

General Assembly of the Commonwealth of Pennsylvania Joint State Government Commission Room 108 Finance Building, 613 North Street Harrisburg, PA 17120 717-787-4397

Released: December 28, 2020

Short Summary in Response to House Resolution 216 of 2019 Warm Hand-Offs in Pennsylvania A Task Force and Advisory Committee Report

House Resolution No. 216 of 2019 establishes a legislative task force on overdose recovery and directs the Joint State Government Commission "to conduct a study on warm hand-off to treatment for individuals with a substance use disorder in this Commonwealth and to report its findings and recommendations to the House of Representatives."

The advisory committee created to assist the legislative task force in its study and recommendations was comprised of over twenty individuals including the staff from several departments: DDAP, DOH, DHS, DOC, and the Adjutant General, as well as emergency medicine physicians, county drug and alcohol administrators, researchers, certified recovery specialists, a district attorney, a law enforcement official, a hospital administrator, a child advocate, and representatives of health insurance companies and recovery organizations. Some of the members were individuals who were in long-term recovery themselves and who also had knowledge and training in substance use disorder treatment.

The number of overdoses, both fatal and nonfatal, remains high, and recent trends are alarming. Pennsylvania, along with other states, is taking measures to address this serious problem.

There is general consensus that more assertive strategies are needed to enhance patients' progression to substance use disorder treatment after an overdose. Warm hand-offs provide an important mechanism to ensure rapid and efficient entry into long-term treatment.

The need for warm hand-off programs is made clear by notable statistics showing how many individuals experience overdose repeatedly and how few of them receive follow-up services after their initial SUD treatment.

Having considered various approaches, the advisory committee has come to a conclusion that the best route for the Commonwealth to take with regard to warm hand-offs is to expand and develop the process that has already emerged in Pennsylvania, building on the existing resources. Agencies that are already involved in the warm handoff process are the Single County Authorities (SCAs), the Centers of Excellence (COEs) and, to a lesser degree, some of the mental health crisis intervention centers. These agencies are well-positioned to adopt further services and provide platform for expanding and strengthening of warm hand-offs statewide.

Pennsylvania was one of the pioneers among other states in both the use of naloxone as a life-saving measure after overdose and the development of the warm hand-off process. The Department of Health (DOH), the Department of Drug and Alcohol Programs (DDAP), and the Pennsylvania College of Emergency Physicians (PACEP) collaborated to develop the warm hand-off protocol and created the Warm Hand-off Care Map flowchart. The protocol has been implemented broadly throughout the Commonwealth and has been effective though certain areas require enhancement and improvement.

The Commonwealth should strive to achieve consistency in offering warm hand-offs based on the evidencebased best practices statewide while at the same time allow for flexibility based on local circumstances.

The full report is available on our website http://jsg.legis.state.pa.us/