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# MEMORANDUM

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Date: March 31, 2023

To: The Honorable Chair and Members  
Pima County Board of Supervisors

From: Jan Leshner   
County Administrator

Re: **Fentanyl and Opioid Response**

On August 29, 2017 and subsequently on November 20, 2017 the County Administrator first provided the Board of Supervisors with an update on opioid misuse in Pima County to inform the Board's direction regarding participation in the national opioid settlement.

Anticipating what would become a national trend, substance misuse disorder and its consequences was first identified as a priority public health issue in the 2015 Pima County Community Health Needs Assessment. That document and the process that produced it, spurred a series of community conversations and data analyses that sought to describe how this crisis was evolving in Pima County, community treatment resources limitations and priority areas for intervention and investment.

The Health Department and our partners made some significant progress in this arena. This included efforts to increase the capacity for the treatment and support for opioid-involved pregnant and post-partum women. Additional efforts included the conduct of provider education to improve prescription practices, bringing Narcan resources to law enforcement and public school settings, and notably the effort to develop the data analyses that became the basis for Pima County's standing in the national opioid litigation. These gains have been largely overwhelmed by the flood of illicitly produced and easily available inexpensive fentanyl.

The attached memoranda and report from the Dr. Terry Cullen our Health Department Director provides a more detailed summary of the progress and challenges encountered since 2019. (Attachment 1 and 2) Attachment 1 also proposes the creation of a Fentanyl/Opioid Response Team to add a level of cross-departmental and inter-jurisdictional collaboration and coordination that would focus on identifying, developing, and implementing, evidence-based responses to the current crisis. This group would bring together departments from across Pima County including Health, Community & Workforce Development, Environmental Quality, Development Services, Regional Flood Control, Analytics & Data Governance, Natural Resources, Parks and Recreation, Behavioral Health, in collaboration with the business community, behavioral health treatment and social service agencies, the courts, law enforcement and other first responders. It would focus on short and intermediate term approaches to mitigate the impact of fentanyl/opioid misuse and to develop meaningful metrics to track progress in this area.



11-11-2023 10:15 AM

The Honorable Chair and Members, Pima County Board of Supervisors  
Re: **Fentanyl and Opioid Response**  
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One population for which Pima County bears special responsibility are those housed at the Pima County Adult Detention Complex (PCADC). Detainees with opioid use disorders frequently have underlining serious mental illness. The attached memorandum from Paula Perrera our Behavioral Health Director chronicles the progress the County has made to address the needs of this population. (Attachment 3) In particular I would highlight the evolution of Medication Assisted Therapy (MAT) since 2017 when it was first made available to pregnant detainees. Since then MAT services have grown and are now delivered by our contractor, Naphcare.

In February of 2022, with the support of our current contractor, PCADC was licensed by the Drug Enforcement Administration (DEA) and granted provisional Opioid Treatment Program (OTP) certification by the federal Substance Abuse and Mental Health Services Administration (SAMHSA). This licensing allows dispensing of buprenorphine, methadone, and Naltrexone using existing licensed clinical staff provided by our contracted medical vendor. NaphCare is required to maintain DEA licensure, as well as achieve and maintain OTP accreditation from the National Commission on Correctional Health. Recently awarded federal grant funding will permit the expansion of the program and specifically includes care coordination that is essential in preparation for post release.

Finally, I will add that the Pima County Office of the Medical Examiner has become an indispensable partner in the opioid response since 2014 when it began reporting Pima County specific overdose deaths. Their reporting has become increasingly sophisticated and used by our Health Department, law enforcement, researchers, behavioral and treatment providers. Highly specific longitudinal information is available publicly on their [interactive dashboard](#) which came online in September of 2022. This site includes the number and percent of overdose deaths involving opioids per county, along with counts of individual drugs of significant interest (fentanyl, methamphetamines, heroin, cocaine, benzodiazepines, alcohol, methadone, morphine, etc.).

The ubiquitous availability of fentanyl in particular and opioids in general are causing very high levels of human suffering and death. It is incumbent upon us to take an all of Pima County approach that engages key partners and stakeholders in developing innovative out of the box solutions to mitigate the human cost of this disease. To that end, I have directed the Health Department to move forward with the development of a cross-departmental and inter-jurisdictional Fentanyl/Opioid Response Team to lead the Pima County effort in this area.

JKL/dym


#### Attachments

c: Carmine DeBonis, Jr., Deputy County Administrator  
Francisco García, MD, MPH, Deputy County Administrator & Chief Medical Officer  
Steve Holmes, Deputy County Administrator  
Terry Cullen, MD, MS, Public Health Director, Health Department  
Greg Hess, MD, Chief Medical Examiner, Office of the Medical Examiner  
Paula Perrera, JD, Director, Behavioral Health

# ATTACHMENT 1

Date: March 31, 2023

To: Jan Leshner  
County Administrator

From: Theresa Cullen, MD, MS   
Health Department Director

Francisco Garcia  
Deputy County Administrator

**Re: Response to Fentanyl Crisis**

Since 2015, the Pima County Community Health Needs Assessment (CHNA) has identified substance misuse and dependency as a public health priority long before the Governor's emergency declaration in 2017. The various efforts of the department in this area became more organized with the creation of the Community Mental Health and Substance Abuse team in 2015. These were further consolidated with the CDC Opioid Cooperative Agreement Linkages to Care grant in 2019, which focused on overdose prevention, linkages to care, data surveillance, and the creation of a fatality review committee.

The attached report -- Pima County Overdose Surveillance Report 2019-2022 -- documents PCHD's response to the opioid public health crisis during this period and details the assessment, interventions, and outcomes that have been observed. Despite this work and the efforts of other government and non-government organizations, Pima County continues to see rapid increases in opioid use with concurrent impacts on the community's health status.

PCHD has sought to bring more resources to bear on the opioid crisis and has been awarded four related grants: CDC Overdose to Action, SAMSHA State Opioid Response, NACCHO Implementing Overdose Prevention Strategies at the Local Level, and the Governor's Office of Youth, Faith and Families Parents Commission on Drug Education & Prevention. (See attached table.) In the last year, we began receiving Proposition 207 funds (the Smart and Safe Arizona Act) which have been earmarked for youth behavioral health and substance misuse prevention. National opioid settlement funds also began flowing to the County for administration by PCHD during 2022.

To guide the thoughtful use of these resources, the Board of Health established a Substance Misuse Advisory Subcommittee charged with engaging with local experts and community to identify priority areas to inform future community investments with these resources. These iterative plans will be vetted by the Pima County Board of Health, transmitted to the PCHD Director, and communicated to County Administration and the BOS for their review and action.

PCHD's historical efforts and the accelerated opioid epidemic highlights the need for multi-agency coordination and response. A coordinated Pima County approach is essential to leverage the multiple interventions that are required to successfully impact this public health problem. Proposing and establishing an interagency coordinating team will help improve communication, coordination, and collaboration among local public health, human services, education, public safety entities and others. This approach should help improve awareness, identify appropriate and successful interventions, and help reduce the harmful impacts of the opioid epidemic and substance use disorder within our community.

**To: Jan Leshar, County Administrator**

**Re: Response to the Fentanyl Crisis**

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This group will identify strategies and tactics that leverage current work and identify and support policies and interventions that can impact the devastation that has resulted from this opioid epidemic. Such an effort will assist PCHD as it prioritizes and pursues additional federal funding opportunities to support effective interventions including harm reduction, stigma reduction, and access/linkages to care strategies that can be brought to scale in our community and throughout the health system using best practices.

We appreciate your consideration of this report, and we look forward to working together collectively to respond in an efficient and effective manner to this pressing problem.

Attachment

APPROVED     NOT APPROVED



\_\_\_\_\_  
Jan Leshar, County Administrator



\_\_\_\_\_  
Date

c: Carmine DeBonis, Deputy County Administrator  
Steve Holmes, Deputy County Administrator

To: Jan Leshar, County Administrator

Re: Response to the Fentanyl Crisis

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**Pima County Health Department  
Current Grants to Address the Opioid Crisis**

<b>Name of Grant</b>	<b>Purpose/Background</b>	<b>Term/ Funding</b>
CDC Overdose to Action	Develop, implement, and assess relevant and proven strategies to halt, reverse, and diminish opioid drug overdoses in our community.	9/30/22-9/30/27  Annual funding: \$374,663
SAMSHA State Opioid Response	Develop, implement, and assess relevant and proven strategies to halt, reverse, and diminish opioid drug overdoses in our community.	9/30/22-9/30/27  Annual funding: \$401,025
NACCHO Implementing Overdose Prevention Strategies at the Local Level	Address health disparities in overdose risk faced by high-risk populations. Key components of this project include: 1) enhancing data surveillance fentanyl seizures, 2) expansion of the “Safe Space” initiative and protocol in PCHD clinics, 3) strengthening of peer navigation services, 4) increased promotion of harm reduction education through fentanyl test strip distribution and outreach presentations in the community, and 5) an anti-stigma media campaign focused on both racial discrimination and substance use.	1/1/2022-7/31/2023  Annual funding: \$332,941
Governor’s Office of Youth, Faith, and Families Parents Commission on Drug Education Prevention	Facilitate multiple evidence-based trainings focused on mental health and substance use. Trainings occur throughout the community but focus primarily on low-income families and individuals disproportionately impacted by suicide and overdose rates in Pima County. The curriculum includes: QPR-Suicide Prevention, Youth and Adult Mental Health First Aid, Stress Management, Rise of Fentanyl, and Strengthening Families Program.	7/1/2022-6/30/2025  Annual funding: \$199,765

## Pima County Overdose Surveillance Report (2019-2022)

### **Summary**

This report provides a comprehensive annual summary detailing the trajectory and course of opioid overdoses in Pima County over the last four years (2019-2022). The report also outlines the numerous public health actions taken by the Pima County Health Department to address this crisis locally. The overall purpose of the summary is to illustrate major turning points in the epidemic over a four-year timeline, to not only understand the timing of these events, but also the rapid increase in opioid use followed by surging overdose trends.

### **Background**

The opioid epidemic has changed substantially since Arizona Governor Doug Ducey's emergency declaration in 2017. At the time the declaration was signed, public health strategies were mostly aimed at reducing harms associated with pharmaceutical opioids like Oxycodone, Tramadol, and Hydrocodone. Around this time, multiple federal grants awarded to the Arizona Department of Health Services (AzDHS) and subsequently passed through to counties across the state. The funding priorities included enhancing regulation on opioid prescribing, reducing illicit drug supplies, expanding use of naloxone, and connecting people to critical services to treat opioid use disorder. In 2018, PCHD became a recipient of one of these grants, which paved the way for implementing overdose prevention work over the last four years (2019-2022).

### **Methods**

- Review Period: 1/1/2019 - 12/31/2022
- Sources: Mortality data from Pima County's Office of the Medical Examiner (OME) and Arizona Department of Health Services' Vital Records (AzDHS).
- Criteria: Overdose case counts only included decedents with the following: manner of death listed as accidental or undetermined, date of death within calendar years 2019-2022, and location of death is Pima County.
- Limitations: There is an inherent data lag due to the death certification process and the required time to complete the medical examination. Given these two factors, this report is limited to information available at the time the report was completed (March 2023).

### **Annual Historical Summaries**

Note: For historical accuracy it should be noted that data analysis, system partner collaborations, and drug education were all taking place as early as 2017. For the purpose of this report, the selected review period is 2019-2022, therefore anything prior to 2019 has not been included below.

First Year: 2019

Year	Fatal Overdoses	Average Per Month	Average Age of Decedent	% Involving Fentanyl
2019	311	25.9	42.4	29%

In 2019, fatal overdoses averaged 25.9 per month and the annual total exceeded 300 deaths for the first time in Pima County history. Currently, the average age of overdose decedents was 42.4. Intensified pharmacy regulations reduced access to pharmaceutical opioids and those in the field anticipated that opioid related deaths would decrease in 2018/2019. Instead, illicit drugs like heroin, fentanyl, and methamphetamine were increasingly more common, and a major surge in illicit fentanyl deaths took place resulting in a record-breaking annual total (*Figure 2*). By the end of the calendar year, fentanyl contributed to 29% of our local drug deaths. The primary factors at play included strict regulations of opioid analgesics, followed by a surge in illicit fentanyl production, which ultimately sparked the increase in fatal overdoses.

At this point in time, PCHD had been awarded one grant titled CDC Crisis Cooperative Agreement. This was a federal grant awarded to AzDHS who then passed subawards down to localities. The annual budget for this grant was \$483,963.00 to fund substance use and overdose prevention services. The award provided a much-needed boost to our public health efforts in this area. The funding supported four new positions in the health department and led to the creation of the Community Mental Health and Addiction program (CMHA).

Key achievements include:

- Naloxone storage and distribution policy created that allowed PCHD to become a central naloxone supplier for the community.
- PCHD sub-contracted with multiple behavioral health organizations to provide rapid response overdose prevention services via professional peer navigators with lived experience.
- CMHA hired a dedicated epidemiologist to launch an opioid surveillance program to monitor overdose trends and relevant hospital data.
- PCHD published first overdose health alert on June 21, 2019, in response to the spike in fentanyl deaths.
- CMHA created a local drug overdose fatality review committee to conduct in depth reviews of local overdose deaths.
- CMHA offered the Rx360 curriculum continuously throughout the community to bring awareness to the importance of safe storage and disposal of prescription drugs, and the risks associated with misuse of opioid medications.



- By December 2019, the CMHA team had 5 full-time staff and one AmeriCorps Vista volunteer.

Second Year: 2020

Year	Fatal Overdoses	Average Per Month	Average Age of Decedent	% Involving Fentanyl
2019	311	25.9	42.4	29%
2020	425	35.4	40.6	48%

In 2020, the average number of fatal overdoses increased from 25.9 to 35.4 per month. The largest spike occurred in July with more than 60 confirmed fatalities in a 31-day span (more than double the average from 2019). These trends marked a second consecutive record-breaking total, this time exceeding 400 deaths for the first time, an unprecedented increase of more than 100 deaths from 2019 (*Figure 1*). The average age of decedents decreased from 42.4 in 2019 to 40.6, and illicit drugs including heroin, fentanyl, and methamphetamine, largely filled the gap created by the restricted access to opioid medications.

There was a collision of aggravating factors that influenced these sudden changes. Law enforcement drug seizures involving fentanyl were common at this point and access to the drug was changing rapidly due to low cost and widespread availability. At the same time, drastic COVID mitigation policies suddenly altered the local environment, which restricted substance use services, health seeking behaviors, transportation, and public resources.

By this time, PCHD had secured a total of three grants. They included: State Opioid Response Grant with an annual budget of \$455,158.00, Data to Action Grant with annual budget of \$421,391, and AZ Parents Commission on Drug Education and Prevention Grant with an annual budget of \$133,980. The three grants significantly expanded the resources available to CMHA for overdose prevention, and the funding supported a total of nine staff members. In March of 2020, program staff were deployed for the COVID-19 public health emergency response which reduced, and at times halted, programmatic work for the remainder of 2020. Starting in early 2021, staff began to gradually return to their normal assignments and programming eventually resumed.

Key achievements include:

- Implementation of the Strengthening Families Program aimed at supporting families and school age youth with topics centering on mental health and substance use.

- Rapid restructure of the overdose fatality review committee to continue case reviews virtually during the pandemic.
- Continuation of targeted naloxone distribution through community partnerships and stakeholders operating in the community.
- The addition of two new public health case managers assigned to substance use prevention and linkage to care services for people who use drugs.
- Solidified a process for data collection, surveillance, and health alerts to maintain some degree of situational awareness of the overdose crisis during the pandemic.
- By the end of calendar year 2020, the CMHA team had 9 full-time staff.

Third Year: 2021

Year	Fatal Overdoses	Average Per Month	Average Age of Decedent	% Involving Fentanyl
2019	311	25.9	42.4	29%
2020	425	35.4	40.6	48%
2021	482	40.2	42.7	62%

During the 2021 calendar year, the overdose crisis peaked at 482 fatal overdoses, an average of 40.2 per month. Today this total remains the highest on record in Pima County, highlighting several key developments in the overdose trends. The monthly average increased from 35.4 in 2020 to 40.2 in 2021. The number of fentanyl deaths soared to new levels. Fentanyl was confirmed in 62% of the overdoses (*Figure 2*). For perspective, heroin contributed to only 198 fatal overdoses over the full four-year span discussed in this report (2019-2022), 100 less than fentanyl's single year total of 298 overdoses in 2021 (*Figure 3*).

During this time, new trends emerged. Fentanyl became the leading cause of death for teenagers. In 2021, 20 teens died of a drug overdose with fentanyl involvement in each one. Additionally, racial and ethnic disparities of overdose deaths widened. American Indians/Alaska Natives and African Americans were disproportionately impacted with higher overdose rates. The overall rate of fatal overdose for Pima County was 45.5 deaths per 100,000 in 2021. In contrast, American Indians/Alaska Natives and African Americans experienced rates at 99.1 and 58.4 per 100,000, respectively (*Figure 4*).

In response to these trends, PCHD sought out a fourth grant opportunity through the National Association of County and City Health Officials (NACCHO) to complement existing strategies and

provide targeted support to vulnerable populations. In late 2021, PCHD was awarded this grant for a total of \$499,912.19, bringing the combined total CMHA budget to \$1,490,251.19. This grant helped establish key partnerships with Tucson Indian Center (TIC), HOPE Inc., and Pima County Superior Court (SCXX). As a subrecipient of this grant, TIC increased their provision of support and referral to substance use treatment for any individual enrolled in a federally recognized tribe. Furthermore, PCHD and SCXX created an inter-governmental agreement (IGA) to offer education and overdose prevention services to justice involved populations at risk of overdose.

Key achievements include:

- Two new sub-recipient agreements with TIC and HOPE Inc for overdose prevention services.
- Executing an IGA between PCHD and SCXX to integrate overdose prevention services and peer support into the STEPs drug court program offered to adults with justice involvement.
- By the end of calendar year 2021, the CMHA team had 7 full-time staff and 4 vacancies, for a total of 11 full-time positions supporting public health substance use strategies.

Fourth Year: 2022

Year	Fatal Overdoses	Average Per Month	Average Age of Decedent	% Involving Fentanyl
2019	311	25.9	42.4	29%
2020	425	35.4	40.6	48%
2021	482	40.2	42.7	62%
2022	458	38.2	44.8	61%

In 2022, the relentless upward trend in fatal overdoses came to a plateau after three consecutive years of increases. However, the overall total on the year remained unacceptably high at 458 and an average of 38.2 deaths per month. While the impact to the community overall remains at an extremely high level, there were some positive demographic changes identified in younger age groups. The average age of decedents increased from 42.7 in the previous year to 44.8, largely due to trends decreasing in younger age groups while simultaneously increasing in mid-older age groups. Specifically, teenage overdose deaths decreased by 60%, 20–29-year-olds decreased by 29%, while adults aged 50-59 increased by 40% (*Figure 5*). The percentage of deaths involving

fentanyl remained relatively unchanged, however, the number of heroin deaths dropped to an all-time low of 18 deaths on the year, which is a 42% reduction from the previous year.

Surveillance of race-specific data revealed that disproportionate overdose rates previously identified in American Indians/Alaskan Natives and African American communities, continued into 2022. In this time period, the overdose rate for Pima County overall decreased from 45.5 to 43.3 deaths per 100,000, while rates for American Indians/Alaska Natives and African Americans increased from 99.1 to 135.9 and 58.4 to 72.4 respectively (*Figure 4*). The significance of this trend further highlights the need for targeted strategies aimed at supporting populations most vulnerable to poor health outcomes during public health emergencies.

Key achievements include:

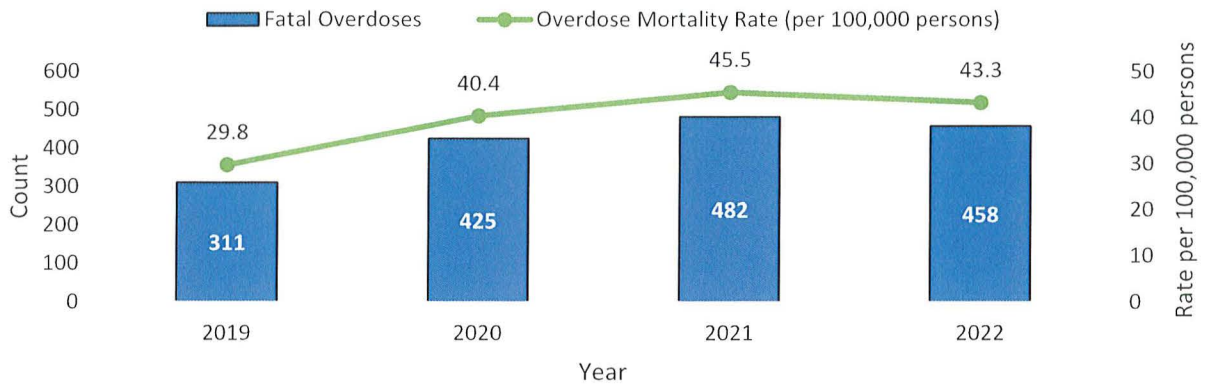
- The implementation of fentanyl test kit distribution to support harm reduction efforts and clinical testing.
- A record 12,629 naloxone kits distributed locally. An increase of 50% from the previous year.
- Initiation of overdose response protocols and naloxone trainings for local schools.
- Series of fentanyl letters sent to parents and schools in partnership with the Pima County Superintendent.
- By the end of calendar year 2022, the CMHA team had 11 full-time staff and 3 vacancies for a total of 14 full-time positions.

## **Conclusion**

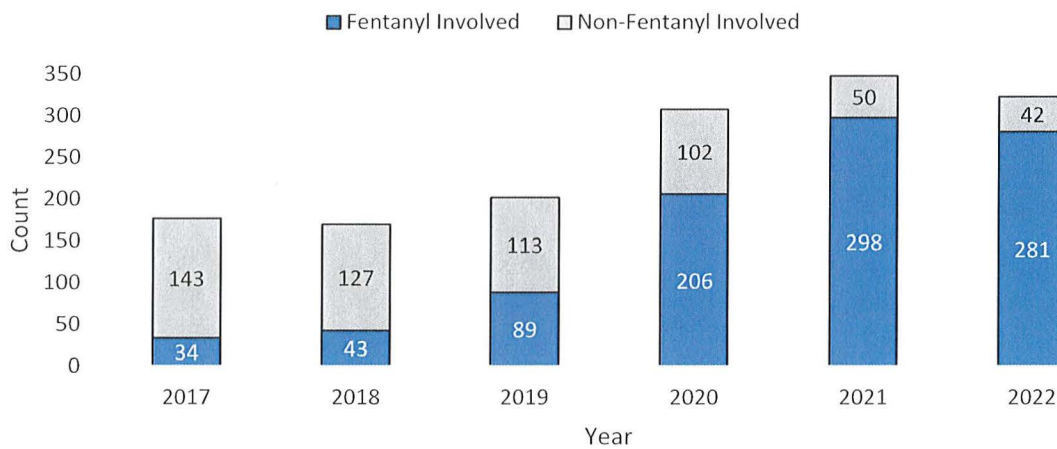
From 2019 to 2022, the opioid epidemic evolved into a major public health crisis affecting all of Pima County. The advent of illicitly produced readily available, inexpensive fentanyl in the midst of the pandemic has proven to be a lethal combination. The net result from this timeframe highlights a tragic storyline in our community. In just four years, 1,676 fatal overdoses occurred in Pima County. Our collaborative efforts to mitigate the impact of opioids in this community must focus on substance misuse prevention while simultaneously decreasing the harm and social isolation of those currently using. These must be based on the best available science with the full understanding that addiction and substance misuse is a relapsing remitting disease that is still not fully understood.

Data and Illustrations: Figures 1 - 5

**Figure 1. Number and Rate of Drug Overdose Deaths by Year**

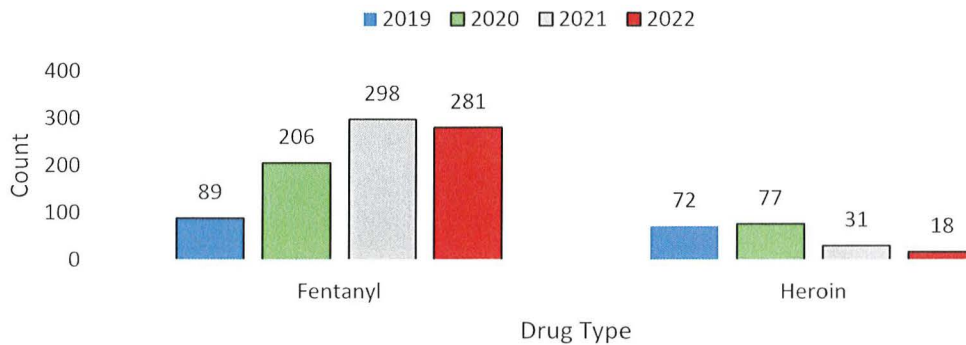


**Figure 2. Opioid Overdoses by Fentanyl Involvement**

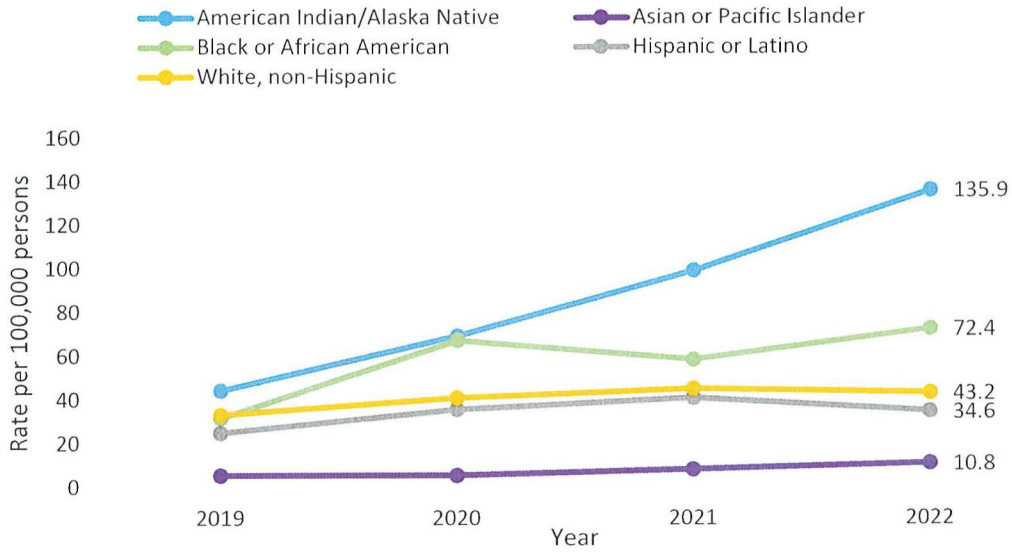


**Figure 3. Fentanyl and Heroin Overdose Fatalities**

\*As multiple substances can contribute to a cause of death, drug type counts are not exclusive.

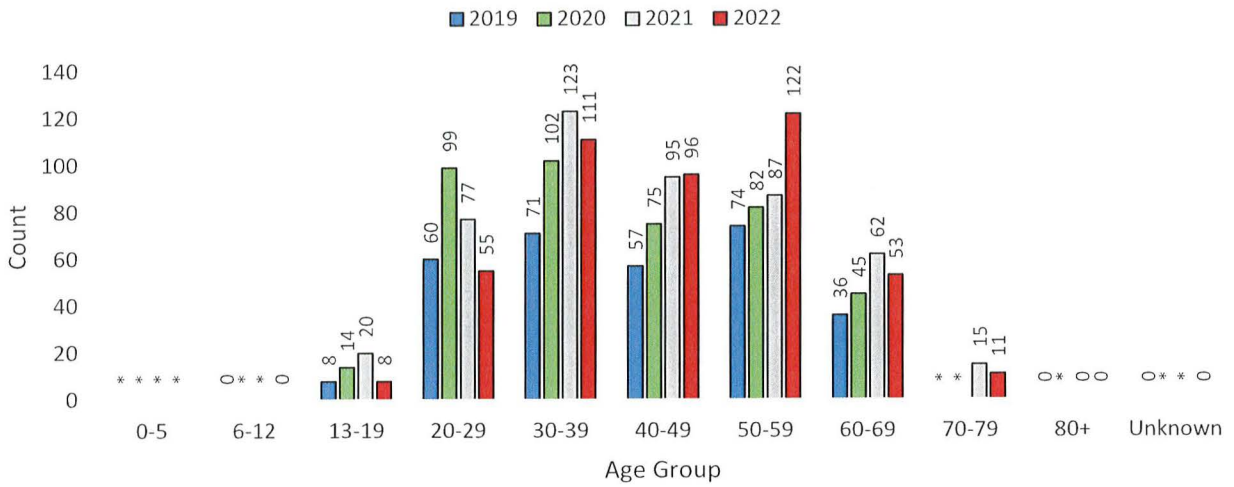


**Figure 4. Race-Specific Overdose Mortality Rates**



**Figure 5. Fatal Overdoses by Age Group**


\*Counts less than 5 are suppressed.



# ATTACHMENT 2

Date: March 30, 2023

To: Jan Leshner  
County Administrator

From: Theresa Cullen, MD, MS   
Health Department Director

Francisco Garcia  
Deputy County Administrator

**Re: PCHD and Public Library Partnership Updates Regarding Distribution of Harm Reduction Resources out of Pima County Libraries.**

This memo is to provide a progress update on current efforts to distribute Narcan Nasal Spray out of Pima County Library locations, and to highlight recent plans to build off the success of Narcan distribution by adding fentanyl testing supplies to hand out from library locations in response to high overdose rates. Fentanyl testing supplies decrease incidence of harm and death by giving an individual critical information about a substance which helps them determine the safest way to proceed: use less of the substance, or not use it at all if it is contaminated with fentanyl.

As an update, the health department's ongoing surveillance of fatal overdoses and illicit drug supply trends continues to show unacceptably high numbers in deaths and a relentless surge in illicit drugs sold in our community. Pima County has had one of the highest drug overdose rates in the state. We believe strategies and partnerships proposed in this memo represent one way for us to turn this around.

Narcan Nasal Spray and fentanyl testing are both important tools for preventing and reversing an opioid overdose. Making these resources accessible and affordable to members of the public is a critical strategy in our efforts to combat Pima County's ongoing drug overdose crisis. The libraries offer several convenient locations which are already well known to the public. Many of them overlap with geographic areas known to experience higher rates of fatal overdoses. Additionally, the libraries are well known for the innovative services and community resources aimed at promoting public wellbeing. We believe that now is the right time to expand this partnership by incorporating the distribution of fentanyl testing kits at the libraries.

In a previous memo dated February 9, 2022, PCHD provided a comprehensive summary of county-wide efforts to address substance use and drug overdoses in Pima County. In that memo, we described the value of these two potentially life saving resources. We provided trainings for library staff on how to respond to an opioid overdose, which supported the model of free Narcan kits offered by the libraries. Since that time, we have received several encouraging success stories directly from the public who accessed Narcan at a library. One such story came from a local parent who was able to access Narcan at one of the libraries. The parent eventually returned to the library to report that the Narcan kit they received was used later to reverse an opioid overdose at home, which saved their child's life.

In conclusion, the Health Department and Pima County Libraries are proposing that we move forward with adding fentanyl testing kits to library stock to support harm reduction through open access to this resource at all Pima County library locations. This action will augment the progress that has been made through our targeted naloxone distribution and provide an additional tool to help combat this ongoing public health crisis.

Attachment: February 9, 2022 Memo



Date: February 9, 2022

To: Jan Leshner  
Acting County Administrator

From: Theresa Cullen, MD, MS   
Health Department Director

**Re: Current Efforts Against Fentanyl Use and Deaths**

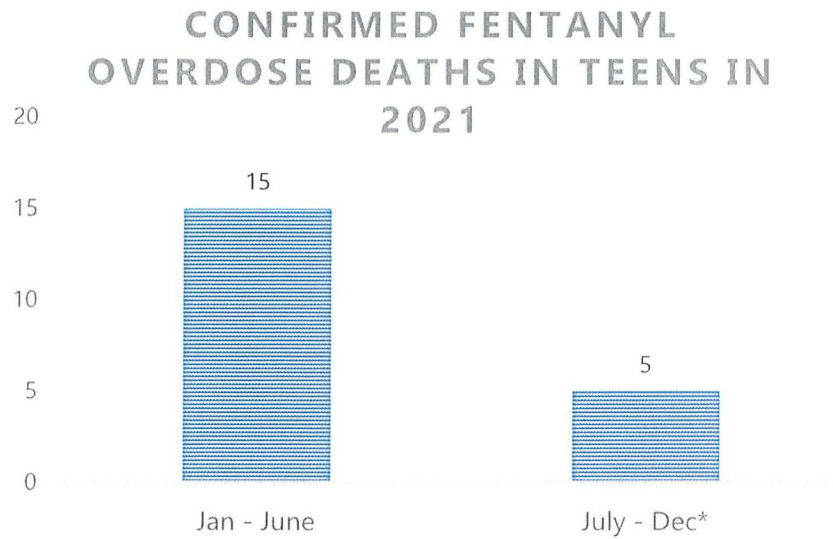
This memo is in response to an information request regarding the Health Department's current efforts to address the increase in fentanyl use and deaths, including harm reduction strategies. Specifically, the following efforts are summarized in detail below:

- Current Public Information and Outreach Efforts
- Youth-Targeted Interventions and Education
- Projects In Development
- Harm Reduction Strategies
  - Early Alert System
  - Fentanyl Test Strips

**Public Awareness and Outreach Efforts**

At this time, there are a variety of prevention and education efforts combatting fentanyl overdoses in our community. Over the past three years, several interviews have been conducted with the media and multiple alerts regarding fentanyl overdoses have been distributed within the community to notify the general public, providers, and local agencies. These alerts provide latest trends, educational messaging, and recommendations to prevent overdoses. We have also produced various awareness materials such as the "one pill can kill" poster. This poster describes risk factors, the danger associated with fentanyl, and the impact of this drug in Pima County.

In addition to health alerts and media campaigns, the CMHA team is responsible for the inventory and coordination of targeted Narcan distribution throughout Pima County. We coordinate to provide Narcan to local law enforcement, first responders, behavioral health agencies, and local coalitions allowing them to provide Narcan to those at highest risk of overdose in our community. In addition to these partnerships, Narcan is distributed directly out of our public libraries, outpatient clinics, and the adult detention center. Lastly, in response to the increase in teen deaths due to fentanyl in early 2021, the Health Department increased Narcan distribution by approximately 500% to blanket the community with this life saving intervention. Following these efforts, the number of fatal fentanyl overdoses observed in the teen population decreased by 66.67%, as seen in the chart below.



*\*Pending confirmation due to data lag with death certificate process.*

### **Youth-Targeted Interventions and Education**

Recently, a fentanyl warning letter was developed to educate parents, educators, and students about the risks associated with fentanyl and how to seek help. The letter was distributed across all school districts in partnership with the Pima County Superintendent’s Office. We also partnered with multiple local stakeholders to develop a community-wide fentanyl presentation targeting teens and young adults. The presentation is designed to be used as a standardized educational tool shared by all the participating agencies, to ensure consistent messaging is used across the community. In addition, various evidence-based curriculums such as Rx360, Strengthening Families Program, and Youth Mental Health First Aid are presented at local schools to educate students, and the adults that care for them, about substance use and to promote resiliency.

### **Projects In Development**

#### *Early Alert System*

An early alert system is in development in tandem with various law enforcement agencies integrating overdose and drug seizure data. This will enable a process for early public notifications whenever high levels of fentanyl is suspected to be circulating in the community, making the drug more accessible and increasing exposure to those at risk of overdose. In doing so, this early notification system will improve the timeliness of public advisories and targeted outreach efforts to prevent overdoses.

*Fentanyl Test Strips*

In an effort to combat the increase in drug overdose death driven by strong synthetic opioids, such as fentanyl, the Department of Health and Human Services announced approval for federal funding to purchase rapid Fentanyl Test Strips (FTS) (pictured below) on April 7, 2021. FTS can be used to detect the presence of fentanyl in urine and drug samples that have been dissolved in water. As part of the Overdose Data to Action (OD2A) grant from the Centers for Disease Control and Prevention (CDC), recipients are permitted to spend up to \$100,000 per year to purchase FTS to support surveillance and prevention strategies. The CDC has also highlighted the effective use of FTS as a harm reduction strategy for individuals at risk of an opioid overdose, as well as enhanced surveillance of illicit drug supply in local areas to inform prevention strategies and public health messaging.

*Image 1. Unused Fentanyl Test Strip (FTS)*



In Arizona, FTS were previously classified as drug paraphernalia, when not in a clinical setting, under A.R.S. §13-3415. On May 18, 2021, Arizona Senate Bill 1486 was passed which amended aforementioned A.R.S. §13-3415 for FTS to no longer be considered drug paraphernalia. “Testing equipment used, intended for use or designed for use in identifying or analyzing the strength, effectiveness or purity of drugs, other than narcotic drug testing products that are used to determine whether a controlled substance contains fentanyl or a fentanyl analog.” This amendment was championed by Senator Christine Marsh, whose son accidentally overdosed on a fentanyl-laced pill in 2020, in efforts to prevent accidental overdoses.

Current proposed strategies for distribution include the following:

1. *Harm Reduction:* The health department has planned efforts to distribute FTS as a harm reduction strategy and to improve clinical screenings for surveillance and early intervention. The simultaneous distribution of Narcan and FTS directly to people who use drugs will have a direct impact on reducing overdoses in the community. This practice provides individuals with timely information which empowers them to make safer choices.
2. *Clinical Screening:* By distributing to local clinics and agencies, FTS will help treatment teams identify fentanyl use to provide education and to effectively modify treatment plans. Clinical screenings will also bolster tracking efforts at the clinic level to better understand the frequency of fentanyl use in their patient populations.


The Health Department will be responsible for storage and distribution of FTS, but will not have a direct role in testing or clinical screenings. As such, Health Department staff will **NOT** be testing drugs, assisting others in testing drugs, or engaging in any activities that involve the

presence of drugs. Pima County will be providing FTS to local organizations and agencies that work with target populations, in tandem with Narcan distribution.

With professional support (clinical screenings) and individual awareness (harm reduction), we can help prevent overdoses through early intervention and rapid response strategies.

**Media Campaigns**

The last thing they did before they died.




Fentanyl was responsible for the deaths of 193 adults and 12 teens in Pima County last year.

One pill can kill.

Fentanyl is a synthetic opioid. It is 50-100 times more toxic than heroin and has contributed to 2.5 times as many deaths. Fentanyl is regularly found in cocaine, meth, heroin, pills, and powders in our community.

Be safe. Don't take it.

For free fentanyl test strips or naloxone, visit [PimaHelpline.org/Naloxone](http://PimaHelpline.org/Naloxone).  
For substance use treatment call 1-800-662-HELP(4357)



Community Mental Health & Addiction Program: [pima.gov/MentalHealth](http://pima.gov/MentalHealth)




PHOTO COURTESY OF PHS

Lo último que hicieron antes de morir.



En el Condado Pima, el fentanilo fue responsable por la muerte de 193 adultos y 12 adolescentes el año pasado.

Una pastilla puede matar.

El fentanilo es un opiáceo sintético. Es 50 a 100 veces más tóxico que la heroína y ha contribuido a más del doble de muertes. El fentanilo se ha encontrado en la cocaína, metanfetamina, heroína, pastillas y polvos en nuestra comunidad.

La única manera de estar a salvo es no usarlo.

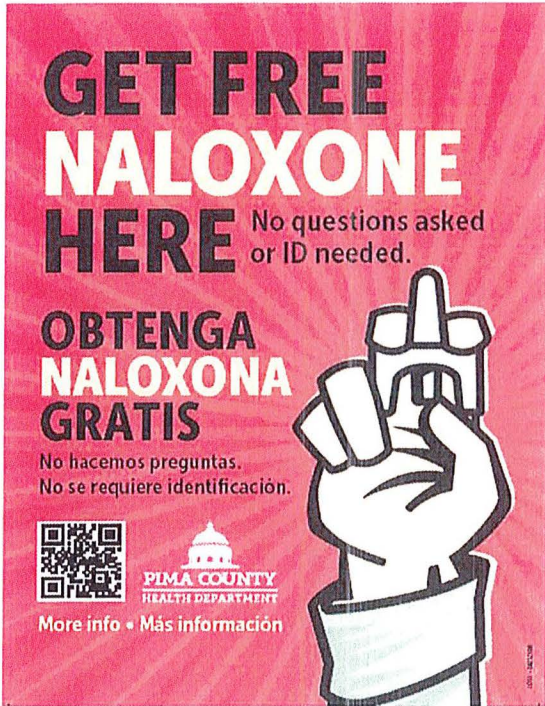
Para obtener naloxona o tiras para detección de fentanilo gratis visita: [PimaHelpline.org/Naloxone](http://PimaHelpline.org/Naloxone)  
Para tratamiento de adicciones llama al 1-800-662-HELP (4357)



Equipo Comunitario de Salud Mental y Adicciones: [pima.gov/SaludMental](http://pima.gov/SaludMental)



PHOTO COURTESY OF PHS



Concur:

Francisco Garcia, Deputy County Administrator

Date

# ATTACHMENT 3

Date: March 28, 2023

To: Jan Leshner  
County Administrator

From: Paula Perrera   
Behavioral Health Director

Re: **Pima County Adult Detention Center SUD and MAT Services**

Prior to 2017, detoxification programming was the only option for patients with a substance use disorder who were held in custody at the Pima County Adult Detention Complex (PCADC). Today patients who screen positive for possible substance use disorder at the time of their initial screening are assessed with the Comprehensive Detox Screen. This screen informs which withdrawal protocols are appropriate for the patient. Detoxification at the PCADC is guided by three types of withdrawal assessments, the Clinical Withdrawal Assessment for Alcohol (CIWA-A), the Clinical Withdrawal Assessment for Benzodiazepines (CIWA-B), and the Clinical Opiate Withdrawal Scale (COWS). A registered nurse administers these assessments within 120 minutes of a patients' acceptance into the facility. All further CIWA/COWS assessments are completed by nursing staff until the patient reaches criteria indicating it is safe to discharge the patient from the detoxification program.

In 2017, Pima County became one of the first county detention facilities in the country to offer Medication Assisted Treatment (MAT) to pregnant females. At that time, pregnant females were sent offsite for the initiation of this treatment to prevent complications of untreated opioid use disorder and pregnancy.

In 2019, two housing units were designated for housing patients at risk of withdrawal from substances. These 'detox' units allow for close observation of detainees and rounds by designated nursing staff at intervals determined by the severity of withdrawal symptoms. Patients undergoing withdrawal monitoring receive comfort medications to treat symptoms and, in the instance of severe withdrawal, patients can be initiated on Buprenorphine. These interventions significantly decrease the potential for adverse outcomes and the likelihood that patients will seek out contraband substances to control cravings.

Also in 2019, PCADC, Arizona Complete Health, an Arizona Medicaid Plan (AzCH), Pima County Behavioral Health (PCBH), Community Medical Services (CMS), a community opioid treatment provider (OTP), and Centurion, the then contracted medical services provider, began planning the expansion of MAT services in the jail beyond pregnant females. Under this plan, CMS would provide MAT services for detainees while Centurion's role was to collaborate and assist CMS in providing that service inside the jail. These services were offered to all patients who were actively receiving MAT services in the community at the time of their admission to PCADC.

The County transitioned contracted medical service providers from Centurion to NaphCare on September 15, 2021. NaphCare wanted direct medical oversight of the process and requested that the MAT program be brought in-house. CMS was agreeable to this transition and provided support while the process of obtaining licensure on behalf of the County took place. Having the medical services vendor directly administer MAT services increased patient safety by decreasing the opportunity for miscommunication, potential errors and diversion issues. In February of 2022, PCADC was awarded a DEA license and granted provisional Opioid Treatment Program (OTP) certification by the federal Substance Abuse and Mental Health Services Administration (SAMHSA). This certification is considered provisional until the site can undergo certification and accreditation through the National Commission on Correctional Healthcare (NCCHC). That NCCHC survey took place on March 15, 2023 and we are expecting permanent licensing soon. The licensing allows PCADC to distribute buprenorphine, methadone, and Naltrexone using licensed clinical staff provided by the contracted medical vendor. NaphCare is required to maintain DEA licensure, as well as achieve and maintain Opioid Treatment Program (OTP) accreditation from the NCCHC before the end of their contract term.

PCADC now offers 'community maintenance' to any detainees for whom MAT services can be verified. Coordination of care begins as soon as the patient is admitted to the facility at which time their dosing information is verified with the community provider and medication is initiated within 24 hours. Once a detained guest-dose patient becomes eligible for release, an email communication is sent to the outpatient MAT clinic to alert them their patient will be out of custody. Patients are expected to travel to the MAT clinic upon release to continue their treatment.

In September of 2022, PCBH received notification of a grant award from the U.S. Department of Justice Services Office of Justice Programs in order to expand MAT programming currently occurring at PCADC. This grant allows for enhanced coordination with community providers and ensure services are available to adults while in custody and after they are discharged into the community.

The inability to ensure a safe discharge plan for patients without an established provider in the community has been the biggest barrier to inducting new patients into the MAT program. In October of 2022, the medical services contract with NaphCare was renewed and updated to include a MAT specific discharge planner. The discharge planner will establish formal linkages between PCADC and community-based organizations to allow for patients with untreated opioid use disorder to be inducted into MAT services without disruption of services upon their release from PCADC. The addition of the MAT discharge planner will also allow for timely exchange of health information with community providers and discussion with the patient that emphasizes the importance of appropriate follow-up and aftercare.

Grant funding also allowed for the addition of a County Program Coordinator acting as a peer navigator. This position is responsible for providing trauma-informed and culturally competent peer support to patients receiving in-custody MAT; coordinating with the medical vendor's MAT discharge planner to assist with connecting patients to their preferred community MAT provider upon release, and linking patients to reentry support services. Having a dedicated peer support navigator for MAT patients being discharged from the PCADC is anticipated to reduce community overdose deaths and contribute to better patient recovery outcomes while fulfilling the County's obligation to the federal grantor agency.

Cc: Dr. Francisco Garcia, Deputy County Administrator & Chief Medical Officer  
Chris Nanos, Pima County Sheriff