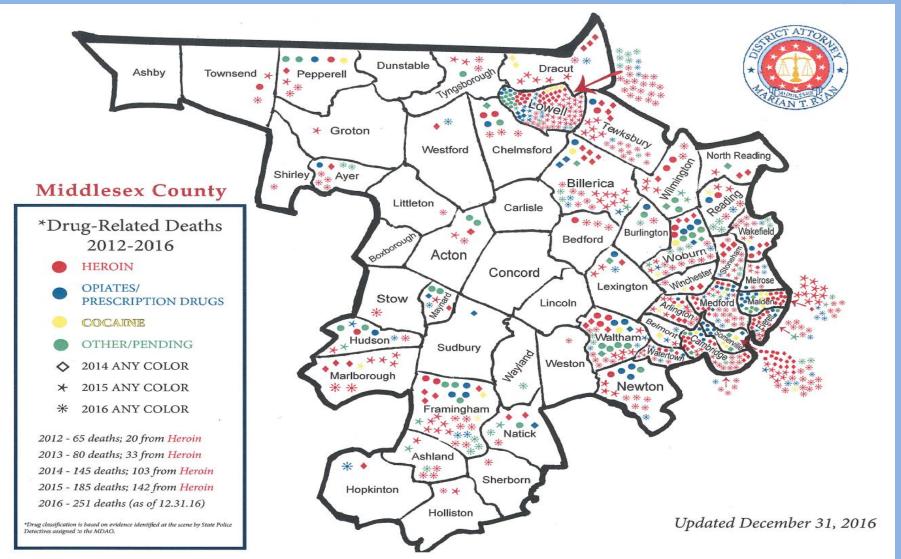


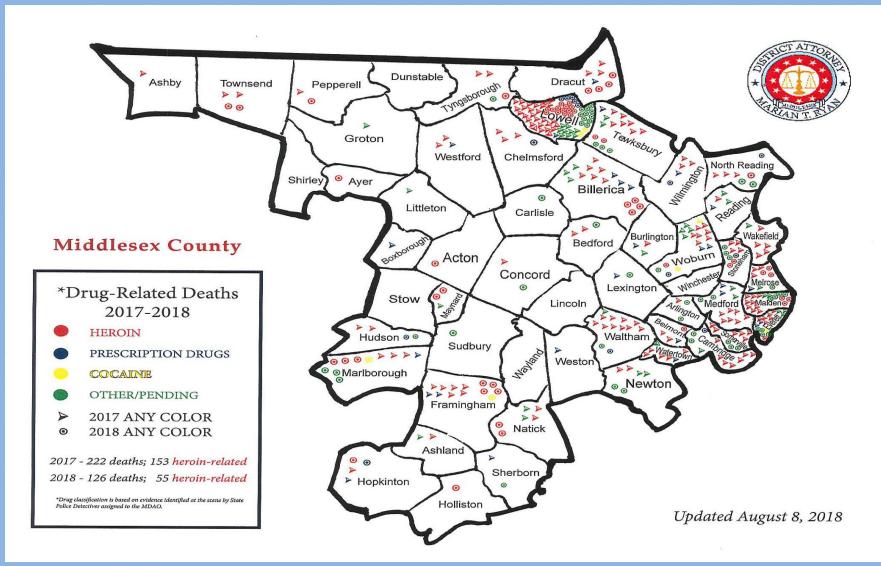


Scope of Problem





Scope of Problem





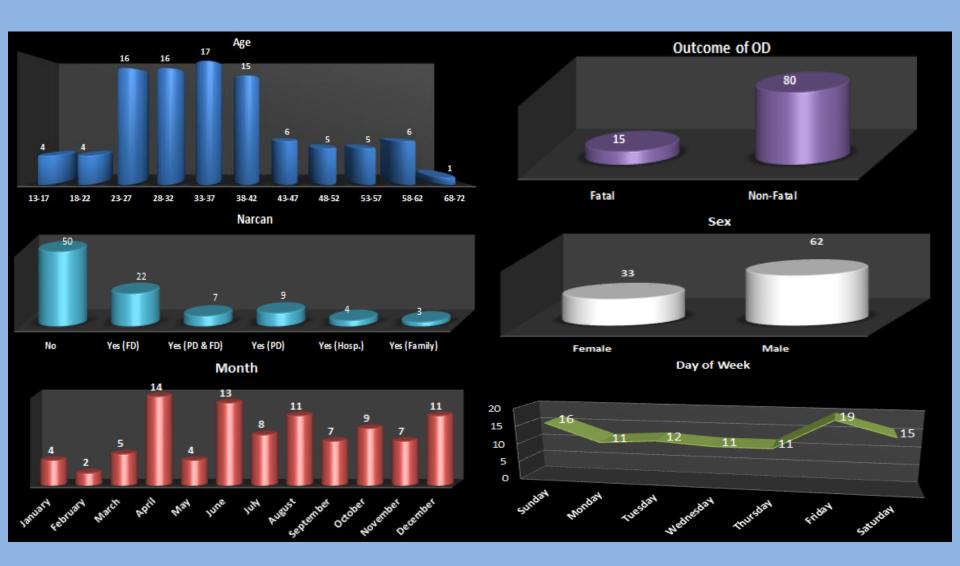
Number of Opioid¹-Related Overdose Deaths, All Intents by County, MA Residents: 2000-2017²

Massachusetts Department of Public Health POSTED: MAY 2018

County ³	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	Total 2000-2017
Barnstable	12	19	21	15	17	20	24	31	22	21	20	19	24	43	53	67	80	67	575
Berkshire	2	3	1	2	6	9	1	8	3	8	4	9	18	22	29	33	38	27	223
Bristol	38	58	66	84	72	78	85	64	84	70	79	82	95	116	145	166	244	240	1,866
Dukes	1	0	1	0	1	2	0	3	1	2	0	0	0	1	5	7	3	2	29
Essex	51	65	55	81	68	80	87	89	65	74	51	57	94	119	207	226	279	305	2,053
Franklin	5	2	1	5	3	4	6	4	2	2	6	6	8	10	10	18	14	9	115
Hampden	32	37	42	46	32	36	46	38	48	46	48	45	59	69	63	95	130	111	1,023
Hampshire	5	5	5	12	8	3	10	14	11	10	12	10	11	30	26	16	36	28	252
Middlesex	64	86	92	115	105	122	118	110	112	124	94	130	122	155	271	326	413	346	2,905
Nantucket	0	1	0	0	0	0	0	1	0	1	1	0	0	1	1	1	2	2	11
Norfolk	29	42	44	43	40	53	49	54	73	65	60	64	71	83	127	158	215	168	1,438
Plymouth	23	25	29	47	28	38	49	52	48	53	41	67	57	86	109	165	191	202	1,310
Suffolk	49	87	98	106	83	66	107	103	74	95	64	85	91	111	144	190	245	250	2,048
Worcester	68	75	71	58	51	63	74	71	78	67	80	82	91	115	162	215	259	257	1,937
TOTAL DEATHS ⁴	379	506	526	614	514	575	660	642	622	638	560	656	742	961	1,353	1,684	2,149	2,016	15,797



Tewksbury 2016 Overdose





Tewksbury 2017 Overdose





Tewksbury 2018 Overdose





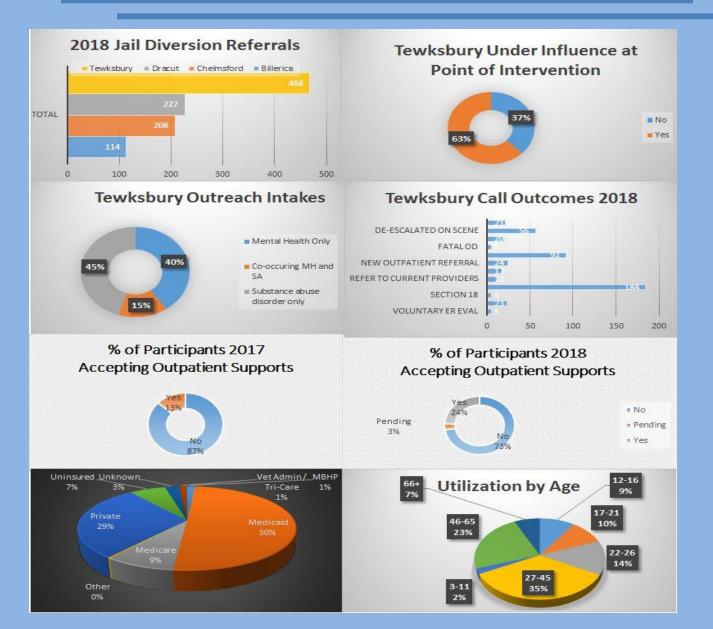
Community Service Unit

Counseling / Treatment

- 2017 Tewksbury had a total of 468 clients (MH/Dual = 232 and SUD = 236)
- 2018- Tewksbury to date 468 clients (MH/Dual = 281 and SUD = 187)
- Total Served = 936
- Population Developed Through All Police Interactions Not Just Overdose Incidents



JDP Clinician Graph





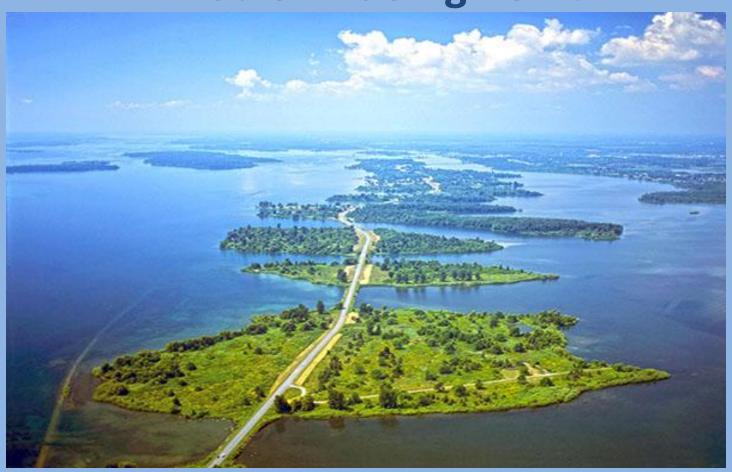
What was LE doing before?







What is LE doing now?





What is Tewksbury PD doing?

- Prevention Education
- Enforcement
- Collaboration
- Counseling/Treatment



Prevention Education

- Drug Disposal Kiosk
- Philosophical Change
- Stigma
- radKIDS
- SRO's
- SAPC Grant (2014)
- Surveys
- Hidden In Plain Sight
- Chris Herren

- Cliff Crosby
- Kevin Brooks
- Chris Sullivan
- Mock Crash
- Sports Night
- SUP&E Week
- Speaker Series
 Tewksbury Public
 Library



Enforcement (Overlap Outreach)

- Tracking Overdoses (2014)
- Narcan (October 2014)
 (Opioid Antagonist)
- Drug Unit 2014
- Zero Tolerance/Arrest Policy
- Surveillance/Buy-Busts
- Section 35/Section 12

- OUI-Drugs
- Drug Court/Diversion
- New Protective Custody Law G.L. c. 111E, § 9A (07/22/16)
- Shoplifting
- Press Releases
- Training
- Outreach (Lyons-Morris)
- PMP (2015 Massachusetts providers wrote 59.9 opioid prescriptions per 100 persons (4.07 million prescriptions) the average U.S. rate was 70 opioid prescriptions per 100 person) (75-85% Prescription)



Enforcement

For Immediate Release June 12, 2018 Contact: Chief Timothy B. Sheehan Tewksbury Police Department (978)-851-7373 Ext. 214 tsheehan@tewksbury-ma.gov



Drug Trafficking Arrest

On June 12, 2018 the Tewksbury Police Department arrested Patricia Pimental, 24, of 101 Shawsheen Rd. Apt #8., Lawrence for trafficking heroin over 28 grams.

Detectives conducted an investigation into Pimental as a drug trafficker. A meeting was arranged at Highwood Drive where a drug transaction occurred resulting in the recovery of 33 grams of heroin. Pimental was placed into custody without incident.

U.S. Immigration and Customs Enforcement issued a detainer on <u>Pimental</u> for lacking immigration status in the United States.

Pimental is due to be arraigned at Lowell District Court on June 13, 2018.

The Tewksbury Police Department urges any citizens who suspect criminal activity to call the Dispatch Center @ 978-851-7373. If you wish to remain anonymous please call the Tip Line @ 978-851-0175 or send an email to tewks detectives@tewksbury-ma.gov







--End-





Section 35

How do I get someone committed?

According to the statute, only a qualified petitioner may request the court to commit someone to treatment under Section 35. They are: a spouse, blood relative, guardian, a police officer, physician, or court official. They must go to the local court and fill out papers. In legal language, they must "file a written petition or affidavit for an order of commitment". Petitions may be filed at a **District or Juvenile Court**



New Protective Custody Law

The law (July 22, 2016) only authorizes police officers to place "any person who is incapacitated" by reason of the consumption of a controlled substance or other substance other than alcohol into protective custody under G.L. c. 111E, § 9A. That person shall not be taken to the police station and/or booked and should get immediate transport to receive medical treatment (either to an acute care hospital, emergency facility).



Collaboration

- Drug Court (May 2014)
- Learn to Cope Tewksbury
- Regional Jail Diversion Program-DMH
- Opioid Task Force
- Lowell House Advisory Board
- DDJ Whitehouse Program
- Drug Diversion Program D.A.'s Office
- Bridge Program (All Calls)

- Narcan OEMS Legislation
- Treatment Providers
- Community Programs
- Pharmacy Partnerships
- Palm Cards
- Drug Pick-up
- Community/Parents
- LGH-Circle Health-GLHA (Grants)
- One Mind Campaign
- TPD Bridge Program
 Transportation Initiative
- PAARI-Recovery Coach
 Long Term Case Management



Counseling / Treatment

- Bridge Program (Over 450 Intakes)
- JDP Program/LHBS
- Community Service Unit
- Outreach/Overdose/All Interactions
- Follow-up
- Collaboration (Mary O'Neill/Cathy Collins/Mike Duggan)
- Resource Cards (Officers Following Through-Detox-35)
- Drop-In Center
- MAT
- GRASP



How to Protect Yourself





By eliminating unused and unwanted medications from your home, you are helping to keep your family and your community safe.

According to the Environmental Protection Agency, proper disposal:

- · Prevents poisoning of children and pets.
- Deters misuse by teenagers and adults.
- Avoids health problems from a coldentally take the wrong medication, too much of the same medication, or a medication that is too old to work wall.
- Keeps medications from entering streams and rivers when poured down the drain or flushed down the tollet.

APPROVED ITEMS:

- Prescription & Over-the-Counter Medications
- Vitania: Medication Samples
- Veterinary Medication
- . Manualtin

NON APPROVED ITEMS:

- Needles (any type)

- Hydrogen Perszide
- . Thermometers & Other Mercury Reme
- (there are refe to dispuse of in your regular recyting bit)





- Proper Storage
- Monitoring Medication
 Safe Disposal



Help is Available

A Resource Guide for Substance Abuse Education, Information, & Support

If you suspect someone is overdosing...
CALL 911!

Recognizing an Opiate Overdose

Person will not wake up. No response to yelling. Blue lips or fingernails. Clammy, cool skin. Shallow, slow breathing. Seizures or convulsions. No response to knuckles being rubbed hard on breast bone.

Overdose Risk Factors

Using alone. Surviving a past overdose.
Mixing drugs such as opioids, benzos, and
alcohol. Change in drug purity.
Weight loss, health issues or a
period of non-use.

For Treatment

SAMHSA (Substance Abuse Mental Health Services Association): www.samhsa.gov Massachusetts Bureau of Substance Abuse Hotline: www.helpline-online.com

800-327-5050 tty-888-448-8321 MOAR (Mass Organization of Addiction Recovery):

moar-recovery.org Support for Family and Friends

Learn To Cope: www.Learn2Cope.org 508-801-3247

Nasal Narcan Responder Training: 800-327-5050

Narcan temporarily reverses an opioid overdosefree training to become a Narcan responder. Al-Anon/Alateen: ma-al-anon-alateen.org 508-366-0556

Alanon: al-anon.org 888-425-2666
Families Anonymous: families anonymous.org

The Addict's Mom: addictsmom.com Drug Free: Drugfree.org Wicked Sober: wickedsober.com

For information on Chapter 123-Sec 35 (involuntary commitment) http://www.mass.gov/eohhs/gov/departments/

dph/programs/substanceabuse/addictions/drugs-and-alcohol/section-35fag.html or contact your local

District Court Civil Clerks Office

Recommended Reading

Addict in the Family by Beverly Conyers
It's Not Okay to Be a Cannibal: How to Keep
Addiction from Eating your Family Alive
by Andrew T. Wainwright
Now What? An Insider's Guide to Addiction and
Recovery by William Cope Movers

Sponsored by Circle Health

Inpatient Treatment

Lahey Health Behavioral Services Treatment Centers - also offers some outpatient services.

www.nebhealth.org

Tewksbury at State Hospital: 978-259-7000
Danvers: 978-777-2121
Boston: 617-247-1001

AdCare Hospital**
Worcester: 800-345-3552 or 800-252-6465

Community Healthlink Inc***

Worcester: 508-860-1200

Institute for Health and Recovery -Intake for multiple inpatient services for adolescents and

families with children. 617-661-3991 Spectrum Health Systems***

Westborough: 800-366-7732

Dimock Detox Roxbury: 617-442-8800 x 1320

SSTAR -also provides services for pregnant women. sstar.org

Fall River: 800-937-3610 or 508-324-7763 Outpatient Detox

CleanSlate Centers

Tewksbury: 800-NEW-START

Adcare Hospital

Worcester: 800-345-3552 or 800-252-6465 Spectrum Health Systems

800-464-9555

Caritas NORCAP -also has inpatient services Foxboro: 800-331-2900

Veterans Center -also has inpatient services**
Bedford: 781-687-2347 Urgent care: 781-687-2654

Community Support

Lowell Community Health Center Substance Abuse Treatment Office-based Opioid Treatment

161 lackson Street, Lowell: 978-937-9700

Lowell House Inc. - also provides outpatient

substance abuse services. 555 Merrimack Street Lowell: 978-459-8656

Middlesex Recovery, P.C.- accepts MassHealth.

53 Cummings Park Woburn, MA, 01801 781-305-3300

MA Substance Abuse Information and Education

Helpline: helpline-online.com 800-327-5050

Narcotics Anonymous (NA): Meetings 866-624-3578

Alcoholics Anonymous (AA): Meetings

978-957-4690 Massachusetts Poison Control Center

800-222-1222 Suicide Prevention Hotline (24 hr):

suicidepreventionlifeline.org 800-273-8255 Replacement Therapy (Methadone) Habit OPCO

22 Olde Canal Drive in Lowell: 978-452-5155
Replacement Therapy (Suboxone) - Find a trained prescribing doctor. HereToHelpProgram.com

866-973-4373 Replacement Therapy (Vivitrol): vivitrol.com/GetStarted

* Provides discharge transportation

** Door to door transportation provided

*** Transportation from local train station

Visit <u>www.drugfreegreaterlowell.org</u> for a variety of additional resources





Police Department Community Outreach Intake Form





	ш				
Date of Incident:		Time of Incident:		Incident #:	
Date Given to JDP:		Nature of Call:		JDP Incident #:	
Mental Hea	alth	Substan		☐ Dual	Diagnosis
	**	Personal II	nformation		2000
Full Name:					
	Last	First		MI.	
Address					
	Street Address		State	Zip C	ode
Primary Phone: (Age:		Gender:	
Casandam, Dhana.		Veteran	☐ Yes ☐ No	. Dans	
Secondary Phone: ()	veteran.	I res I No	Race:	2
		Possible C	harges		es No
Was Custody Diverted	? □ Ye		nui ges		
Were Charges Diverte			<u></u>		
List Possible Charges H		Diverted or Not:			
	In	surance Inform	ation (for JDP u	se only)	
Uninsured	Medicare	MC (Medicaid/N	lass Health)	☐ Private	■VA Benefits
		Substance U	se Disorder		
	call is the cli	ent under the influen	ce? Yes	No	
Opioids		Alcohol	Other:		200
Cocaine (Crack/Po	wder) 📙 I	Prescription Medicati	HARA CANADAM SANDAN	CONTRACTOR AND	□ No
		Psycho-Socia	l Information	1	
Living Arrangements:		*			600
Assisted Care	Group Home	Homeless P	ermanent Reside	nce 🔲 Shelter/Tem	p
	arent 🔲 Spo	use Roommate	Self		10.70
Employment:					
Full-Time Part	-Time 🔲 Re	etired Receive B	enefits 🔲 Stude	nt 🔲 Unemployed	ă L
		Assessment a	and Outcome	î .	
☐ JDP Co-Response		MHFA Officer	Assessment	☐ CIT Officer	Assessment
Section 12 Lah		ESP/Mobile Cri	sis Eval	☐ Outpatient	The Control of the Co
Section 18	OII -Saille	☐ Inpatient		☐ Community	Outreach
Section 35		Detox		Family Sup	\$1.54.00 C. S.
Did not Respond with	h 🗌 1st att	empt	2nd attempt		visit
Clinical Notes:					





Police Department Public Safety Communication Form





Name:	Living Situation Own Home Shelter State Of Home:	: ☐ Friend/Family ☐ Group Home ☐ Average	☐ Homeless
□ Section 18 □ Voluntary	□ Vandalized	☐ Hoarding	☐ Uninhabitable
Observations: Notes (appearance, speech, eye co	ontact, oriented to pe	rson/place/time):	
Behavioral Issue: (Explain □ Suicide Attempt □ Self Harm/Cut □ Suicidal Thoughts □ Bizarre Behavior □ Homicidal Thoughts □ Aggressive □ Auditory Hallucinations □ Special Needs □ Visual Hallucinations (autism, ADHD)	in)		
Medical History: (hospitalizations, suicides, self-harm, detox) □ Yes □ No □ Suicide Attempts □ Self-Harm Substance Use □ Yes □ No	□ No	ter History: Freque	nt Interactions?
Stressors: Commen □ Loss/Death □ Financial □ Relationship □ Employment □ Housing □ Legal □ Veteran/PTSD	ts:		
Contact Name: Date: Date: Date: Clinician Use: Utilized			



TOWN OF TEWKSBURY Tewksbury Police Department

918 Main Street Tewksbury, Massachusetts 01876

Jennie Welch Community Service Officer Office: (978) 851-7373 ext. 230 Cell: (978) 479-5843 jwelch@tewksbury-ma.gov

10.	
Address:	
Date:	
Re:	

Ta.

Dear XXXXX,

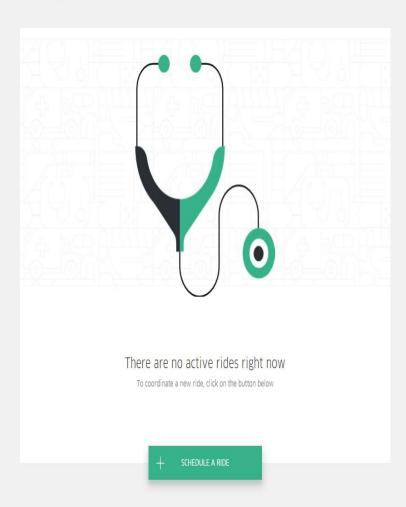
The Tewksbury Police Department, in collaboration with Lahey Health Behavioral Services, provides resources for individuals that are struggling with mental health, substance use, and coexisting disorders. These resources are available to the individuals in need of assistance, their families, and their loved ones.

The Tewksbury Police Department recently responded to an incident in which you were listed as an involved party. During this incident, we were unable to obtain a phone number for follow-up and would like to connect with you to talk about the resources offered and to make sure you are safe.

If you would like more information about the program listed above, please feel free to contact me.

Thankyou,









Prescription Drug Disposal Progam

Partners Protecting Our Communities











SAFE & SECURE DISPOSAL

Did you know that you can go to your local police department to dispose of your expired or unused prescription and over-the-counter medications?

A drug collection box is located in the main lobby of your police department. Place your medication in a sealed plastic bag and deposit it in the drug collection box — no questions asked.

If you are elderly, disabled or experience a personal hardship, your local police will retrieve your medications upon request. To schedule a pick up, please call:

Chelmsford Police Department Dispatch: 978-256-2521, ext. 0

Lowell Police Department Dispatch: 978-937-3200

Tewksbury Police Department Dispatch: 978-851-7373, ext. 0

Pick -Up Date



By eliminating unused and unwanted medications from your home, you are helping to keep your family and your community safe.

According to the Environmental Protection Agency, proper disposal:

- Prevents poisoning of children and pets.
- Deters misuse by teenagers and adults.
- Avoids health problems from accidentally take the wrong medication, too much of the same medication, or a medication that is too old to work well.
- Keeps medications from entering streams and rivers when poured down the drain or flushed down the toilet.

APPROVED ITEMS:

- Prescription & Over-the-Counter Medications
- Vitamins
- Medication Samples
- Veterinary Medications
- Narcotics

NON APPROVED ITEMS:

- Needles (any type)
- IV Bags
- Personal Care Products
- Hydrogen Peroxide
- Inhalers
- Thermometers & Other Mercury Items
- Empty Containers (these are safe to dispose of in your regular recyling bin)

Lahey Health Behavioral Services Proposed Plan to Tewksbury Police Department

Submitted for review 01/14/16

BACKGROUD

Lahey Health Behavioral Services (LHBS) provides human services, community healthcare, family and children services, substance abuse treatment, and education. For more than 50 years, LHBS has been committed to serving those who are most vulnerable: individuals with serious mental illness and other high-risk populations. We serve adults, teens, families, and children and work in a variety of settings including outpatient clinics, homes, schools, inpatient and residential settings, and hospitals. The core values of LHBS include respect for consumer needs and preferences; a commitment to serve individuals regardless of their needs, resistance, and presentation; increased access to service; value for individual natural support systems; and promoting needed services. LHBS provides comprehensive services to address the mental health and substance use needs of families as a whole.

OBJECTIVE

LHBS will assess treatment needs, make recommendations and coordinate care for community members at risk and their families through the support of the Tewksbury Police Department and other community resources. Ultimately bridging the gap between treatment providers and community partners, this initiative will increase awareness and education around behavioral health issues, including substance use, increased access to treatment and reduced recidivism.

TERM

On the effective start date of the program (hire date of employee), annually. Termination of the agreement without cause by either party will be honored with 90-day written notice.

BILLING & REIMBURSEMENT

Tewksbury Police Department will be invoiced for 1/12 of the budget amount to be paid within 30 days of receipt of invoice.

SCOPE OF WORK

LHBS will provide services to community members at risk who are identified by law enforcement and their families. LHBS clinical services will include assessment and referral, individual, group and family treatment, consultation, linkage to family substance use screening or other services, family sessions and appropriate therapy. The clinician will coordinate interventions with community providers delivering services to the individual and/or family. Other clinical services will include parental and family guidance, inclusion in transition/discharge planning and linkage to other community services and supports, parent education, instructional modeling.

LHBS will participate in monthly meetings with law enforcement, coalition and other community members/groups to promote the use of resources, family outreach and build community supports.

35% of the clinician's time will be allocated to the assessment of and treatment recommendations for referrals. In order to establish best clinical care, referrals per week should not exceed 14 for a full time (40 hour per week) clinician. The remainder of the clinician's time will be allocated for care management and coordination, case consultation with providers and family members, community meetings, clinical documentation and travel.

STAFFING AND OPERATING HOURS

The project plan consists of .04 FTE (or 6 hours per month) Clinical Supervisor and 1.00 FTE (or 40 hours per week) Clinician. The Clinical Supervisor will provide ongoing or adhoc consultation to clinician and other contributing members to ensure best practice and care is considered. Clinician will also utilize clinical team meetings. Both clinician and supervisor have experience in working with a variety of age ranges, families and complex situations and are comfortable working in various settings. Specific hours will be determined, however, there will be at least 1 evening to help accommodate family schedules. The total weeks expected on site is 45, allowing for holidays, vacation, sick and personal time.

BUDGET NARRATIVE

See attached

DATA AND OUTCOME MEASURES

Data will be tracked to measure the following outcomes:

- At least one outreach attempt will be made to 100% of those referred and at least one family member of referred individual to offer services and/or support within 1 - 2 business days
- Referred individuals will receive an assessment with treatment recommendations
 within 2-3 business days of outreach (note: that this will be measured based on time
 allocation for assessments as defined under Scope of Work section)
- There will be an increase in assess to care and services for referred individual and/or family members
- There will be an increase in referrals to services and/or community supports

Lahey Health Behavioral Services Project Budget - Tewksbury Police Department

					Budget Request
Clinical Services	hrs/wk				
Clinician, TBD	40.00	\$ 22.60	\$ 47,000.00		
Supervision					
Shawn Markey, LMHC, Coordinator Court Serv	1.50	\$ 28.85	\$ 2,250.00		
Subtotal Personnel			\$ 49,250.00	0	
Fringe and Benefits	25%		\$ 12,312.50		
Total Personnel				\$	61,562.50
Travel					
42 miles round trip for 45 weeks		\$ 0.49	\$ 851.47		
(Beverly Clinic to WPD)					
75 miles round trip for 45 weeks			\$ 1,636.88		
(Local travel - home based services, community me	etings, etc)				
Total Travel				\$	2,488.34
Other Expenses					
Cell phone			\$ 600.00		
Laptop			\$ 1,000.00		
Office Supplies			\$ 350.00		
Total Travel				\$	1,950.00
Subtotal				\$	66,000.84
Administrative Overhead	14%			\$	9,240.12
Total				\$	75,240.96