

My name is Noni West. I work for The Council of Southeast Pennsylvania (The Council) and more specifically PRO-ACT, Pennsylvania Recovery Organization-Achieving Community Together.

The Council is a 40 year old a private non-profit organization serving the five counties in Southeastern PA Our mission is to provide resources and opportunities to reduce the impact of addiction, trauma, and related health issues for the entire community. This is accomplished through prevention, consultation, education, advocacy, assessment, intervention, and recovery support services. PRO-ACT is the 16 year old grassroots advocacy and recovery support initiative of The Council

PRO-ACT has six centers throughout the region where individuals and families receive peer support services to access and sustain long term recovery. Two centers are in Philadelphia. The Philadelphia Recovery Community Center (PRCC), in NPW, serves as a base for connecting people with peer-based recovery support services and is a hub for mobilizing and establishing healthy recovery. Our 2nd location is a Recovery Training Center (PRTC). The Office of Addiction Services funds our recovery centers

Last year we performed the beginnings of an environmental scan of the community surrounding PRO-ACT's Philadelphia Community Recovery Center at 17th and Lehigh Streets in zip code 19132. We learned:

- The area has suffers from generational toxic stress as a result of poverty and disinvestment since the 1950's when manufacturing moved to the suburbs with access to trucking
- Police District 22 is considered the most violent in Philadelphia
- The demographics and hard data are:
 - 36,300 population
 - 94% African American
 - Median HH Income - \$24,233
 - 41% living in poverty
 - 83% of families dwell single parent Households
 - Compared to Philadelphia there are:
 - 2.6 times arrests for narcotics possession
 - 2.9 times shootings and homicides
 - 20% higher use of the Department of Behavioral Health and Intellectual disaBilty Services (DBHIDS) un-and-underinsured services

When we became aware Open Society Foundation was issuing an RFP for a LEAD planning grant we realized it was an opportunity to facilitate a system change that would not only help stem growing criminal justice budgets and overcrowding of jails but also help the community and individuals. We worked with the Philadelphia Police, the District Attorney's Office and DBHIDS to obtain their approval.

There were and are many advantages to implementing this program in Philadelphia in Districts 22 & 39. 1) There is an acknowledged need for system reform. 2) Philadelphia is one jurisdiction. There is one Commissioner. Once the LEAD pilot proves a success it can be rolled out to other Districts without having to resell the concept to new decision makers. Open Society sees the benefit of piloting LEAD in a jurisdiction that could result in covering 1.5 million people.

And last but not least, the Behavioral Health System of Philadelphia and its Recovery Oriented System of Care orientation (ROSC). The health care /intensive case management system is integral to the success of the LEAD. It essentially replaces the criminal justice system. Under the aegis of Commissioner Evans

and Deputy Commissioner Roland Lamb, Philadelphia has built a system open to multiple pathways of recovery recognizing individuals need to address and develop their recovery in a way that builds upon their strengths and addresses weakness. Our Certified Recovery Specialists help individuals roadmap their recovery with a recovery plan.

LEAD is considered a Harm Reduction model. The principles of Harm Reduction are:

1. **Pragmatism**- drug use is a complex and multifaceted phenomenon encompasses a continuum from abstinence to chronic dependence and produces varying degrees of personal and social harm of behavior
2. **Focus on Harm** - The priority for harm reduction is to decrease the negative consequences of drug use to the user and others, rather than eliminate drug use itself
3. **Human Rights** – Harm reduction respects the basic human dignity and rights of people with Substance Use Disorders
4. **Maximizing intervention options** – Harm reduction recognizes that people with drug use problems benefit from a variety of approaches
5. **Priority of immediate goals** – Harm reduction recognizes readiness to change s key to the process of individuals living healthier lives
6. **Involvement of people who use drugs**- The active participation of people who use drugs is at the heart of harm reduction

The core values of Philadelphia’s Recovery-Oriented System of Care are:

1. Strength-Base Approaches that promise hope
2. Community Inclusion, Partnership and Collaboration
3. Person and Family Directed Approaches
4. Family Inclusion and Leadership
5. Peer Culture, Support & Leadership
6. Person-first Approaches – cultural competency
7. Trauma-Informed Approaches
8. Holistic Approaches toward Care
9. Care for Needs and Safety of Children & Adolescents
10. Partnership and Transparency

Although the words are different the primary mantra for both of these systems is “meet the patient where they are. We do not have to develop a new health care model or system. We just need to “get them to the door.”

We are fortunate to be working on LEAD with Philadelphia, DBHIDS as well as in the state of Pennsylvania. At the state level, combating substance use disorders (SUDs) has been made a key priority. The proposed 2016/2017 budget includes funding for 50 health homes to treat individuals with substance use and co-occurring disorders. The budget also includes funding to expand treatment options and community-based services for those with substance use disorders, mental health conditions, homelessness, or veterans-related issues instead of incarceration by creating new problem-solving courts and expanding intermediate punishment options.

The state is also advancing dialogue around opportunities to using Medicaid dollars for supportive housing services which may create additional opportunities for peer supports and strengthening recovery models. Pennsylvania also fully expanded Medicaid in 2015 which provides funding opportunities to pay for additional recovery and support services.

Some of our grant partners face difficult environments in which to forge the trail for LEAD. North Carolina and Maine are more conservative when it comes to Human Services. We will find out how our six other Open Society team grantees are progressing in a convening in Santa Fe next week. The Philadelphia Police Department and District Attorney's Office are sending representatives to the three day summit where we will examine and discuss all aspects of a LEAD program and have the benefit of the Santa Fe LEAD team to share their lived experience with the program.

The Open Society grant management team has met with our key stakeholders , including Captain Francis Healy, Advisor to the Police Commissioner , District Attorney Derek Riker, Chief of the Diversion Court Unit and Marvin Levine, Deputy Director of the Office of Addiction Services.. Open Society is impressed with Philadelphia's progressive approach to the criminal justice system and our 18 diversion courts.

Our plan for the provision of services for the LEAD program is for the Philadelphia Recovery Community Center to be the first point of contact -the "door" so to speak. Trauma informed case managers would be housed there. PRO-ACT is already staffed with Certified Recovery Specialists and is currently staffing for mobile Certified Recovery Specialists. Every individual will go through an assessment and then be diverted to resources and the appropriate level of care.

Prosecutors and police officers will work closely with the care managers to ensure contact with LEAD participation is moving forward. The team works on a regular basis.

We have developed a group of what we are calling extended stakeholders for their input and also to assist with community education. In particular Seattle discovered the business community had difficulty with the program. Our extended stakeholders include:

- Mental health advocacy
- Healthcare advocacy including their supportive housing partners
- Harm reduction expertise
- 22nd & 39th Districts Outreach
- Multi-faith advocacy
- Judicial system expertise
- Local legislators
- Business Community

As mentioned, we are currently working in concert with MacArthur foundation grant team to coordinate the LEAD pre-booking diversion model with the components of the MacArthur plan.

We thank you for the opportunity to testify today and look forward to working toward the implementation of a LEAD pilot program where the system, individuals and the community can all rise.

Thank you to everyone who has laid the ground work for a system that will work with LEAD and thank you for the opportunity to testify today.