



GOVERNMENT OF THE DISTRICT OF COLUMBIA
OFFICE OF THE CHIEF MEDICAL EXAMINER
Opioid Fatality Review Board
November 8, 2022, Meeting Minutes

There were (22) attendees:

Opioid Fatality Review Board (OFRB) Members:

Dr. Jewell Reddick (Vice-Chair)	Kenan Zamore (Chair)
Tyrone Guyse (DEA)	Rhonda Johnson (District Resident Member)
Dominique Vinson (DHS)	Ramey Kyle (MPD)
Chaka Curtis (DBH)	Kevin Petty (District Resident Member)
Ciena Bayard (OCME)	Dr. Beth Jordan (DOC)
Cyndee Clay (HIPS)	Alexandra Evans (DFS)

Participants:

Dr. Sharon Hunt (DBH)	Charles Avery (The ARK)
Myles Davenport (OCME)	Adrienne Femnou (NYA)
Emily Townsend (OCME)	Breanna Cuchara (OCME)

Fatality Review Staff:

Tadessa Harper-Nichols (OCME)	Dr. Hakim Stovall (OCME)
Jenna Beebe-Aryee (OCME)	Kera Johnson (OCME)

I. Roll Call- acknowledgement of members not present at open session

II. Review and majority vote to approve the agenda

III. Review of Closed portion of October 11, 2022 meeting minutes

- The closed portion of the October 11, 2022, meeting minutes were reviewed and approved with no amendments.

IV. Old Case #21-093- Recommendations

- The Board voted unanimously to adopt the following recommendation:

In collaboration with housing providers, the Department of Behavioral Health (DBH) and the Department of Human Services (DHS) should enhance the delivery of case management services by providing training and education related to behavioral health (mental health, substance-use disorder, and recovery support) to all client-facing DHS employees.

The agencies identified should develop a plan to address the enhancement of services provided through Permanent Supportive Housing, Rapid Re-Housing, and the Targeted Affordable Housing program and effectively train client facing staff as follows:

1. Conduct an evaluation of current training and educational material utilized by staff.
2. Develop a plan to provide comprehensive ongoing training and education to competencies related to behavioral health by leveraging resources made available through the DBH.
3. Consider the adoption of a housing first model.
4. Implement a wraparound service delivery approach to enable case managers to help clients navigate housing programs while simultaneously addressing their behavioral health and substance use disorder diagnoses

V. New Case #21-079

The Board began the review of Case #21-079. The decedent was a 50-year-old, African American male who experienced a fatal overdose on 3/19/2021 due to the combined toxic effects of cocaine and fentanyl.

Representatives from the following Core Service Agencies (CSA) participated in the case review discussion:

- Charles Avery, The ARK of DC (Wellness Health Services)
- Adrienne Femnou, NYA Health Services
- The decedent was referred to NYA and Wellness Health Services. Both CSAs were unable to contact the decedent. After three attempts over 90 days, the decedent was disenrolled from services. Limited information was available on the decedent because the agencies were unable to make contact.
- A participant shared that NYA Health Services protocol is to contact consumers first by phone.
- The intake process for consumers who are referred to the ARK of DC involves an overall workup and a brief medical examination. The consumer's history of substance use and mental health conditions are documented at intake.
- The intake process takes between 2-3 hours using screening, brief intervention, and referral to treatment (SBIRT) assessment and other screening tools. Services then begin immediately.

- There is an integrated service program with a family practitioner on site who provides diagnostic assessments.
- The ARK includes harm reduction interventions into consumers treatment plans because these methods have been proven to be effective in addressing substance use disorder.
- After the diagnostic assessment, if a diagnosis is made then a treatment plan is developed for the consumer. The consumer is then assigned to a counselor and a community support worker.
- Community support workers (CSW) are an essential part of core service agencies in the District. CSW's make telephone and home visits and see consumers up to three times per week.
- Core service agencies in the District now have access to electronic medical records through the Chesapeake Regional Information System for our Patients (CRISP) and can review a consumer's hospitalization/medical history.
- CRISP provides real time alerts via messages to providers when a consumer is hospitalized.
- For continuation of care, the consumer is seen by the CSW at the hospital or mental health facility.
- Wellness Health Services provided an overview of the agency. The agency is located on Rhode Island Ave NE and recently opened a 2nd location on Minnesota Avenue.
- The agency provides support services, therapy, medication management, and assistance in obtaining housing. The intake process is similar to the ARK of DC.
- Wellness Health Services attempted to contact the consumer by phone on four occasions without success.
- The DBH member shared that there are two intensive care coordination teams. One is through the State Opioid Response (SOR) grant on the SUD side and the other is on the mental health side through the DBH adult services division.
- Members discussed the following prior Board recommendation that was applicable to this case.
Recommendation #18: The DBH should develop a model to engage/reengage individuals who become dis-enrolled with DBH supported mental health and MAT services.

Findings:

1. There is a need for enhanced peer navigators to engage consumers in the Emergency Department and connect them to referred core service agencies.
2. Core service agencies should refer disengaged consumers to one of the two intensive care coordination teams.

The Board completed the case review discussion form and concluded that there was a good chance that the decedent's death could have been prevented if he were successfully engaged with the appropriate services. The Board voted unanimously to close Case #21-079.

VI. Program Updates

There were no program updates.

VII. Adjournment

The meeting was adjourned at 4:57pm. The next OFRB meeting is scheduled for December 13, 2023, at 3:00 pm. Thank you for your participation!