



General Session 9:00 am –10:00 am

Plaza Ballroom

The Impact of Marijuana Legalization

This session will cover related subjects leading to the facts about the impact of legalizing “medical” and recreational marijuana in Colorado. Subject matter will include such topics as the war on drugs, success or failure, the truth behind the drug legalization movement, normalization of marijuana and data covering the six years of commercialized “medical” marijuana and two years of recreational marijuana in Colorado. The attendees will be able to determine for themselves whether pro- or anti-legalization groups were accurate in their predictions about the impact of marijuana legalization.

Learning Objectives—At the completion of this presentation the participant will be able to:

- Assess the success or failure of the U.S. drug policy with facts, not rhetoric.
- Understand what has been happening in Colorado since marijuana was legalized.
- Assess the success or failure of legalizing marijuana in Colorado.

Breakout Sessions 10:15 am – 11:15 am

Clinical

Plaza AB

1. Medical Professionals’ Obligation to Improve Opioid Safety

Taking steps to ensure that health care professionals who prescribe opioids are properly trained and educated in opioid prescribing is a critical and necessary step in preventing future substance abuse disorders. This session will provide an overview of the acute pain legislation that went into effect July 2017 and a refresher on the chronic pain regulations and the *Do No Harm* Toolkit. The medical community has accumulated a of high quality data over the past 5-10 years showing the harms of opioids used in chronic pain. As most practitioners can attest to, incorporating this data into practice can be an enormous challenge when treating the opioid tolerant population. This session will explore some practical and necessary strategies for compassionate treatment of the opioid tolerant and chronic pain population.

Learning Objectives—At the completion of this presentation the participant will be able to:

- Learn the specifics of Indiana’s new acute pain opioid legislation and understand its goal of limiting opioid prescribing, recognize when it is to be applied, and learn documentation requirements to provide more than 7 days of supply.
- Understand why extra precaution should be used when prescribing opioids for individuals under the age of 25, patients with personal history of substance misuse or addiction, patients taking benzodiazepines or other sedatives, patients with unstable mental health issues or patients with respiratory conditions.
- Learn the reasons certain historical and physiologic factors must be considered when initiating or continuing prescribing opioids and identifying high risk clinical situations wherein opioids should likely not be continued, especially in primary care.

Enforcement

Plaza CDE

2. Overdose Death Crime Scene Investigations

This session will cover the prevalence of overdose deaths in the United States. Specifically this session will teach you that an overdose scene should be treated as a crime scene. Effective investigation will often allow law enforcement officials to locate the supplier of the fatal drugs. When a suspect has been identified, it is important to build a case able to convict the perpetrator of this crime. Therefore real-world cases will illustrate effective strategies for investigating an overdose scene. This presentation will address how to identify and collect key evidence that will help you build criminal cases that can obtain convictions against the drug traffickers responsible for the death.

Learning Objectives - At the completion of this presentation the participant will be able to:

- Recognize indicators that a death may be from an overdose.
- Treat an overdose site as a crime scene and investigate the scene thoroughly.
- Identify the evidence needed to effectively build a case that will convict those that contribute to the overdose.

*Prevention / Education*

Suite 6-7

3. An Overview of Overdose Lifeline and PreVenture: Personality Targeted Interventions for Adolescent Substance Misuse

Over the course of decades we have cycled through drug education programs - most with a common blanket approach and application of scare tactics to prevent students from drinking or using substances. Unfortunately, many of these programs have failed and are becoming increasingly irrelevant to today's youth. In recognizing that most teenagers who try alcohol, cocaine, opioids or methamphetamine do not become addicted, mental health professionals have started to look at individual risk factors among those who do end up addicted. Preventing the disease of addiction rather than reacting to it is proving to be more important than ever, especially as we see a growing number of adolescents living with addiction. This session will look at unique approaches in prevention programming to encourage community partners to think outside of the box to improve mental health among their youth. One such approach that will be examined is that of PreVenture's personality-targeted program out of Canada. The program looks at the individual, rather than the group, to develop strong coping skills, specifically addressing an adolescent's own personality and risk-taking behavior. Attendees will also hear about additional resources available through Overdose Lifeline, Inc.

Learning Objectives—At the completion of this presentation the participant will be able to:

- Identify the current needs of their communities in addressing the mental health issue of addiction, with a strong focus on prevention among youth and adolescents.
- Examine past and present drug prevention programs and critically assess their effectiveness at the community level.
- Evaluate the methods, application and outcomes of the prevention programs.

Treatment

Suite 4-5

4. Fresh Start: A Holistic, Family-Centered Approach to Residential Addiction Treatment

The State of Indiana has been hit particularly hard by the opioid epidemic. In 2016, the waitlist for children in need of foster care placement increased dramatically to 23,000 children waiting for a home. More than half of these children have been removed from their home due to the opioid crisis. In response to this dramatic need, Volunteers of America, Indiana worked in collaboration with the Department of Child Services to open the Fresh Start Recovery Center. This program is an innovative treatment approach that allows children to live with their mother during the mother's treatment rather than having to be removed from the family and placed onto the foster care waitlist. The program employs a holistic approach to treatment that includes addictions recovery, connection with Medication-Assisted Treatment, mental health treatment, and around-the-clock in vivo parenting training. This program boasts a successful completion rate nearly double the national average, a dramatic decrease in infants born with Neonatal Abstinence Syndrome, and shorter maternal involvement with the child welfare system. Attendees will learn about the catastrophic effects of Neonatal Abstinence Syndrome as well as the development, implementation, and evaluation of this innovative and effective intervention.

Learning Objectives—At the completion of this presentation the participant will be able to:

- Learn about the catastrophic effects of the opiate epidemic on families.
- Understand the damaging effects of mother/infant separation as a result of addiction.
- Learn about a new, innovative approach to treatment that allows mothers and children to remain together during treatment.



Breakout Sessions 11:30 am—12:30 pm

Clinical

Plaza AB

1. The Opioid Crisis: Rethinking the First-Line Approach to Pain

There is a growing body of research that validates the effectiveness of chiropractic and acupuncture services, leading many respected health care organizations to recommend these alternatives as a drug-free approach to pain relief. In 2017, the American College of Physicians, CDC and Joint Commission all released guidelines for the treatment of acute and chronic pain to recommend first using non-invasive, non-drug treatments before resorting to drug therapies. According to these guidelines, prescription opioids should be a last resort for those suffering from low back pain, as the risk of overdose may outweigh the benefits. This session will discuss ways all stakeholders may explore the appropriateness, efficacy and cost-effectiveness of alternative pain management therapies, including proper nutrition, and embrace these solutions as a realistic opportunity for America's opioid exit strategy.

Learning Objectives—At the completion of this presentation the participant will be able to:

- Identify non-pharmacologic interventions for pain treatment across a variety of patient populations and healthcare delivery settings.
- Recognize evidence-based, non-pharmacologic therapies within best practice models for pain management.
- Understand ways to improve access to non-pharmacologic therapies for providers.

Prevention/Education

Suite 6-7

2. Allen County Drug Task Force

Members of the Allen County Drug Task Force will share their collaboration efforts to address the opioid crisis in one of the most affected areas of the state. Panelists will share their struggles and barriers such as healthcare provider bias, lack of awareness of crisis among public officials and businesses, increased volume of individuals with substance abuse disorder in the judicial system and lack of access to MAT for pregnant women and other affected populations. This session will discuss ways this multidisciplinary group addressed these issues and implemented solutions in their community. Attendees will learn about their successes in overcoming many of these barriers including the facilitation of seminars, meetings and media events, collaboration efforts to fund sober living housing for courts, ways they increased access to treatment prior to release from jail and partnerships to increase capacity to provide treatment to individuals with substance use disorders.

Learning Objectives – At the completion of this presentation the participant will be able to:

- Develop strategies to engage stakeholders and work together as a community.
- Identify new ideas for collaboration with the community to address barriers or challenges.
- Recognize ways to increase access to treatment within the community.

Enforcement

Plaza CDE

3. Effects of the Opioid Crisis on Public Safety

The epidemic of overdoses and deaths from the abuse of prescription painkillers and heroin has devastated countless families and communities across our state. Leaders at the local level experience the human costs of this public health crisis one life at a time. We confront the tragedies of this epidemic in rural counties and in urban cities, and no portion of society is immune from the devastation. Families are shattered without regard to income, race, ethnicity, gender, educational attainment or family structure. This session will address the overall impact on public safety, which includes law enforcement, courts, jails and CHINS (Child in Need of Support), as all are severely impacted. City and county leaders are entrusted with preserving the health, safety and vitality of their communities. There is a duty and a balance to break the cycles of addiction, overdose, and death that have taken hold in so many corners of this state by recognizing that while addiction is a disease, but it is also necessary to hold people accountable for their action when innocent people have to pay the price.

Learning Objectives—At the completion of this presentation the participant will be able to:

- Understand how children of parents with substance use issues are more likely than their peers to experience abuse and neglect.
- Recognize how law enforcement is on the front lines of this crisis every day.
- Understand the underground drug economy fueled by the opioid crisis.

*Treatment*

Suite 4-5

4. Effects of Opioid Addiction on the Workforce

According to one study, prescription opioid abuse alone cost employers more than \$25 billion. Other studies show people with addictions are far more likely to be sick or absent, or to use workers' compensation benefits. When it comes to workers' comp, opioids are frequently prescribed when non-opioid pain relievers would be sufficient. National Safety Council released a survey showing 4 of 5 employers in Indiana said they've confronted painkiller abuse in the workplace. Companies and organizations of all sizes have an important role promoting the health and safety of employees and managing risks in the workplace. This session looks at how employers who have strong workplace policies, education, health benefit programs and well-trained managers create safe and healthy environments in which both employees and business thrive.

Learning Objectives—At the completion of this presentation the participant will be able to:

- Identify the emotional and economic effects of opioid use on the workforce.
- Address opioid use and addiction among healthcare employees.
- Understand how employers can take a proactive role in identifying drug use and providing resources.

Lunch Session 12:45 pm — 1:45 pm**Plaza Ballroom****Jail Chemical Addiction Programs (JCAP)**

Active Resources, Boone County Sheriff's Department and Boone County Probation work closely together on a comprehensive approach in treating addiction and other mental illness, both inside the jail and out into the community. They believe in a holistic approach, which includes Boone County's jail-based intervention program, improved access to mental health services, the implementation of MATS, and continuing services post-incarceration. The Dearborn County JCAP is founded on the principle that effective chemical dependency treatment initiated early and comprehensively can alter the clinical course of one's addiction to psychoactive chemicals. It utilizes the "Strategies for Self-Improvement and Change (SSC)" model as its core programming, delivered in an intensive outpatient format. Hear how both of these programs can save lives, improve treatment outcomes, lower recidivism rates, and improve the health of their communities.

Learning Objectives—At the completion of this presentation the participant will be able to:

- Demonstrate how treatment providers can work closely with county officials to get people with substance use disorders into treatment, which begins at the main point of entry and continues upon release into society.
- Understand the need to treat substance abuse disorders and underlying health problems concurrently to improve treatment outcomes.
- Identify how JCAP has helped participants recover from addiction while incarcerated.

Breakout Sessions 2:00 pm — 3:00 pm*Clinical***Plaza AB****1. Psychological Considerations in Directing Care for Patients with Chronic Pain**

Navigating clinical care of patients with chronic pain is complex, requiring one to balance the needs of the patient with safety and legal/ethical considerations. A critical component of effective care in many medical specialties is psychological evaluation of patients, especially as risks for opioid treatment involve key areas that are the specialization of behavioral assessment providers. Patient risk factors can be effectively identified through a thorough psychological evaluation and can mitigate risk, especially related to key areas of compliance, behavioral management of controlled substance prescriptions, and substance abuse risk. Inclusion of psychological assessment in medical decision-making has served as a current model for interdisciplinary practice and should be included in future investigation.

Learning Objectives—At the completion of this presentation the participant will be able to:

- Identify factors contributing to complexity in management of patients with chronic pain.
- Understand components of psychological assessment, including evaluation of specific risk factors for patients and healthcare providers, and understand how these are relevant to advanced pain care.
- Outline areas for future research related to this proposed interdisciplinary model of practice.



Enforcement/Prevention

Plaza CDE

2. Porter County Heroin Response Project

The first heroin video produced by the Porter County Sheriff's Office focuses on education and prevention. This second video highlights the challenge for law enforcement, the emergence of fentanyl, and the fact that it's not just a Porter County crisis but a national crisis. The video also addresses the need for the community, not just law enforcement, to respond to the crisis in order to reach a solution; and it, highlights the need for parents to take accountability and responsibility. This presentation will include the HORT initiative wherein patrol investigates all overdoses as crime scenes. A PowerPoint presentation will include Porter County working with DEA, highlighting charts of dealers and the impact overdoses are having not only in Porter County but in Northwest Indiana.

Learning Objectives—At the completion of this presentation the participant will be able to:

- Understand that the heroin crisis is not just a law enforcement problem.
- Understand the importance of the HORT concept, in which valuable information is secured at an overdose scene and shared to area drug units for the explicit purpose of identifying and arresting drug dealers.
- Identify ways the community can respond to the crisis and help be a part of the solution.

Pharmacy

Suite 6-7

3. Recovery and the Treatment of Opioid Use Disorder: A Pharmacist's Perspective

This session will focus on the concept of recovery and how pharmacists can play a valuable role in facilitating entry into remission from opioid use disorder. The information will be presented from the viewpoint of a pharmacist who had a 15 year history of substance use and was a Medicated Assisted Treatment (MAT) patient. Topics covered will include how to properly counsel patients receiving MAT, ways to discuss issues of concern without generating conflict, and identifying local resources that may be helpful to the patient, and/or their families.

Learning Objectives—At the completion of this presentation the participant will be able to:

- List the dimensions of recovery as described in the Substance Abuse and Mental Health Services Administration (SAMHSA) definition of recovery.
- Summarize the goals of treatment when utilizing medication assisted treatment.
- Outline the signs and symptoms of a substance use disorder and how pharmacists can be a touchpoint in the recovery process.

Treatment

Suite 4-5

4. Residential Peer - Support Recovery: What Works and What Doesn't

The first half of this session presents the programs and results (12 month follow-up) in behavior change and social/ psychological functioning for 17 residential communities in Kentucky. The second half presents data collected from a sample of more than 1,600 of these participants where these subjects were queried as to their life-time history of drug and alcohol use and any experiences with the medication buprenorphine/ naloxone 4:1. Both studies are under direction of the University of Kentucky Center for Drug and Alcohol Abuse. Conclusions are that 1) motivated men and women with the disease of poly substance use disorder can recover in long-term, peer-support, gender-tracked, residential communities where a protective setting is created for abstinence from all forms of euphoricants and where 12 Step principles and actions are inculcated and 2) that this population has historically found little success and apparently considerable problems when using buprenorphine.

Learning Objectives - At the completion of this presentation the participant will be able to:

- List the major phases and content that are common to the residential, peer-support communities at the Recovery Kentucky/ Healing Place locations.
- Cite in a general way the 12 month follow-up statistics for this population regarding 1) reductions in drug and alcohol use, depression, anxiety and legal-system encounters, 2) increases in employment, family involvement and perceived satisfaction in life and 3) known mortality figures.
- Cite in a general way the percentages of people in this population's prior experiences with buprenorphine / naloxone.



General Session 3:15 pm—4:15 pm
Plaza Ballroom**Keynote Speaker— Governor Chris Christie**

New Jersey Governor Chris Christie discusses lessons he has learned about fighting the drug abuse crisis throughout his public-service career in New Jersey and how he now is helping apply these lessons on a national scale via his role as Chairman of the President’s Commission on Combating Drug Addiction and the Opioid Crisis. Governor Christie discusses his belief in the need for a holistic approach to battling drug addiction by increasing funding for lifesaving overdose antidotes; expanding the successful recovery coach program; and proposing and imposing limits on opioid prescriptions. Governor Christie also discusses treating drug-addicted offenders through mandatory drug court programs such as one he implemented in New Jersey.

Learning Objectives— At the completion of this presentation the participant will be able to:

- Recognize the benefits of a well-rounded, all-encompassing holistic approach in battling addiction.
- Understand the value of limiting opioid prescriptions in the fight against drug abuse.
- Identify steps taken by New Jersey to fight the opioid crisis.

Breakout Sessions 4:30 pm—5:30 pm
*Clinical***Plaza CDE****1. What We Wish We Would Have Known About Perinatal Substance Abuse**

Pregnant women are the most motivated to recover from substance abuse when compared to other populations. Prioritizing their care has the potential for a substantial impact on generational addiction and the opioid epidemic in Indiana. In this session, presenters will provide a platform for those in the trenches caring for pregnant women to share ideas, examine solutions and show stakeholders the hardships faced. Additional intent is to impart advice, mentorship and knowledge that will urge medication-assisted treatment providers not currently managing pregnant women to consider doing so. Experienced high risk pregnancy providers will describe their lessons learned while developing and instituting a medication-assisted treatment program for pregnant women. Presenters will demonstrate their response to barriers incurred including protocol development and implementation, ancillary service procurement and collaboration, education attainment and dispersal, and finally, peripartum management.

Learning Objectives— At the completion of this presentation the participant will be able to:

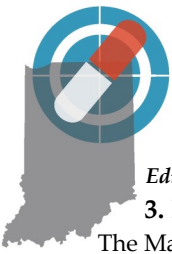
- Provide a platform to cultivate critical thought and dialogue among those who care for pregnant women with opioid use disorder.
- Encourage medication assisted treatment providers to care for pregnant women and make stakeholders aware of the adversity faced in their care.
- Prevent other practitioners from recreating the wheel in developing a medication assisted treatment program for pregnant women.

*Enforcement***Plaza AB****2. Synthetics and Other Emerging Drug Trends**

This session will provide an inside glimpse into the tactics, techniques and procedures utilized by Mexican Drug Trafficking Organizations. Staff Sergeant Samuel La Corte has worked on numerous projects with the Indiana State Police Drug Enforcement Section by providing analytical support to Domestic Marijuana Eradication and Suppression missions. Sgt. LaCorte will address ways law enforcement can use analytical data to identify emerging drug trends, overdose deaths and other drug related crimes. Attendees will also gain valuable information on Indiana drug trends and prices, with a focus on heroin and synthetic opiates.

Learning Objectives— At the completion of this presentation the participant will be able to:

- Recognize indicators law enforcement can use to identify Mexican Drug Trafficking organizations.
- Identify resources to support detection, interdiction and curtailment of drug trafficking activities.
- Learn how analytical data can help law enforcement track drug trends and overdose deaths.



Education/Prevention

Suite 4-5

3. Fishers Mental Health Initiative

The Mayor of Fishers went on a police ride-along and discovered that his city had a mental health challenge that until that time went unnoticed. In 2016 Fishers had 189 immediate detentions, 39 suicide attempts, and 11 death by suicides. He asked what could and what should they be doing as a community to help citizens in silent despair. He put together a team of mental health experts, public safety officers and school officials. His mission assignment was to create a community that embraces mental health before a crisis occurs. This presentation talks about the journey toward making a difference.

Learning Objectives—At the completion of this presentation the participant will be able to:

- Understand the challenges that led to the creation of the Fishers Mental Health Initiative.
- Identify the management structure and deliverables of Phase 1 of the Fishers Mental Health Initiative.
- Define the purpose of Phase II of the Fishers Mental Health Initiative.

Enforcement

Suite 6-7

4. Battling the Drug Crisis from Behind the Bench

Our criminal justice system is overloaded with substance abuse offenders. This session will look at different ways that judicial systems are dealing with the opioid crisis in their counties through evidence-based practices. Get a closer look at Dearborn County's problem-solving drug court, which was developed as an innovative response to deal with offenders' problems, including drug abuse and mental illness. Look at how the Veterans Justice Outreach in Cincinnati has partnered with that court to develop programs, responsive to the complex needs of justice-involved veterans. Many counties, such as Allen, are tackling the crisis with post-conviction programs, in lieu of problem-solving courts. Judge Wendy Davis will discuss Allen County's HOPE probation program and how clients can be directly placed on HOPE Probation at the time of sentencing or can be modified from regular supervision following a violation if the client is in need of more accountability. Clients are required to report once per week for scheduled appointments, undergo increased home visits, and be placed on a random urine screen hotline. This session will focus on combating common misconceptions about problem-solving courts and highlight the recovery and financial successes for participating communities.

Learning Objective—At the completion of this presentation the participant will be able to:

- Identify how drug courts collaborate with treatment and healthcare providers to use Medicated Assisted Treatment and other individualized treatment and recovery models.
- Discuss the post-conviction program options and the new legislative pilot (SB 510) in which Allen County is participating.
- Understand the importance of regional collaboration through an example of the Dearborn County Veterans Treatment Court, which is certified to serve justice.


General Session 9:15 am—10:15 am
Plaza Ballroom
The Good, the Bad and the Outcomes of Medicated Assisted Treatment

Medication Assisted Treatment has been the subject of scrutiny since its inception. This session will feature a panel to discuss how we increase both access and accountability of MATs. Although progress continues with the use of medication, many concerns still remain. Research has confirmed the effectiveness of medications in combination with a comprehensive treatment program, but many people continue to be wary. You will hear from treatment providers who have found all FDA approved MATs to be necessary tools in the toolbox. A different perspective suggests that MAT treatment is just trading one drug for another and you are not truly in recovery until you are totally abstinent and working the 12 step program. It will be argued from a law enforcement perspective that a lot of substance users obtain prescription opiates outside of legitimate medical channels by buying or selling unused medications on the street. The more readily available opioids are through the illicit drug trade, the less likely an individual with a substance use disorder may be to seek legitimate medical assistance. The panel will discuss the need to find a balanced approach between public health and public safety as it relates to MAT.

Learning Objectives: - At the completion of this presentation the participant will be able to:

- Understand how medication is not the only solution but can be an integral part of someone's treatment plan to aid in their recovery while they detox from the physical symptoms of withdrawal.
- Understand how treatment providers can provide comprehensive treatment.
- Examine how we need to address the diversion and accessibility of MATs on the streets.

Breakout Sessions 10:30 am—11:30 am
Clinical
Plaza AB
1. Hospital Opioid Prescribing Policies and Safe and Compassionate Opioid Weaning

This discussion will address different reasons to consider weaning from opioid therapy, options for the rate of wean based on reasons for weaning, how to develop a compassionate wean, options to manage withdrawal symptoms should these occur, and patient education and engagement. Also discussed will be the problems of opioid prescribing and the steps St. Vincent Hospital Network has taken as a medical group to implement policy for a ceiling to opioid prescribing. This will include the process and implementation as well as monitoring of the process. Necessary resources to support the policy implementation (consultative education and weaning support) will be included.

Learning Objectives—At the completion of this presentation the participant will be able to:

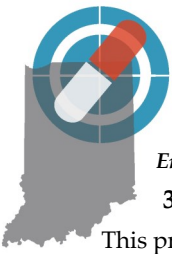
- Understand how it is appropriate to consider an opioid wean when the risks associated with treatment begin to outweigh the benefits.
- Examine tools and therapies use to help wean a patient from opioids.
- Understand a hospital's policy on opioid prescribing and why it is successful.

Prevention
Plaza CDE
2. How State Agencies are Addressing the Opioid Crisis Through Technology

The Indiana State Department of Health is addressing the opioid crisis on various fronts. They include collecting information on opioids within the state for statistical analysis, monitoring the distribution of naloxone within the state through the website OptIn.In.gov and working with local health departments and local coordinating councils on community outreach. The state prescription drug monitoring program, INSPECT, is one of the most important tools prescribers, dispensers and law enforcement have to be able to combat and address the opioid epidemic in the state. New changes are happening with the program which will not only benefit healthcare and law enforcement but also the state as a whole as we move into a new era of using data analytics to examine communities struggling with opioids and the consequences Indiana is facing.

Learning Objectives—At the completion of this presentation the participant will be able to:

- Understand what types of opioid-related information is available from the ISDH and how to request it.
- Understand the partnerships and collaboration that are happening among state agencies in regard to data sharing.
- Identify new changes to the INSPECT system and how it will benefit users.



Enforcement

Suite 6-7

3. State of Drug Enforcement and Interdiction in Indiana

This presentation will focus on law enforcement's efforts to reduce the flow of illegal narcotics across our highway system. Interdiction not only means car and truck traffic but parcel shipments, air traffic, trains and the use of motels as staging areas. We will highlight what works and proven methods as well as pitfalls associated with this type of enforcement.

Learning Objectives—At the completion of this presentation the participant will be able to:

- Gain an understanding on how drugs are transported.
- Learn of the inherent dangers involved in narcotics interdiction.

Treatment and Recovery

Suite 4-5

4. Recovery Housing in Indiana

This session will discuss the current state of affairs in Indiana relative to recovery homes. From a top down view, there are 6.6 million people living in Indiana. Since the Substance Abuse and Mental Health Services Administration (SAMHSA) suggests that 10 percent of all Americans suffer from substance use disorders. 660,000 Hoosiers could benefit from treatment and recovery support services. 10 percent could benefit from recovery housing; therefore we need 66,000 beds across our state. The reality is we have less than 1,700 beds, therefore we are serving less than 2 percent of those in need. 98 percent of the individuals in Indiana that would benefit from recovery housing services today, will not receive them until we increase capacity. Of the 92 counties in Indiana, 66 of them do not have any recovery homes and all of them are rural counties. This presentation will address what still needs to be done.

Learning Objectives—At the completion of this presentation the participant will be able to:

- Describe what recovery housing is and how residents benefit.
- Understand how and where to find recovery houses in Indiana and learn best -practice models from the recovery houses.
- Identify what is being done in Indiana to improve the quality of services and increase capacity at recovery residences across the state.

Lunch Session 11:45 am – 12:45 pm

Plaza Ballroom

Reform of the Criminal Justice Code: Why it Matters in Fighting the Drug Crisis

Indiana Attorney General Curtis Hill discusses the origins and motivations for reforming the criminal justice code in the United States and how such efforts affect the ability of law enforcement to keep dangerous drug dealers and other offenders off the streets. Hill believes public safety requires courts, law enforcement and prosecutors to remain committed to the incarceration of chronic and violent offenders. Without these important elements, he argues, meaningful progress toward ending the nation's drug crisis will be perpetually thwarted.

Learning Objectives—At the completion of this presentation the participant will be able to:

- Understand the comparisons of the penalties pre and post 2014 criminal code reform and how dealing over 3 grams of heroin under the old criminal code was a class A felony with an advisory sentence of 30 years. That same offense today would be a level 5 felony with an advisory sentence of 3 years.
- Learn how strict accountability under the law is absolutely necessary to a functional prevention and treatment effort.



Breakout Sessions 1:00 pm—2:00 pm

Prevention

Suite 6-7

1. The Opioid Epidemic: The Many Aspects of Prevention

Jennifer Lloyd, Director of Statewide Outreach on Substance Abuse for the Office of Ohio Attorney General Mike DeWine, will discuss many of the prevention programs and initiatives within Ohio. This overview will include statewide programming and recommendations, community initiatives and examples of unique local initiatives that are making a difference. The efforts discussed in this session are critically important for those in recovery or struggling through the disease of addiction to prevent further trauma and relapse.

Learning Objectives—At the completion of this presentation the participant will be able to:

- Gain an understanding of the many aspects of prevention that are important considering the dramatic consequences of the opioid epidemic.
- Gain an understanding of the long term consequences of the opioid epidemic and programming that may be considered to decrease the negative effects.
- Learn new ideas to implement in communities so that we can change the language from one of sadness and despair to one of hope.

Treatment

Plaza CDE

2. How I Got Clean: A Panel of Those in Recovery

In the past, the one-size-fits-all approach to drug and alcohol treatment was seen as an effective way to treat and manage addiction. However, as rehabilitation programs have progressed, it has become evident that this “cookie cutter” approach is largely ineffective for those suffering from opiate use disorders. Each person is unique, so why should they be expected to benefit from the same treatment options? There are numerous factors that can potentially contribute to an addiction, and all of these factors must be addressed in order for treatment to be successful. Personalized addiction treatment programs take each individual’s unique background, health and needs into account and formulate their treatment regimens accordingly. Hear from individuals who have been treated for opiate use disorder, using different approaches and how they have maintained their recovery.

Learning Objectives —At the completion of this presentation the participant will be able to:

- Understand how the use of a Bridge device lessened the dangerous and painful effects of withdrawal and assisted in quitting “cold-turkey.”
- Understand the benefits of both abstinence based and medicated assisted treatment programs.
- Understand what needs to be done on a daily basis to maintain recovery by recognizing it as a process, not a single event.

Clinical

Plaza AB

3. Integrated Medication Assisted Treatment with Buprenorphine in Primary Care

Medication Assisted Treatment (MAT) with buprenorphine may be effective in the management of opioid use disorders, but patients often lack access in rural areas. The Indiana University Health – West Central Region Behavioral Health Department has developed a model incorporating MAT with buprenorphine into an existing integrated primary care behavioral health system in Tippecanoe and surrounding counties. The model follows a “hub and spoke” paradigm, where patients are initially managed in a central “hub” using shared medical visits with mandatory group behavioral treatment. Chronic, stable patients are seen in primary care clinic “spokes” with ongoing behavioral support. This model creates a continuum of care effective for many patients with opioid use disorders, including entry into treatment, intensive support and aftercare-without the need for expensive detoxification and residential treatment services.

Learning Objectives—At the completion of this presentation the participant will be able to:

- Identify evidence-based medication -assisted treatments for opioid use disorders.
- Describe models of combining medication assisted -treatment with primary care.
- Understand key practices in the implementation of a primary-care -based chronic care model for opioid use disorders.