

Lehigh County Pennsylvania Blue Guardian Program



Office of the District Attorney
Regional Intelligence and Investigation Center
Department of Drug and Alcohol

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Blue Guardian is an initiative between the Office of the District Attorney, the Regional Intelligence and Investigation Center, local and state police, and the Lehigh County Department of Drug & Alcohol to support individuals and their families plagued by opioids in accessing treatment supports.

Version History

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Executive Overview

Blue Guardian is an initiative between the District Attorney, the Lehigh County Regional Intelligence and Investigation Center (RIIC), police departments in Lehigh County, and the Lehigh County Department of Drug & Alcohol. The program leverages the existing relationships between police and their communities to assist individuals and their families plagued by opioid addiction in accessing treatment. Lehigh County is at, or exceeds, state averages in the number of overdose deaths, treatment admissions, and use of naloxone. This is striking, given the fact that the overdose death rate in Pennsylvania increased from 26.7 per 100,000 in 2015 to 36.5 per 100,000 in 2016, according to the *Analysis of Overdose Deaths in Pennsylvania, 2016*, a study done at the University of Pittsburgh. Lehigh County finished 2017 with over 200 drug-related deaths, an increase of over 40 from the prior year. The current year (2018) has witnessed 72 drug-related deaths through mid-June.

Naloxone is the medication used to reverse an opioid overdose. Law enforcement agencies in Lehigh County deploy Naloxone approximately 200 times per year. Each time an officer utilizes naloxone, they enter the naloxone administration into the Blue Guardian Program to include victim name, address, gender, race, language, date-time, police incident number, mode of transport to hospital, location of hospital, number of doses administered, dose strength, and pre/post naloxone symptoms. This information is entered into Blue Guardian in as close to "real time" as possible.

Blue Guardian is the home support visit which will occur 48-72 hours after the initial event. A uniformed police officer and Certified Recovery Specialist (CRS) will go to the home and reengage the individual and provide resources to the family. The face-to-face contact is made by an officer of the police department where the individual resides, which may differ from where the incident occurred. By joining law enforcement and treatment supports together and meeting an individual and their family where they live we can lessen the barriers and obstacles that exist and concurrently support those in need.

Regional Investigation and Intelligence Center History

The Regional Intelligence and Investigation center (RIIC) is a law-enforcement resource that serves the greater Lehigh Valley which is comprised of both Lehigh and Northampton Counties with a population of over 821,000 residents as of the 2010 U.S. Census. It is governed by the Lehigh County Office of the District Attorney. The center is located in downtown Allentown, and staffed with criminal intelligence analysts and county detectives who provide investigative case support to County law enforcement agencies. The center uses a custom developed state of the art information technology system that allows center staff and local police investigators to search and analyze crime data. The primary data includes local police records from more 40 local jurisdictions in the Lehigh Valley, as well as state and regional data sources. The intent of the RIIC is to leverage county law enforcement and intelligence data and to facilitate data access to other local, state, and federal sources in order to provide investigative and intelligence services to our law enforcement partners.

The technology solution developed for the RIIC is a web-based system designed to foster collaboration among its 1200 local, state, and federal law enforcement users. It includes an intuitive secure online portal (the RIIC Portal) wherein users can establish a team workspace within a secured social-media type interface to share wanted or bulletin information, photos, tips, leads and other information related to criminal investigations. The RIIC portal provides a rich search and analytic application (the RIIC Search application) that uses data from both law enforcement records systems and other sources through a single interface. It provides a one-stop-shop for searching local and external records sources. The search software directly integrates with external sources including PA Justice Network, PA State Police, the Liberty Mid-Atlantic High Intensity Drug Trafficking Area (HIDTA), LEJIS, Allentown Parking Authority data, and subscription sources such as Accurint.

The RIIC solution also includes several specialized databases and web applications to support the operations of local task-forces. One of the major goals of the RIIC is to identify, track and combat gang activity. Thanks to funding from the Pennsylvania Commission on Crime and Delinquency (PCCD) and the Harry C. Trexler Trust, we were able to build out the RIIC Gang Intelligence System to help law enforcement determine a gang's territory, violence, membership and affiliate levels, commission of crimes, use of weapons, cooperation with other gangs, and leadership change. Information gleaned from this system could forewarn

of developing problems and threats, and could help decision makers develop action plans that can eventually assist in officer and public safety.

The newest application added to the RIIC suite of software is the Illicit Drug Identification and Tracking System (IDITS). It was developed with funding from the PCCD. IDITS is intended to inform strategic responses to drug problems in Lehigh County and surrounding areas. An increase in drug-related deaths in our region has highlighted some of the shortcomings noticed with respect to collecting and sharing this data across domains, specifically between the Lehigh County Drug Task Force (DTF), local police departments, and the Lehigh County Coroner's Office. As events like these increase and these agencies begin to capture and share even more data, it will require a better technology solution to identify, track and report on illicit drugs trending in our region.

Blue Guardian Development

Blue Guardian was a natural fit within the IDITS application and was developed as a component within it. Funding was awarded by the Lehigh County Department of Drug and Alcohol through the Opioid State Targeted Response Funding provided by the Pennsylvania Department of Drug and Alcohol Programs to build out the Blue Guardian segment within the IDITS application.

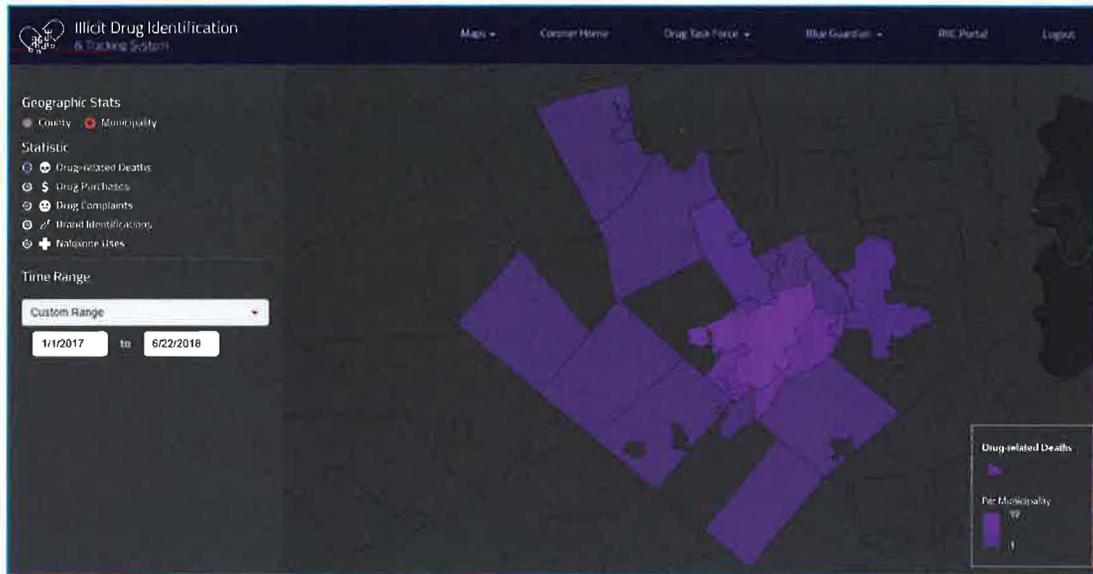
By locating the application in this criminal justice system, it makes it accessible for all municipal police departments. The Blue Guardian application is not a duplication of law enforcement paperwork, rather it is a simplification. Instead of the traditional method of police completing the paper naloxone administration report and faxing it to the State's system, the officer can simply log into Blue Guardian and quickly enter the information that gets electronically transmitted up to the state system to capture naloxone usages.

Everything in the system is handled through role-based security so that law enforcement users cannot see any clinical notes on what the treatment provider entered on a victim who was administered Naloxone, and the treatment provider users cannot see any data that is considered law enforcement sensitive.

Menus

Dashboard

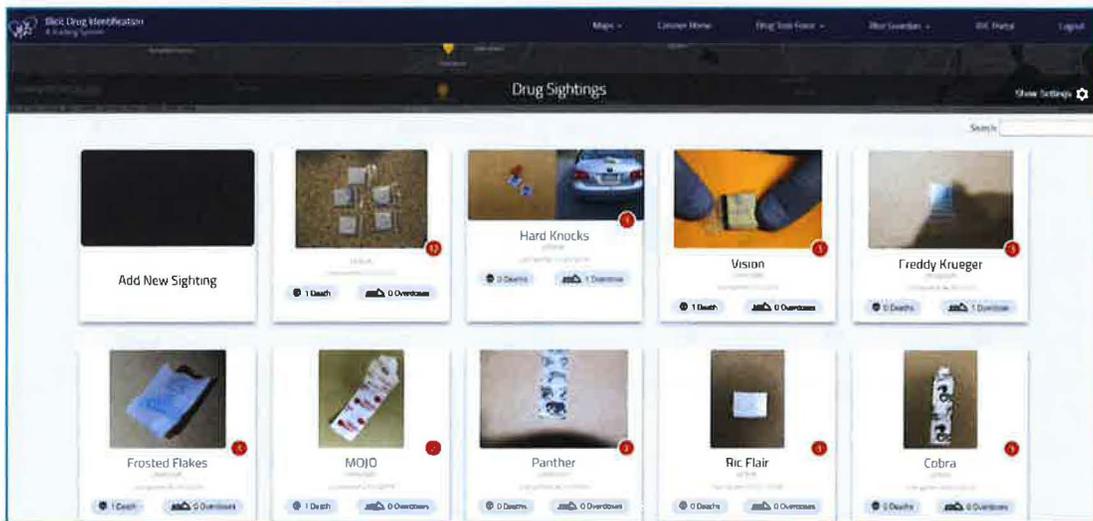
The dashboard of the IDITS/Blue Guardian application provides an overall map of drug activity, deaths, and Naloxone usage for some statistics overtime.



Menu availability within the IDITS system depends on the user's security level.

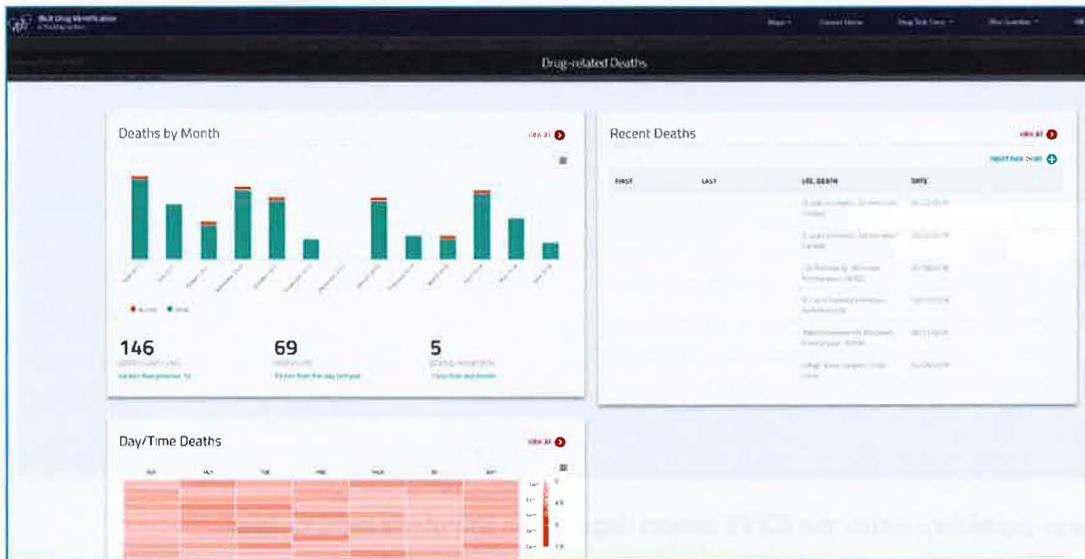
Drug Task Force

There are sections within the application that are role specific – only members of the Drug Task Force have access into their section where they can enter information on drug related complaints and controlled buys, as well as any identifiable markings of heroin brands (or other) trending in the area. The markings also include information on overdoses or deaths associated with it.



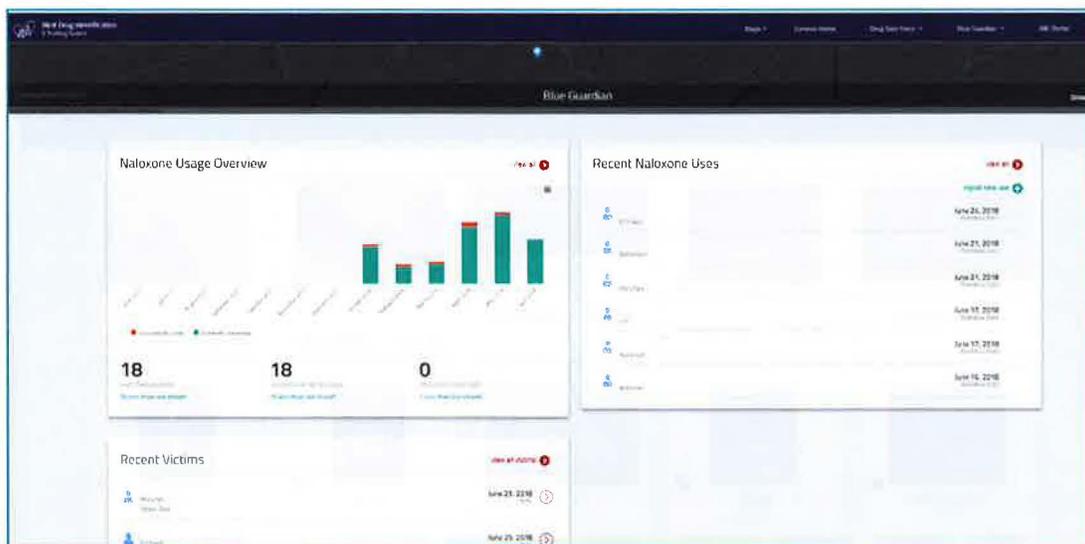
Coroner

The Coroner also has a secured workspace where all drug related deaths are entered. This information includes demographics on the decedent as well as toxicology results. This information can then be compiled against an active metabolite database to produce statistics of the percentages of deaths associated with particular drug types. (All names and addresses have been removed in the images below.)



Blue Guardian

This application is available to all parties involved in the initiative (law enforcement, Drug Task Force, Coroner, and Drug & Alcohol Department) with additional permissions set at the card and record level. (All names and addresses have been removed in the images below.)



There are three cards within the Blue Guardian Dashboard. A chart that shows the **Naloxone Usage Overview**, the **Recent Naloxone Use** detail information that police complete after administering Naloxone, and the **Recent Victims** card which contains the clinical notes after a CRS has paid the individual a home visit encouraging treatment options.

Naloxone Administration Card

The Naloxone Administration Form has the following sections that are completed by law enforcement.

Incident Information

Incident Information captures the agency's name associated with the Naloxone administration, the police incident number associated with the response, the date and time of the Naloxone administration, and the location of where the overdose occurred.

The screenshot displays a web form titled "Add Naloxone Administration" with a close button (X) in the top right corner. The form is divided into sections, with the "Incident Information" section highlighted by a red horizontal line. The fields in this section are:

- Agency Name:** A text input field with a search icon and the placeholder text "Start typing to search...".
- Agency Incident Number:** A text input field.
- Incident Date:** A date selection field.
- Incident Time:** A time selection field with a dropdown menu currently set to "Unknown".
- Overdose Location:** A text input field.
- Overdose Loc. Line 2 (apt no, etc.):** A text input field.

Victim Information

The Victim Information includes names, home address, phone number, gender, race/ethnicity, birth date, language spoken by victim, and whether the victim was transported to the hospital after the Naloxone administration. If the victim was transported to the hospital additional fields appear to select the mode of transportation, (ambulance, police, other) and a field of pre-populated hospitals in the region.

Victim Information

Existing Naloxone Victim

Once selected, you can update their address and other info below. To create a new victim, enter their info below.

First Name	Last Name
<input type="text"/>	<input type="text"/>

Home Address

Home Address Line 2 (apt no. etc.)

Phone Number

Gender of the victim

Male Female

Unknown

Race/Ethnicity of Victim

DOB(If known)

Age/Approx. Age

Language

Was Victim Transported to Hospital?

Yes No

Evidence

This section includes and evidence found on scene, heroin packets or opioid pills.

Evidence		
<input type="radio"/> Evidence Secured	<input type="radio"/> Drugs	<input type="radio"/> Paraphernalia
<input type="radio"/> Heroin	Stamp (text/color)	Image Description
	Stamp (text/color)	Image Description
<input type="radio"/> Opiate Pills	Pill Type	Doctor's Name

Naloxone Usage Details

The next section (shown on the following page) list the pre/post Naloxone usage overview, and includes the signs of the overdose, what drugs the victim used, whether Naloxone was administered by anyone else on scene other than the police, and how many doses and dose strength were administered.

Naloxone that is being used in the community comes in two different dose strengths – 2mg and 4mg. It is important for the Single County Authority (SCA) to be aware of the number of doses used, dose strength, and how long it took for the naloxone to work because it is an indication of the type of medical interventions needed and how long the individual may be in the hospital emergency department (ED) or admitted into the hospital.

Based upon experience, if two doses of 4mg naloxone is used, and it takes longer than 3-5 minutes for it to work, the individual is typically admitted into the hospital and will not be medically cleared or able to participate in a screening/warm handoff into treatment for the first several days of the hospital admission.

In addition, the number of doses, dose strength and time to work is an indication of the potency of the heroin in the community and leads to further toxicology investigation into whether other opioid derivatives are added (fentanyl or carfentanyl).

Naloxone Usage Details

Signs of Overdose
Choose options...

Victim overdosed on what drugs?
Choose options...

Was naloxone administered by anyone else at the scene?
 Yes No

How many doses were administered?
Dose Strength

How long did it take for the naloxone to work?

What was the person's response to naloxone?
Choose options...

Did the person survive?
 Yes No

Post-naloxone symptoms
Choose options...

What other actions were taken?
Choose options...

Other information includes the individual's response to Naloxone, if they survived, what types of post Naloxone symptoms were noticed (seizure, respiratory distress, vomiting), and what other actions were taken (chest decompression, automatic defibrillator, sternal rub).

Administration Details

The last section lists information pertaining to the lot and expiration date of the Naloxone, any notes the officer wanted to include, as well as the officer's name and contact information for recovery outreach purposes. Once the officer completes the form, it is saved and submitted to the Pennsylvania State Police OD Information Network System (ODIN). Blue Guardian provides detail at our local level for our recovery outreach program and statistics that feed into our state-level system regarding Naloxone usage throughout the state.

Administration Details

Naloxone Lot	Expiration Date
<input type="text"/>	<input type="text"/>

Notes

Officer Name/Badge #

Julia Kocis

Officer Signature

Typing your name here will serve as your signature.

Contact Phone Number

Prior submission to ODIN **EXTERNALLY**

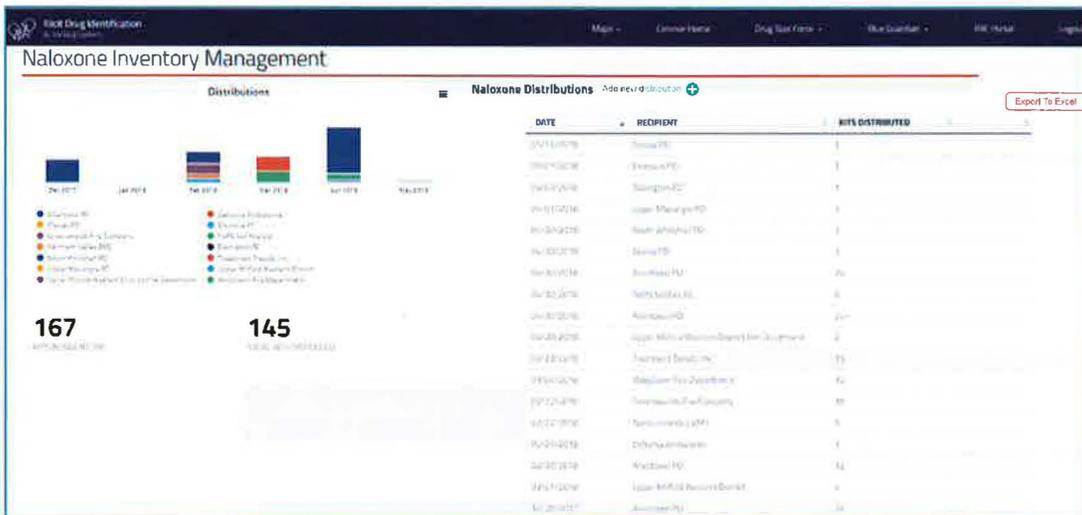
Recent Victim Information

The Recent Victim Information card is only accessible to the Drug & Alcohol Department and serves as a simple electronic case management system. It contains clinical notes on what is being done by the CRS team to engage the individual into treatment. (All names and addresses have been removed in the images below)

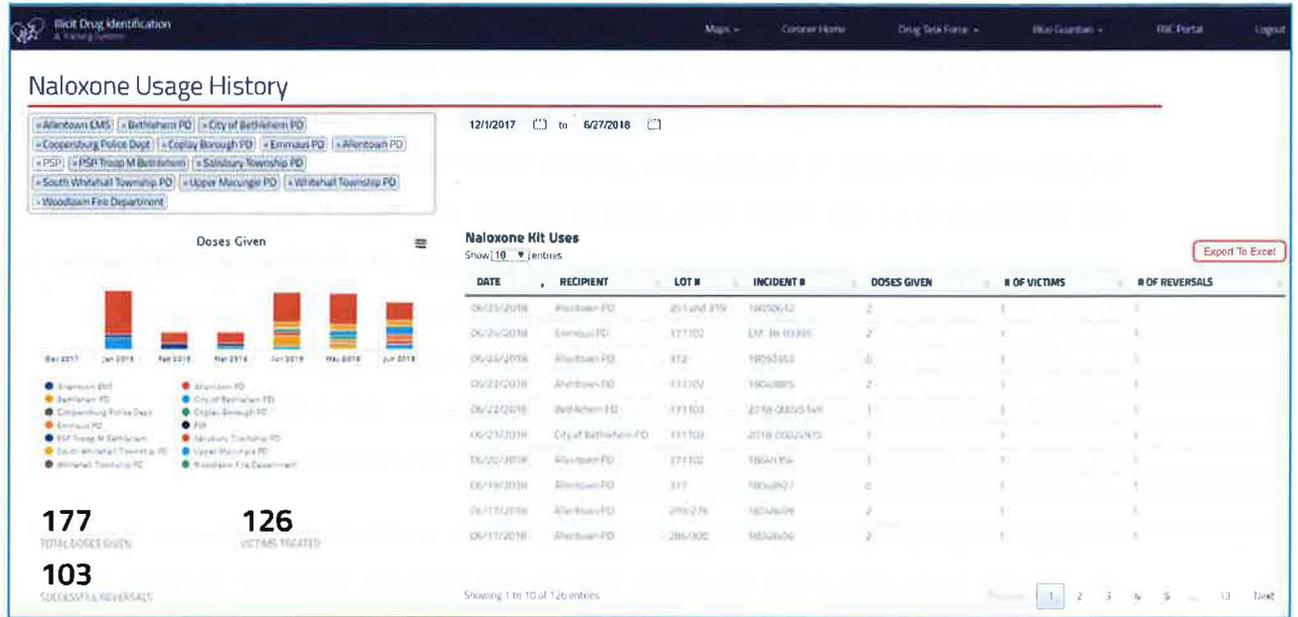


Naloxone Inventory Management

The Naloxone Inventory Management section of the application was designed to assist with grant reporting requirements to the funders (PCCD) who help supply Naloxone to law enforcement and other first responders in the region.



This section also keeps record of agencies that have received naloxone and used naloxone.



Blue Guardian Program

The program is a collaborative effort between law enforcement and treatment providers. Once law enforcement successfully uses naloxone to reverse the effect of an opioid related overdose, within 48-72 hours post incident, a uniformed officer of the appropriate municipality and a CRS make a joint home visit. The appropriate municipality is the governing municipality where the individual resides. If the Allentown Police Department has the naloxone save, but the individual resides in Bethlehem, the Bethlehem Police Department is part of the home visit team.

The purpose of the visit is to engage the family and provide access to resources (family codependency, family intervention and/or family support group) and to engage the individual into treatment. Many times, after the overdose event, the individual agrees to treatment at the hospital which is considered a warm handoff. For those that do not, the home visit is used to attempt to reengage the individual. The secondary impact of the joint home visit is to begin changing the public perception of law enforcement – they are a source of support and an additional link to assist individuals into treatment.

To maximize the impact of the home visits, changes to the SCA treatment/treatment related support system was needed. Primarily, the family codependency and family intervention

groups are available to all families, regardless of income or insurance. There is no cost to attend and bus passes are provided if needed. The second system change involves meaningful access to MAT – at the hospital. Lehigh Valley Health Network (LVHN) will begin buprenorphine induction in the ED and/or physical health floors for OD survivors. The SCA will provide up to a 7 day bridge script at discharge from the hospital. All of these individuals will be admitted into a specific outpatient treatment provider. On Mondays and Wednesday, a LVHN ED/Toxicology Physician will leave the hospital and go to the treatment provider to provide follow up with the individual and continue prescribing. The goal is to transition the prescribing to a LVHN primary care provider for maintenance. This is the beginning of uniting physical and behavioral health to increase client retention and recovery.

Every morning at 0800, the system generates an automatic email indicating naloxone saves and reports that were entered into the system over the last 24 hours. However, in reality, the SCA is able to log on daily and see reports, including the victim information and what hospital they were transported to. By knowing this, in real time, the SCA can maximize the warm handoff process by sending the team directly to the receiving hospital and engaging the individual and supporting the social work staff. Because of this increased system collaboration, we have been successful in having a naloxone save at 0600 and having that individual directly admitted from the ED into an inpatient substance abuse disorder treatment provider without having to physically initiate the warm handoff. This is accomplished with a phone call to the social worker and the warm handoff team doing the bed search.

Blue Guardian includes multiple facets of the opioid issue across multiple sectors – all working in unison to address Addiction, Recovery, Initiation, and Safety from a broader perspective.