

NYS Joint Senate Task Force on Opioids, Addiction & Overdose Prevention

Testimony: Ann Marie Csorny

October 15, 2019

Good Morning,

My name is Ann Marie Csorny, I am the Director of Community Mental Hygiene Services for Suffolk County. The division is responsible for the behavioral health services directly operated by the County, such as our Opioid Treatment Program, also known as our Methadone program, and to ensure that a wide breadth of services are available to meet the needs of people managing behavioral health issues.

I want to thank our state Senators for convening this very important public hearing and those in attendance for their participation. The dialogues shared here today will help inform new services, support existing services, and help us as a community increase our awareness and understanding of the needs of people trying to manage the disease of addiction.

Today I want to share an outline of what we at the division in partnership with our State and community providers are working towards. This outline is based on public input and trends we see in the communities.

Prevention; increasing the awareness of children early on, helping them develop healthy habits and coping skills benefits us all. Communities can have a great impact when they understand and promote coalition building. Engaged communities promote civic engagement and the building of shared understanding, shared norms, shared values, trust, and cooperation. We recommend that communities, including schools, get involved with existing collations in their area or build new collations in their communities, the PRC offers tools to help build and sustain community collations.

Treatment; should be uniquely tailored to the individuals needs at the time they present and should be available as needed. Access to care must be timely, many of us manage a variety of symptoms and illnesses thru urgent care centers, the same opportunities are needed for people who are managing symptoms of addiction and mental illness. For this reason we developed a crisis stabilization program here in Suffolk, the DASH program.

The DASH program was designed with a no wrong door philosophy, there to support the individual, families, loved ones and law enforcement access the care and support need in the moment. Importantly, the DASH program takes a whole person approach when helping the individual address their immediate needs and works with the individual to identify the location and provider of their choice to link them to for ongoing treatment and supports.

In its first 6 months of operation the DASH program has helped thousands of people, thru its 24/7/365 hotline, on site clinical and support services, or thru its mobile response visiting the person in the community. To date the DASH program has answered over 5,000 hotline calls, cared for over 2,500 individuals on site at the DASH center, and met with over 2,000 people in the community thru its mobile response. They have started over 100 people on MATS, helped 50 plus people get to Detox or Rehab, and provided numerous Narcan kits and overdose prevention education.

Watching the success and growth of the DASH program in such a short time and aware of the need to support our residents on eastern Long Island we recommend supporting the development of a DASH 2 to serve the people of eastern Long Island. Suffolk County is home to 1.5 million people and is a tourist

destination to thousands. Geographically it is 86 mile long and 26 miles wide, with a total land mass of 912 square miles. Both the length of the county and the congestion impact the ability of our eastern county residents to avail themselves of the services offered at our current DASH program sited in Hauppauge.

The combined census of our twin forks and Brookhaven town equal about two thirds of western Suffolk, Brookhaven town has the highest rate of fatal and non-fatal overdoses, it borders Riverhead so we feel the location is ideal to accommodate the area highest need for people struggling with opioid use disorder, while being equal access to each fork and ensure a high enough census to support sustainability.

Around NYS there are a few similarly modeled stabilizations programs, this is a new model of care that offers needed treatment and support on demand, it is changing the landscape of how people access behavioral health care, and therefore we must develop a sustainable funding model for this vital service. We ask the Senate to consider supporting expansion and sustainability efforts, including an appropriate reimbursement model through insurance.

Medication for Addiction Treatment (MATs); should be expansive and readily available throughout the county. In addition to timely access to care we need to appreciate that addiction is a disease and for many medications that interrupt the cravings are a necessary part of their treatment. We need to challenge the beliefs that abstinence is the only road to recovery. The Division, has created workgroups that explore the barriers and identify strategies to help educate and support prescribers and providers move towards incorporating MATs in their clinical practice.

Our Learning Collaborative, which was funded in part with NYSDOH Opioid Crisis Funding, was developed in response to what we learned in the MAT workgroup. That providers, including our traditional SUD providers, needed help in moving forward with providing MAT, in particular buprenorphine, in their treatment programs.

The Learning Collaborative meets monthly, reviews evidence based studies of MAT protocols, helps providers with self-assessments and tools for implementing change in their organizations. The collaborative assists providers develop policies and procedures. Participating organizations have the opportunity for 1:1 technical assistance with an experienced psychiatrist and MAT provider. The Learning Collaborative is focused on the implementation of comprehensive MAT programs that meet OASAS medical standards for MAT. After a very successful phase one we will be starting phase two where we want to expand our reach, to include community primary practitioners.

How can you the public help? When you are visiting with your primary care provider have the discussion about their ability and willingness to prescribe MATs like buprenorphine or Vivitrol. Explore your own feelings and beliefs about addiction, if you want to talk about it or want more information please consider attending our SUD subcommittee.

Recovery; we are very fortunate here in Suffolk County to have the Thrive Recovery Center and Thrive mobile... and we expect to be launching a teen clubhouse soon. We believe it is essential that communities understand the essences of recovery and celebrate recovery. Also important is that communities understand there is a need to foster and develop substance free social and educational opportunities for all ages. Drug and alcohol use should not be seen as a rite of passage for our children or the norm in adulthood, there is a choice, we need to support and encourage that choice.