
DAY ONE: October 13 Breakout Sessions Descriptions

Keynote Address – CLE Pending

Sam Quinones, Author of the book *Dreamland*

This session will dive into what may be America's most extensive drug crisis. A California-based journalist with deep reporting experience in Mexico, this speaker will weave together individual tales from all quarters of the epidemic. There are the pill mills in down-on-their-luck places like Portsmouth, Ohio, where locals began noticing long lines of patients outside the newly opened pain clinic whose doctor took payment in cash and drove a Porsche. People came to him for aching backs and workplace injuries; they left addicted to prescription opiates. Once those became too expensive, many moved on to heroin brought up by entrepreneurial traffickers from one equally forlorn small town in Mexico.

Quinones will also delve into a burgeoning underground economy of cash, drugs, stolen goods—some traffickers accepted payment in jeans and sneakers, which they could sell back home—run with stunning efficiency by dealers using only cheap cell phones. As deadly and damaging as their product is, it's impossible not to notice the business acumen with which “a small town of sugarcane farmers grew by the early twenty-first century into the most proficient group of drug traffickers America has ever seen.”

Quinones will also exploit the pharmaceutical companies that downplayed the dangers of addiction to grow a massive market for painkillers. The medical community had once shunned opiates, fearing the potential for abuse and addiction, but drug companies seized on one small, badly run study that suggested otherwise, and managed to build a lucrative industry in pain management, one that fueled and then rested upon “a culture of aggressive opiate use.” The result; a “catastrophic synergy” in which over-prescription formed a generation of addicts.

First Breakout Session:

1. Benzodiazepine Use-Navigating Crucial Conversations

Clinicians are often faced with challenges when it comes to having difficult conversations and educating their clients on the pitfalls of benzodiazepine dependence. Steady increases in the number of patients being prescribed benzodiazepines for long term use are leading to increases in the number of patients becoming increasingly psychologically and physically dependent. In many instances, patients are concurrently using pain medications and benzodiazepines, which is a dangerous combination. However, when providers make suggestions to adjust these medications often time's patients do not respond favorably. The goal of this session is to provide practical information and provide the necessary tools to providers to make it easier for them to explain to their clients why tapering and monitoring of benzodiazepines may be necessary, and/or why they will not prescribe the benzodiazepine in the first place. The conclusion of this session will provide attendees with a patient education brochure that can be utilized by providers to help initiate dialogue with patients about benzodiazepine use.

2. **Why are so few physicians treating addiction? What can we do about it?**

Medication-assisted treatment (MAT) in combination with counseling is considered the most effective treatment by the WHO, U.S. Department of Health and Human Services, and ASAM for opioid dependence. Demand for MAT has increased as a result of insurance expansion under the Affordable Care Act and increasing rates of opioid dependence. However, only 46% of U.S. counties have a physician certified to provide buprenorphine treatment, and multiple states do not have a single methadone clinic. Vivitrol has even lower prescription rates than buprenorphine or methadone. Why are so few physicians (especially psychiatrists and primary care physicians) prescribing MAT? This session explores reasons, including the following: historical separation of physicians from addiction treatment; regulatory barriers; low Medicaid reimbursement rates; insurance barriers (e.g. prior authorization requirements); and minimal education in medical schools and residency programs. The session concludes by examining potential State and Federal policies for increasing physician engagement in substance use disorder treatment. Information presented is based on a literature review of medical, public health, and legal literature, as well as interviews by the presenter with over 20 physicians and 15 mental health counselors.

3. **Addressing Addiction Behind the Walls – CLE Pending**

In light of the State's growing opioid epidemic, Indiana's Department of Correction (IDOC) has been transforming from a traditional focus of incarceration to one of rehabilitation. The State recognizes that increased competency in skills of daily living, connections to community-based resources, and interventions that target the whole person through clinical treatment and targeted case management will result in an overall safer community and provide incarcerated individuals a better chance at a life of recovery. In order to address the whole person needs, the IDOC has taken several innovative approaches that will be discussed in this session along with state laws and regulations that have paved the way for this new approach. Highlighted topics include the Department's Program Improvement Initiatives for all IDOC Addiction Recovery Services, Vivitrol Pilot Program, Purposeful Incarceration Initiative, Recovery Coach training, Medicaid/HIP 2.0 Linkage and Integration of Medical Health with Mental Health and Addiction Recovery.

4. **Pharmacists and Student Pharmacists Involvement in Drug Abuse Issues – CLE Pending**

In this 3-part panel presentation, a Purdue pharmacy faculty member and students will discuss their research on drug screening/testing policies in US Colleges of Pharmacy. Then a member of the Medicaid Fraud Control Unit will discuss the Indiana licensing discipline structure and the impact that diversion and addiction can have on a pharmacist or pharmacy student's license. Lastly, another Purdue pharmacy faculty member will discuss how advanced pharmacy students use their expertise to impact those within the Tippecanoe County Community Corrections system. There will be a Q&A period following the presentations.

Second Breakout Session:

1. **MAT - Successful Collaboration with Courts & Law Enforcement - CLE Pending**

This session will provide participants with the basic framework for the implementation of Medicated Assisted Treatment services that is in collaboration with the court services and law enforcement.

Clinical programs discussed will include MAT services with both buprenorphine and Vivitrol. This session will explain how PDMP monitoring, EMR's and Toxicology Services factor into the successful implantation of MAT services and why these aspects of service delivery are crucial to effecting collaboration with court services. In addition, this session will also discuss how confidentiality concerns associated with HIPAA have been addressed in existing programs.

2. Opioids: What Our Community Needs To Know and Prepare - Healing w/ Hope

“Healing our Community with Hope” focuses on The Lutheran Foundation’s success in coalition-building and advocacy within the mental/behavioral health and wellness realm. Additionally, this presentation provides information on their educational initiatives, including their website, Look Up (www.lookupindiana.org). The Lutheran Foundation will share data from a needs assessment that had commissioned in 2013/2014 meant to identify the gaps in mental health and addiction treatment delivery throughout the ten northeast Indiana counties they serve. Praxis Strategies, who conducted the assessment, provided several recommendations that were needed. In response to these recommendations, The Lutheran Foundation initiated a regional mental health coalition to focus on improving mental/behavioral health care and wellness. They have also collaborated with Indiana’s Division of Mental Health and Addiction to further develop system of care within Allen and Adams counties, focusing on mental health, substance abuse, and juvenile justice. For those interested in building coalitions and collaborations, educating the masses on mental/behavioral health issues, and building campaigns meant to reduce the stigma associated with mental illness and addictions, this presentation is for you.

3. Project Point: A New Approach to Improving Care for Patients of Opiate Overdose - CLE Pending

This session will describe the innovations of Indianapolis Emergency Services new project POINT: Planned Outreach, Intervention, Naloxone, and Treatment which was designed to help meet the opioid overdose public health crisis. This program represents a new approach to improving care for opioid overdose patients who receive Naloxone before Emergency Department arrival. This session will outline the laws governing the distribution and administration of naloxone and how POINT connects patients with a trained staff member from the I-MES community-based paramedicine team. This brief Emergency Department Intervention provides a range of services including education on home administration of Naloxone, Naloxone prescriptions, referrals to health system navigators and community based substance abuse treatment options. We will discuss what makes POINT a unique approach to the opioid overdose epidemic and present preliminary data from the patients participating in POINT program from February to August 2016.

4. Treatment, Recovery, and Reproductive Health Services. Doesn’t It Make Sense?

Participants will be introduced to the unique concept, rationale and value of including the topic of reproductive health services into ongoing treatment and recovery efforts with women of child bearing age. Current data regarding the incidence and impact of unplanned pregnancies, survey data from women in active treatment, and the incidence of drug exposed babies and infant deaths in Indiana will also be shared. An overview of available resources and a framework of how to discuss this issue with women will be offered. Participants will also be given the opportunity to provided

important feedback on the feasibility of focusing on this new strategy and their opinions regarding successful implementation.

Third Breakout Session:

1. **Coaching For Success: Integration of the Recovery Model and Medicated Assisted Treatment**

The prevalence of opiate use and misuse throughout the nation has challenged treatment providers to revise treatment and intervention approaches to support Medicated Assisted Treatment. This presentation will highlight Centerstone's recovery model and the partnership with primary care and the criminal justice system in integrating community wrap around supports and medicated assisted treatment for overall client success. This session will provide a comprehensive overview of a recovery oriented system of care, recovery coaches, and developing and maintain relationships with primary care, the criminal justice system, and existing community resources as a catalyst for change.

2. **Drug Abuse at the Crossroads Between the Living and the Dead - CLE Pending**

This session will present real cases to illustrate drug use patterns leading to abuse and fatalities. The unrecognized signs and symptoms and intervention points will be discussed from the clinical, legal and forensic point of view. In addition, postmortem presentation will present findings that should be investigated in patients as possible clinical signs that drug abuse (opiate) is present. Note: This presentation will contain graphic slides that may not be suitable for everyone.

3. **Community Continuum of Supports: A Framework for Community Empowerment**

This presentation proposes a community empowerment framework to address prescription opioid misuse. The discussion is framed through recommendations and findings of a qualitative research study of intravenous opioid use in Scott County. The study sought to identify the underlying causes of the epidemic through eliciting the perspectives of community members' experiences. Mental health, relationships, and community factors were found to be key, interrelated social determinants that served as both risk and protective factors. The framework addresses these social determinants by utilizing practical, multifaceted intervention and prevention strategies at individual, community, and systems levels. Upstream and downstream approaches are crucial to reducing harm, preventing use, and promoting wellness in communities. All community members are targeted in this framework, regardless of their experience with opioid use and its consequences.

4. **The Role of Physical Therapy in the Management of Chronic Pain**

Recently, Centers of Disease Control and Prevention (CDC) released a guideline for prescribing opioids for chronic pain. Physical therapy has been recognized as a safer and more effective chronic pain treatment alternative among people who misuse, abuse, or overdose from these drugs. This presentation provides evidence-based practice recommendations for the involvement of physical therapists in the management of chronic pain due to musculoskeletal conditions, or non-musculoskeletal clinical presentations with concomitant physical impairments. Presenters will share their expertise highlighting the background of this epidemic while examining how physical therapists approach this patient population based on current evidence.

Fourth Breakout Session:

1. How to 10-90 Life: Using REBT Skills in a Recovery Lifestyle

Rational Emotive Behavioral Therapy and other forms of Cognitive Behavior Therapy are widely used in evidenced-based addiction treatment facilities across the country. Many who are wanting to maintain sobriety will struggle with high-risk emotions and behaviors which can easily lead to relapse. This workshop will introduce the basics of REBT, comparing it to the basic elements of computers. This will help clinicians and lay people teach and counsel those suffering from addiction to reduce or even eliminate their “trigger” emotions such as anger, boredom, stress, anxiety, etc. To “10-90 life” simply means learning to replace irrational addictive thoughts with rational, self-improving thoughts in order to give 10% of our mental attention to what happens to us, and 90% of our mental energy to how best to respond to those things.

2. How Pharmacists and Pharmacy Technicians Can Curb Indiana's Meth Lab Crisis - CLE Pending

For the past three years Indiana has led the nation in clandestine methamphetamine lab discoveries. These toxic labs are affecting hundreds of children's lives, destroying property and costing Indiana millions of dollars. Pharmacies are fueling this epidemic with unabated sales of pseudoephedrine. It is estimated that over 80 percent of all pseudoephedrine sales is being used to make methamphetamine. Attendees of this presentation will learn how to use the new laws that protect and empower pharmacists and pharmacy staff to legitimize sales easily without conflict while allowing patients in need of effective decongestants to get the proper treatment.

3. Harm Reduction Works

Harm reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use. Licit and illicit drug use is part of our world but we need to work to minimize its harmful effects rather than simply ignore or condemn folks. This session will help to understand that drug use is a complex, multi-faceted phenomenon that encompasses a continuum of behaviors from severe abuse to total abstinence, and acknowledges that some ways of using drugs are clearly safer than others. It also examines how drugs users themselves can be the primary agents of reducing the harms of their drug use and how we can empower users to share information and support each other in strategies which meet their actual conditions of use. It will address what harm reduction strategies and results are taking place in Southern, Indiana.

4. Born Dependent -Neonatal Abstinence Syndrome: Helping Mom & Babies

The Indiana Perinatal Quality Improvement Collaborative (IPQIC) was developed to establish pilot programs with volunteer hospitals to implement appropriate and effective models for Neonatal Abstinence Syndrome identification, data collection and reporting. The goal of the pilot is to establish the prevalence of NAS in Indiana and to test the processes used for potential expansion to all Indiana delivering hospitals. In this session you will hear from representatives of the 4 pilot hospitals on how they have implemented the IPQIC guidelines and the challenges and successes of universal screening of all pregnant women, testing of newborns, reporting to the State Dept. of Health and addressing treatment for the mother before and after delivery. This session will also explore how Division of

Child Services (DCS) plays a very important role in helping the mother cope with her addiction and developing life skills while also protecting the baby.

General Session: International Efforts to Reduce Heroin Supply – CLE Pending

Puebla Attorney General Victor Antonio Carrancá Bourget will address the topic of production, trafficking and consumption of Heroin in Mexico, particularly in the Southern portion of the country where trafficking comes up from South America and makes it way north throughout Mexico, the United States and beyond.

Learning objectives:

1. Understand current trends and analysis by the Attorney General's Office, who is charged with investigating and prosecuting all crimes in the state
 2. Identify trafficking trends of product coming through Mexico from the south and the connection with other trafficking activities
- Learn about the public health crisis in Mexico and Mexico State AGO response

DAY TWO: October 14 Breakout Sessions Descriptions

General Session: Opioids & Pregnancy: Life Course Perspectives

This session will review the history and current epidemiology of the opioid epidemic - paying particular attention to pregnant women and their newborns. It will review the care of the dyad emphasizing the role of screening and treatment including the non-pharmacologic management of NAS. Additionally, this session will explore the ways in which opioid addiction can impact those throughout the full life course continuum if prevention and early detection strategies aren't implemented soon enough.

First Breakout Session:

1. Recovery Works & the Gold Card Program

Promoting recovery through community support and treatment/intervention is critical in reducing the number of persons with mental health and addiction disorders that are entering our criminal justice system. This session shows an overview of the state funded programs through Divisions of Mental Health and Addiction (DMHA) that would be beneficial in treating those with substance abuse. It explores how the Recovery Works is a voucher program designed to provide support services to those without insurance coverage who are involved with the criminal justice system. It also shows how it reduces recidivism and increases the availability of specialized mental health treatment and recovery services in the community for those who may otherwise face incarceration. It also provides an overview of the Gold Card program which allows Indiana prescribers to become Gold Card providers and prescribe Suboxone without a prior authorization.

2. Don't be a Weak link: Developing a Multidisciplinary Public Safety Naloxone Program - CLE Pending

In this session each participant will be informed of the laws making the availability of naloxone possible. Best practices will be shared to design a system that unites all responders to assist individuals experiencing an overdose. We will further discuss how public safety can be a community wide resource on naloxone use. A complete, comprehensive training program will be outlined and each person will be given access to presentations that can be utilized by their home agency. Some technology pointers will also be given to allow the participants to leverage the virtual classroom to educated responders. Kit setup and demonstration will also be presented live. This will give each attendee the tools to plan and implement a naloxone program.

3. Non-Opioid Pain Management of Sports Injuries for Adolescents

In today's society, young athletes are experiencing more and more pressure to be the best at their sport. They practice year-round, participate in club leagues when they're in the off season, take private lessons and more. Despite the increased work ethic and desire to succeed, young athletes are already more prone to injury because their bodies are still growing and developing. What typically comes along with sports-related injuries? Prescription pain killers. This session will explore non-opioid pain management options when treating sports related injuries in adolescents and how healthcare providers can play an important role in preventing prescription drug abuse in youth.

4. Managing Acute Pain in a Patient Suffering From Heroin Addiction: 4 Patient Cases

In this session, Tracy Brooks will present the past and current history of IV heroin drug use. Each patient is in need of acute pain management both while they are in the hospital and beyond discharge. This session will discuss the difficulties associated with this area of pain management from both the evidence based direction and experience based direction. The objectives of this session include recognizing that all patients have a right to the treatment of acute pain, a summarization of the main concepts utilized in patients with present and or past drug abuse history, and finally a patient case will be examined to develop the appropriate pain management plan in a patient with acute pain and a current or past history of IV heroin use.

Second Breakout Session:

1. Drug Store Cowboys: Pharmacy Robbery and Burglary for Controlled Substances - CLE Pending

According to the Office of National Drug Control Policy, prescription drug abuse is the nation's fastest- growing drug problem and is significant enough for the Centers for Disease Control and Prevention (CDC) to classify the abuse of prescription painkillers as an epidemic. Given these trends, the illicit value of controlled prescription drugs creates a powerful incentive for pharmaceutical diversion, particularly in the form of robbery and burglary of retail pharmacies. This presentation utilizes interview data collected from a sample of offenders convicted of these

crimes to better understand their motivations and methods as well as identify preventative measures to enhance the security of pharmacies and the safety of their staff and customers.

2. Adolescent Substance Use Disorder Treatment: What's the Latest?

Drs. Hulvershorn and Adams will provide an update on diagnosis and treatment of adolescents with substance use disorders. They will focus on the delivery of evidence based models (including pharmacotherapy) and describe their work providing screening and brief interventions to youth in school-based settings. Delivery of treatment via telemedicine will also be addressed.

3. Drug Monitoring Program Data - CLE Pending

Making a prosecutable case against a pill-mill operator and its employees can be challenging. Because these cases always involve a practitioner who has legal authority to prescribe controlled substances, a considerable amount of evidence is required to prove that the prescribing was outside the scope of accepted medical practice and without a legitimate medical purpose. With the advent of Prescription Monitoring Programs (PDMPs) there is an opportunity to quickly identify high-volume prescribers. MITRE used advanced analytics on 12 million records of Indiana's PDMP data, INSPECT. Employing visual and statistical analyses, graph analysis, geo-spatial analysis and machine learning techniques along with MFCU's current analysis and investigative methods, we will show the future of using data analytics in investigations. We will present a data-driven, web-based, actionable tool to identify overprescribing, negligent prescribing, and other schemes. In this session, attendees will learn to identify dangerous prescribing trends, identify the lethal combinations and quantities, and use the morphine equivalency tables. Attendees will have a chance to test their knowledge through participation in case examples.

4. Identifying and Implementing Effective Prevention Strategies to Combat the Opioid Epidemic- Practical Application in Your Community

Learn how to assess the specific needs in your community to prevent the spread of opioid abuse and gain practical skills on implementing effective prevention strategies to address this epidemic. Obtain knowledge through examples provided of grassroots efforts to prevent the spread of the opioid epidemic by individuals with "on the ground" experience. Participants will engage in activities to better understand prevention science and the application of community – level prevention models

General Session: Power of Prevention

J. David Hawkins, Ph.D.

Building Local Capacity to Prevent Prescription and Opiate Drug Abuse Before It Happens

A crucial first step in tackling the problem of prescription drug abuse is to raise awareness through the education of parents, youth, patients, and healthcare providers. Although there have been great strides in raising awareness about the dangers of using illegal drugs, many people are still not aware that the misuse or abuse of prescription drugs can be as dangerous as the use of illegal drugs, leading to addiction

and even death. Healthcare providers play a critical role in prescription drug misuse and abuse prevention. They can screen their patients to identify signs of prescription drug abuse or dependence, and talk with patients about the negative effects of misusing prescription drugs. Patients and families need to ensure they use prescription drugs appropriately, store them securely, and dispose of them safely. Law enforcement and the rest of the communities, can help educate the public through awareness events and harm reduction strategies. This session offers a compelling description of the extent to which the prescription drug abuse problem in America has grown over the last decade, and how we all play in a role preventing it.

Objectives:

1. Learners will be able to describe risk factors that predict substance abuse and protective factors that reduce the likelihood of abuse.
2. Learners will be able to describe tested preventive interventions proven to prevent prescription and opiate drug abuse before misuse emerges.
3. Learners will be able to describe effective community based strategies for building local capacity to prevent substance abuse.

Third Breakout Session:

1. Bad Medicine

This presentation will provide an overview of the current public health crisis that exists in Indiana related to the abuse of prescription drugs and the wide reaching impact this is having in our communities. Dr. Mangiacarne will demonstrate how physician prescribing methods continue to impact this epidemic. This presentation will describe the evolution of these practices and the external forces that impact it. While there has been increased attention to the widespread abuse of opiate prescribing, less attention has been paid to the impact of tranquilizers in the role of addiction. Recent research has determined that medications other than opiates also play a key role in the spike in overdose deaths. Dr. Mangiacarne will describe the common mistakes and pitfalls that occur within the medical practice as it relates to the prescribing of highly addictive medications primarily for the treatment of pain and anxiety as well as discuss safe and effective options.

2. Community Collaboration and MAT: How Our Community Addressed the Substance Abuse Crisis

Substance Abuse is a chronic brain disease that typically results in dysfunctional behaviors in both the patients' personal and professional life. A multidisciplinary approach, including medicine, addiction specialists and behavioral specialists has been found to be the most effective. However, providing an integrated treatment plan that addresses all of the patient's needs can be a challenge in our traditionally fractionated healthcare system. This session provides an opportunity to see how a medication assisted treatment center, community mental health center and public health department can partner efficiently and effectively to address a substance abuse patients' needs during an opioid epidemic.

3. How Do We Keep Track of Professionals With Substance Use Disorder? – CLE Pending

A major driver of prescription drug diversion in the healthcare setting is opioid addiction, which has reached an epidemic level both in the U.S. and here in Indiana. Healthcare providers who divert controlled substances away from patients pose a risk to themselves as well as a risk to patient, co-workers, and employers. Diversion has the potential to occur at every institution that handles controlled substances and it is hard to identify warning signs until it is too late. Hospitals and other healthcare facilities have had issues with hiring licensed providers who have a history of drug diversion that did not show up on background checks conducted by the facility as they don't always disclose their complete work history. This session will explore the need for more collaboration with law enforcement and better resources that provide those healthcare facilities with the means to hire the best employees to provide adequate patient care.

4. Youth Focused Panel Discussion on Substance Abuse Prevention

This session will preview the 2016 Parents360 Rx Action Toolkit created by the Partnership for Drug Free Kids that can be used by professionals from law enforcement, prevention and treatment, as well as by any concerned adults who want to share information about RX medicine abuse with their friends, family, neighbors and organizations. The tool kit consists of videos, a discussion guide and power-point presentation that are available to individuals and organizations at no charge. The session will demonstrate how easily it is for individuals to present the video and power-point materials which address the impact of medicine abuse on real families and to stimulate informal discussions. The focus of this video is prescription medicine abuse and its connect to heroin abuse, considered by many to be the biggest substance abuse threat we currently face and one that continues to be unknown to many parents and underestimated by many others. This session will also feature a youth panel that will discuss effective communication strategies and messaging regarding the dangers of Rx Medications.

General session: Strategies for Success – A State's Attorney General Panel

Moderator: Rich Bramer

- This is an expert panel session of Attorney General Staff that will provide information on successful initiatives and legislative actions that helped to fight the opioid epidemic in their states. A moderator will facilitate discussions on: (1) legislative changes related to opioid prescribing; (2) strategies and efforts involved with harm reduction, prevention, and law enforcement; and (3) identifying promising changes that can be made to reduce opioid abuse across the state of Indiana. Discussions will focus on the implementation of the different policies and their perceived effects on stakeholder groups. Information collected will provide the audience with key information that will help ongoing community and legislative efforts.