

Testimony on H.B. 166: Main Operating Budget for FY 2020-2021  
House Finance: Health and Human Services Subcommittee  
Tuesday, April 9, 2019

Dr. Donald Sheldon  
Philanthropic and Community Coalition to End the Opioid Epidemic in Lorain County

Chairman Romanchuk, Ranking Member West and members of the Subcommittee; my name is Don Sheldon. I am a former Emergency Physician and President of Elyria Regional Healthcare System and President, Community Hospitals, of the Western Region of University Hospitals. I have since retired but remain active with numerous community boards and foundations in Lorain County. I am a primary lead of the Philanthropic and Community Coalition to End the Opioid Epidemic in Lorain County (the Coalition). This coalition was formed through a collaboration among the Nord Family Foundation, the Community Foundation of Lorain County and the Black River Education and Wellness Foundation, along with other community agencies and services in Lorain County to address this crisis in our community. Thank you for the opportunity to offer testimony on House Bill 166.

As you know, Ohio ranks second nationwide in the rate of deaths from opioid overdose. Lorain County is an epicenter of this devastation. Within our population of just over 300,000 citizens, we have:

- Approximately 61,000 people in Lorain County who suffer from mental illness
- Experts estimate over 7,000 mental health crises occur each year
- About 35,000 people have misused or abused opioids in 2016
- Nearly 10,000 people have a substance use disorder
- And nationwide statistics show approximately 50% of people with substance use disorders have a co-occurring mental illness

The Coalition is focused on creating a crisis stabilization center in Lorain County because our need is so critically dire. Currently, Lorain County has no such center, and patients are taken either to expensive emergency departments where they receive suboptimal treatment, or to jails where true care is almost nonexistent.

The crisis stabilization center in Lorain County will be modeled after best practices we have seen elsewhere in the country. After commissioning an in-depth environmental scan to assess the needs in our county, we set out to find these best practices. We visited Phoenix and Tucson in Arizona, Newark, Delaware and Fairfax and Arlington, Virginia. Each of these centers, along with others studied in Akron and Durham, North Carolina to name a few, had components of best practices found across our country. Of note, in the RecoveryOhio Advisory Council's initial report released last month, they recommend investigating "promising crisis service models from across Ohio and in other states such as Arizona..." That is exactly what we have already done and the lessons we learned were used to guide us in creating our progressive and well researched model.

It appears as though RecoveryOhio supports our findings that crisis stabilization centers have been found to dramatically improve individual care and reduce costs by reducing detoxification in jails, reducing ER visits, reducing hospital admissions and reducing repeat episodes of crisis. They act as an entity where people are triaged, treated holistically with the development of an individualized treatment plan and connected to services best suited to their unique needs.

In fact, RecoveryOhio's report stated: "The environments of emergency departments and jails are not conducive to the resolution of a psychiatric health emergency and, therefore, an undue burden is placed on those facilities and on those experiencing a crisis related to mental illness or a substance use disorder." Further, "Crisis services are a part of a continuum focused on managing individuals' mental health, addiction, and medical needs and should be integrated whenever possible. They are cost-effective and result in high client satisfaction rates."

The sites we visited were staffed 24/7/365 with nurses, medical support, and recovery specialists, and provide a dedicated emergency entrance for referrals by first responders, hospitals and as a welcoming front door for anyone seeking help in a time of mental health or addiction crisis. Crisis stabilization centers have the ability to place people in an observation setting to assess their needs, and in many cases, crisis situations are de-escalated without the need for expensive hospital admission. We observed that:

- Only 35% needed to stay at the crisis center longer than 23 hours.
- 91% of people were treated without needing hospital admission.

For the 35% of people that need a longer stay than 23 hours, subacute beds will be available. There are currently no subacute detox beds in Lorain County.

The Coalition in Lorain County is seeking state support to bring a state-of-the-art crisis stabilization model to Lorain County. To summarize, our crisis stabilization center will:

- Have an 24/7/365 open door, and we will evaluate and assess each patient and develop an individualized treatment plan.
- Those stable for discharge will be referred in a "hard-wired" manner to our local treatment agency partners.
- Those requiring additional stabilization would either be placed in the behavioral health stabilization unit and/or an addiction stabilization and subacute detox unit.
- Those few requiring acute hospitalization will be transferred to the closest appropriate facility.

We are seeking \$2.5 million over the biennium to support this state-of-the-art model. Currently no such model has been opened in Ohio.

By investing in Lorain County's crisis stabilization center through the state budget, we would be able to provide immediate care for individuals in crisis, improve outcomes, and reduce overall costs. This is an incredible opportunity for the county, and for Ohio as well. This best practice model could serve as a resource for others in the state to study, visit and replicated.

Thank you again for the opportunity to speak with you about this program and our request for the state's involvement and support. I am happy to answer any questions you may have.