



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

SHELLY EDGERTON
DIRECTOR

**PRESCRIPTION DRUG AND OPIOID ABUSE COMMISSION
NOVEMBER 2, 2017 MEETING**

APPROVED MINUTES

In accordance with the Open Meetings Act, 1976 PA 267, as amended, the Prescription Drug and Opioid Abuse Commission met on November 2, 2017, at the Ottawa Building, Conference Room 3, 611 West Ottawa Street, Lansing, Michigan 48933.

CALL TO ORDER

Judge Linda Davis, Chairperson, called the meeting to order at 2:11. p.m.

ROLL CALL

Members Present: Judge Linda Davis, Chairperson, Ex-Officio for LARA
Stephen Bell
Vincent Benivegna
Rebecca Cunningham (arrived 2:31 p.m.)
Richard Dettloff
Lisa Gigliotti
Paula Nelson (teleconference) (departed 3:00 p.m.)
Melissa Owings (teleconference) (departed 4:00 p.m.)
Gretchen Schumacher
Judge Patrick Shannon
Larry Wagenknecht (departed 3:09 p.m.)
(called in to teleconference 4:00 p.m.)
Adam Wilson

Members Absent: Timothy Hurtt
Stephen Lazar
Michael Paletta
Roy Soto
Laurie Wesolowicz

Ex-Officio Members: Michelle Brya, Assistant Attorney General
Dr. Debra Pinals, Department of Health and Human Services
Col. W. Thomas Sands, Michigan State Police
Matthew Schneider, Chief Deputy Attorney General

Staff: Kim Gaedeke, Acting Deputy Director, LARA
Cheryl Pezon, Acting Bureau Director, BPL
Nakisha Bayes, Board Support, Boards and Committees Section
Andria Ditschman, Analyst, Boards and Committees Section
Weston MacIntosh, Analyst, Boards and Committees Section

APPROVAL OF AGENDA

MOTION by Bell, seconded by Benivegna, to approve the Agenda with the following change: Remove item 6, Michigan Prosecutors Presentation from DJ Hilson.

A voice vote followed.

MOTION PREVAILED

APPROVAL OF MINUTES

MOTION by Wagenknecht, seconded by Bell, to approve the minutes from August 10, 2017 as written.

A voice vote was followed.

MOTION PREVAILED

MICHIGAN STATE POLICE (MSP) ANGEL PROGRAM PRESENTATION: NANCY BECKER BENNETT

Nancy Becker Bennett, Division Director for Grants and Community Services with the Michigan State Police, introduced herself and First Lieutenant Kevin Caldwell to the Commission.

Ms. Becker Bennett presented a PowerPoint entitled "MSP Angel Program" to the Commission. (Please see addendum #1).

OLD BUSINESS

2018 Meeting Dates

The Commission discussed whether or not to add additional meeting dates to the 2018 calendar. The Commission agreed that it should meet more frequently in 2018.

SUBCOMMITTEE REPORTS

Treatment

MacIntosh provided an overview of the Treatment Subcommittee Summary that was emailed to the Commission.

Regulation and Enforcement

Bell provided an overview of the Regulation and Enforcement Subcommittee Summary that was emailed to the Commission.

Bell explained that the subcommittee will be discussing how to address workplace violence and how to better protect healthcare professionals.

Policy and Outcomes

Shannon provided an overview of the Policy and Outcomes Subcommittee Summary that was emailed to the Commission.

Shannon explained that the subcommittee will be discussing HIPAA.

Prevention

Benivegna provided an overview of the Prevention Subcommittee Summary that was emailed to the Commission.

The Commission discussed the request to have the health boards add an opioid training as a continuing education requirement.

ACTION ITEMS

Civil and Criminal Protection and Confidentiality for Professionals that Report the Misuse, Diversion, or Abuse of Opioids

MOTION by Benivegna, seconded by Gigliotti, the PDOAC *supports* sending letters to the legislature in support of initiating legislation that protects the identity of a licensee under Article 15 of the Public Health Code that reports the misuse, diversion, or abuse of opioids and other controlled substances to law enforcement or other government entity as confidential, subject to disclosure only with the consent of that person or by judicial process. Further, a person who makes a report of misuse, diversion or abuse of opioids and other controlled substances or cooperates in an investigation of the misuse, diversion or abuse of opioids and other controlled substances is presumed to be acting in good faith and is immune from civil or criminal liability that might otherwise be incurred by that action. This immunity from civil or criminal liability does not extend to a

Yeas: Bell, Benivegna, Cunningham, Dettloff, Gigliotti,
Schumacher, Shannon, Wagenknecht, Wilson

Nays: None

MOTION PREVAILED

MOTION by Gigliotti, seconded by Shannon, the PDOAC *supports* that the DHHS review the current policy and federal and state obligations which prevent the use of Medicaid inpatient beds by Medicaid recipients across county lines.

A roll call vote was taken. Yeas: Bell, Benivegna, Cunningham, Dettloff, Gigliotti, Schumacher, Shannon, Wagenknecht, Wilson
Nays: None

MOTION PREVAILED

Limited Statutory Immunity for Low-level Offenses Involved in Reporting Overdose and Seeking Medical Assistance

MOTION by Schumacher, seconded by Bell, the PDOAC *supports* drafting a letter to the Michigan Association of Chiefs of Police, requesting that they consider sharing MCL 333.7403(3) with their membership, which addresses limited statutory immunity for low-level offenses involved in reporting an overdose and seeking medical assistance.

A roll call vote was taken. Yeas: Bell, Benivegna, Cunningham, Dettloff, Gigliotti, Schumacher, Shannon, Wagenknecht, Wilson
Nays: None

MOTION PREVAILED

MOTION by Bell, seconded by Benivegna, the PDOAC *supports* drafting a letter to the Prosecuting Attorneys Association of Michigan, requesting that they consider sharing MCL 333.7403(3) with their membership, which addresses limited statutory immunity for low-level offenses involved in reporting an overdose and seeking medical assistance.

A roll call vote was taken. Yeas: Bell, Benivegna, Cunningham, Dettloff, Gigliotti, Schumacher, Shannon, Wagenknecht, Wilson
Nays: None

MOTION PREVAILED

MOTION by Bell, seconded by Benivegna, the PDOAC *supports* drafting a letter to the Michigan Sheriff's Association, requesting that they consider sharing MCL 333.7403(3) with their membership, which addresses limited statutory immunity for low-level offenses involved in reporting an overdose and seeking medical assistance.

A roll call vote was taken. Yeas: Bell, Benivegna, Cunningham, Dettloff, Gigliotti,

Schumacher, Shannon, Wagenknecht, Wilson
Nays: None

MOTION PREVAILED

CHAIR REPORT

Davis reported that she was pleased with the work that the Commission has done. She was happy with the passion of the members and their determination to progress toward a solution to opioid issues.

DHHS UPDATE

Pinals reported that the overdose prevention stakeholders meeting will be held within the next week.

Pinals reported that there has been a 35% increase in pharmacies that are registered to administer Naloxone treatment.

DEPARTMENT UPDATE

Gaedeke notified the Commission of the following staffing changes: Cheryl Pezon, JD, is now the Acting Director for the Bureau of Professional Licensing. Gaedeke is now the Acting Deputy Director the Department of Licensing and Regulatory Affairs. Gaedeke will remain actively engaged with the Commission.

Gaedeke provided the following MAPS update: MAPS will be adding the preventative tool, NarxCare to PMP. This will allow users to see data in a visual representation as well as a written representation. Users will also be able to identify if a patient resides within a 20-mile radius of a treatment center. The goal of NarxCare is to allow practitioners to interact with their patients. NarxCare will be launching on November 27, 2017. Care Notes will be the next tool added to MAPS.

Gaedeke reported that the Department has been meeting monthly with MSP to identify areas where overprescribing is common.

Gaedeke reported that Forrest Pasanski's team met with the DEA and summarily suspended a pharmacy on November 2, 2017. The DEA immediately pulled the pharmacy's license.

PUBLIC COMMENT

None

ANNOUNCEMENTS

The next regularly scheduled meeting will be held January 11, 2018 at 2:00 p.m. in the Ottawa Building, 611 W. Ottawa Street, Conference Room 3, Upper Level Conference Center, Lansing, Michigan.

ADJOURNMENT

MOTION by Bell, seconded by Benivegna, to adjourn the meeting at 4:07 p.m.

A voice vote followed.

MOTION PREVAILED

Minutes approved by the Commission on: January 11, 2018.

Prepared by:
Nakisha Bayes, Board Support
Bureau of Professional Licensing

November 9, 2017



MSP Angel Program

How Angel Started

In June 2015, the Gloucester, Massachusetts Police Department developed a revolutionary new way to fight the war on drugs by doing something about the demand; not just the supply. Under this plan, drug addicts who seek help are placed in a recovery program rather than face arrest and jail time.





PAARI

The Police Assisted Addiction and Recovery Initiative (PAARI) is a nonprofit organization whose mission is to support the Gloucester Police addiction initiative, to aid other police departments to implement similar programs, and to foster a dialogue around the unique opportunity for police departments to take direct action against the disease of drug addiction in their communities.



Gloucester Results

The 376 patients who entered the Gloucester police-led “angel” program during its first year included 88 who had been treated for opioid addiction six or more times before, and 144 who were treated for addiction between one and five times before showing up at the police station seeking help.

The average age of those participants during the program’s first year - from June 2015 to June 2016 - was just over 29 years old.



Gloucester Results

“The high direct referral rate of 94 percent exceeds those reported for hospital-based initiatives that are designed to provide immediate access to detoxification and treatment,” the report reads, noting, “21 percent of those who sought treatment by other means nationally were not able to access it.”

Written by Ray Lamont, Staff Writer, Gloucester Times,
Dec. 22, 2016



MSP Angel Program



Rolled out in October, 2016: The MSP Angel Program allows an individual struggling with drug or alcohol addiction to voluntarily walk into a MSP post during regular business hours and ask for assistance.



MSP Angel Program



In the last year, 30 individuals have been successfully placed into treatment through the MSP Angel Program (as of Oct. 13, 2017).



MSP Angel Program



Through a partnership with the Michigan Department of Health and Human Services, treatment is obtained through the Substance Use Disorder (SUD) Treatment System with assistance of the 10 Prepaid Inpatient Health Plans (PIHP).

If accepted into the MSP Angel Program, the individual will be guided through a professional substance abuse assessment and intake process to ensure proper treatment placement.

An “Angel” volunteer, who is a member of the local community, will be present to support the individual during the process, and to provide transportation to the identified treatment facility.



MSP Angel Program Policy and Procedures

- If a potential participant is in possession of drugs or drug paraphernalia (needles, etc.), he or she will not be arrested. If the potential participant surrenders any of the aforementioned items, they shall be collected and secured in accordance with official orders for later destruction.
- If at any point a potential participant who has relinquished drugs and/or drug paraphernalia under the program subsequently withdraws his or her request for assistance or elects to discontinue program screening, he or she will not be arrested for possessing the items he or she has already relinquished.
- No questioning of the individual will be undertaken in an effort to collect drug intelligence, determine the origins of any drugs relinquished by the potential participant, or any other effort which may undermine the intended purpose of this program - to encourage persons to seek police assistance in getting help for an addiction without fear of arrest.



MSP Angel Program Policy and Procedures

Post commanders shall ensure that local prosecutors are aware of and agree with the implementation of the MSP Angel Program in their area.



MSP Angel Program Policy and Procedures

Potentially disqualifying factors -

- If the individual has an outstanding arrest warrant:
 1. Should the individual have an actionable arrest warrant, he or she will be deemed ineligible to participate in the program and normal agency protocol will be followed, unless he or she is able to post bond and the warrant is for a non-violent offense. Attempts should be made to request an appearance date to allow the participant to complete the prescribed treatment program. If the potential participant is unable to post bond, he or she should be informed that upon completion of his or her legal obligations associated with the warrant, he or she may again seek help.
 2. If the warrant is for a minor offense, failure to appear, or contempt/non-payment, an exception may be made with approval of the prosecuting attorney having jurisdiction over the warrant.



MSP Angel Program Policy and Procedures

3. Should the individual have a non-actionable non-violent arrest warrant in another jurisdiction, (i.e. outside of the pickup range or an advise and release warrant) he or she will be deemed eligible to participate in the program. Documentation from the warrant holding agency shall be included in the original report. The individual shall be advised of the pending warrant(s) and instructed to contact the warrant holding agency once they complete the program.
- The individual is a registered sex offender.
 - The enlisted member is able to articulate a reasonable belief that the Angel or others could be harmed by the individual.
 - The individual is under age 18 and does not have parent or guardian consent.



MSP Angel Program

There is not always a detox or treatment bed available immediately, which is a nationwide problem.

- The MSP policy states:
 - Should placement be delayed, the Angel shall provide the participant with support to ensure he or she returns to the post the following day to follow-up with the Access Center. In these cases, it is preferred that the participant be connected to and placed in an “engagement center” or other interim service. Angels will transport from the post to this service and subsequent travel to a treatment center.
 - The MSP Angel Program is designed to assist individuals in initial access to treatment. Services are determined by the treatment providers and are subject to individual insurance policies and/or eligibility in the PIHP intake process.



Local Agency Partnerships

Municipal, township, and county law enforcement agencies can participate in the MSP Angel Program by partnering with the MSP post whose service area encompasses their jurisdiction. Participation is subject to the MSP Protocol and Memorandum of Agreement. All items listed on the policy/protocol are to be adhered to by the partnering agency.



Angels

Angel Recruiting

- Application and Background Check
- Requirements
 - At least 21 years of age.
 - Valid driver's license.
 - Registered, insured vehicle in operating condition.
 - Ability to provide transportation to a treatment center for participant.
 - Submit to a criminal history background check.
 - If in recovery, must have at least two years in recovery.
 - Live within one hour of the post.
 - Ability to pay for required meals and lodging up front; then request for reimbursement, which may take up to 60 days.



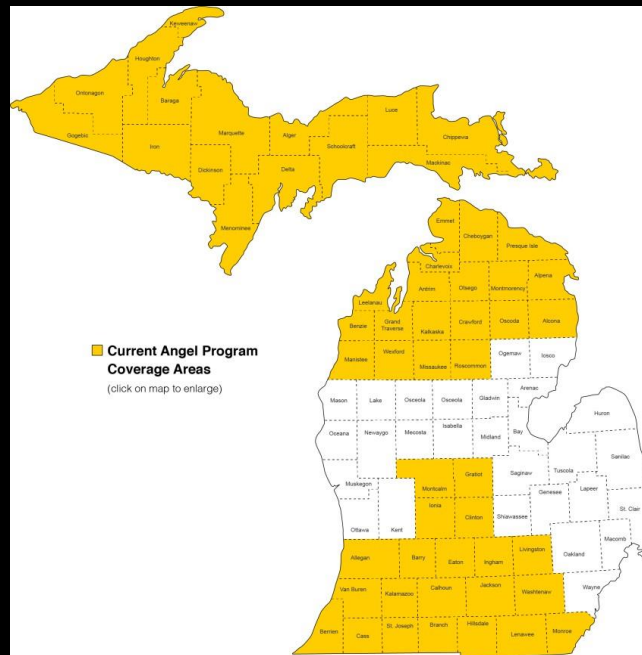
Angel Training

3 Hour Training Curriculum

- Angel Description
- Angel Policy and Protocol
- Angel Pledge of Confidentiality and the Waiver of Liability/Assumption of Risk/Indemnity Agreement
- Angel Guidelines and Tips
- Personal Safety Training
- Quick Checklist for Angels
- Questions and Answers



Current Coverage October 2017



Next up:

6th District
3rd District
2nd District



Questions?

Nancy Becker Bennett

Division Director

Grants and Community Services Division

Michigan State Police

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