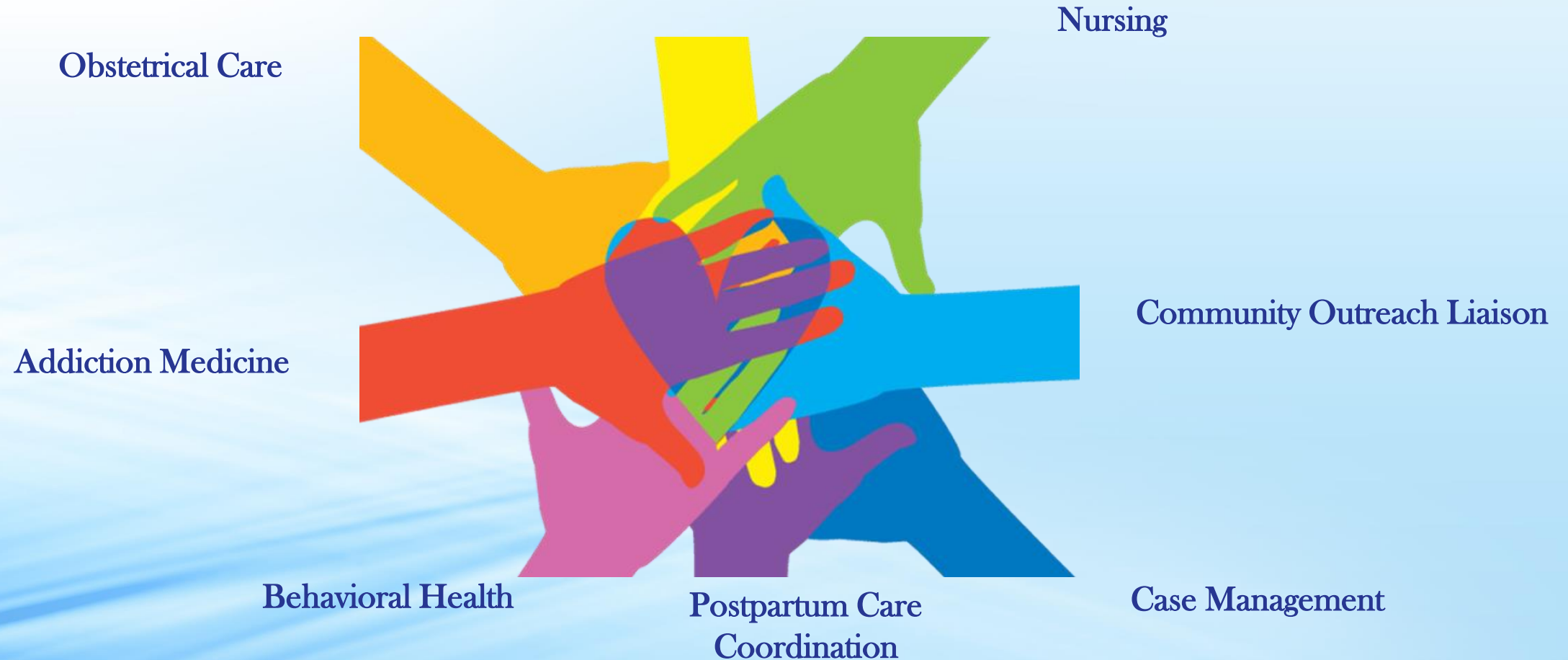
### Connections Clinic





## Treat Existing SUD

# Care Coordination - It Takes a Village



# Treat Existing SUD



## What about the baby?

- Comprehensive pathway
- NAS monitoring and scoring
  - Finnegan scoring
- Nonpharmacological treatment options
  - Skin to skin
  - Breastfeeding
  - Rooming in
- Pharmacologic treatment options
  - Morphine

# Addressing SUD with Children & Adolescents



Centers for Disease Control and Prevention  
CDC 24/7: Saving Lives, Protecting People™

## Adolescent and School Health



Health Services for Teens

High-Risk Substance Use  
Among Youth

Sexual Risk Behaviors

Program Evaluation

Health & Academics

How the WSCC Model  
Informs HIV, STD, and  
Pregnancy Prevention

Tools



# Questions?

Gillian Beauchamp, MD

Co-chair  
LVHN Opioid Stewardship  
&  
Linkage to Treatment

