



**State of Florida
Department of Children and Families**

Ron DeSantis
Governor

Chad Poppell
Secretary

UPDATED

March 17, 2020, 9:00 a.m.

To Licensed Methadone Providers,

In an abundance of caution related to the increased numbers of individuals contracting COVID-19 (the coronavirus) in Florida and around the nation, the Office of Substance Abuse and Mental Health suggests OTPs consider the following mitigation strategies described below. Revised or new text is indicated in green.

OTP Extranet/Take-Home Requests (Per SAMHSA's Guidance)

Blanket Exception Requests

State SOTAs are to submit blanket exception requests on behalf of OTPs to SAMHSA (please see second attachment).

Action: If you would like your clinic covered under the blanket request, notify me via email and provide your clinic name and OTP number. I will distribute the list to SAMHSA. The blanket request allows the following:

Stable Individuals

- Blanket exceptions for **all stable individuals** to receive 28 days of Take-home medication. The medical director and treating medical staff are to determine the definition of "stable." Individuals may not meet the 8-point criteria but may still be considered "stable" by staff. Clinical records for each individual must state the amount and the reason for take-homes as determined medical staff.

Less-stable Individuals

- OTPs may request up to 14 days of take-home doses for individuals who are **less stable** but who the OTP believes can safely handle this level of take-home medication. Clinical records for each individual must state the amount and the reason for take-homes as determined medical staff.

It is recommended to stagger pick-up of medication to keep clinic traffic manageable and to prevent depletion of stock.

If you would like a different take-home plan for your clinic, please contact me to discuss.

Unstable Individuals

- Those who have an inability to safely take medication unsupervised (i.e. psychiatric or cognitive condition) or an inability to keep medication safely secured should continue to dose daily at the clinic. Every precaution should be made to limit exposure to others through dosing in an isolated, secured area on the OTP grounds or home delivery, if available.

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Mission: Work in Partnership with Local Communities to Protect the Vulnerable, Promote Strong and Economically Self-Sufficient Families, and Advance Personal and Family Recovery and Resiliency

Individuals with a Dosage Change

- Special considerations should be made for individuals in the induction phase or any phase in which they are changing dose. Exceptions should only be made for individuals with a COVID-19 diagnosis or are displaying symptoms of a viral respiratory infection.
- Individuals should be maintained on the dose of methadone ordered on the day that take-home doses are prepared. Escalating doses of methadone are not to be given to individuals as they require medical oversight. The dose should be held steady and an evaluation for an increased dose should happen at next medical assessment.
 - Care coordination must be in place between OTP medical director and treating physician.
- All take-home medication must be stored in a lockable secured box. Individuals must be educated on the importance of keeping medication secured, especially from children and animals.

Telehealth

OTPs may use a HIPAA compliant platform to complete dose evaluations for known individuals/clients. This is not an option for new patients beginning treatment using methadone.

Induction/New Clients

SAMHSA encourages OTPs receiving new individuals into treatment to discuss the potential appropriateness of buprenorphine. Some benefits include:

- Initial medical assessment can be conducted via telehealth.
- Can be prescribed and picked-up at a pharmacy.
- Easier transition person from buprenorphine to methadone in the future, if necessary.

At this time SAMHSA is not endorsing upward titration of methadone from home without medical supervision.

Designated Third Party

- Encourage individuals to identify a trustworthy person to deliver medications to them using the OTP's established chain of custody protocol for take-home medications. OTPs should obtain documentation now for each designated individual.

OTP Staff

- Review infection control policies and procedures with all employees.
- Review disaster preparedness policies and procedures with all employees.
- In anticipation of possible staff shortages, OTPs should make arrangements with temporary agencies so additional staff can be employed as necessary.

Treatment Services

- Ensure individuals sign and authorize appropriate consent forms for care coordination.
- Communicate any change to dosing and treatment procedures to persons served in advance.
- Consider creating a room or space for individuals who self-identify as ill to separate them from other individuals.
- Post signs encouraging individuals to self-identify if they are ill so they can be dosed in a designated area.
- OTP staff should use interim infection prevention and control recommendations in health care settings published by the Centers for Disease Control and Prevention (<https://www.cdc.gov/coronavirus/2019-nCoV/hcp/index.html>).
- Assess clinical capacity to deliver medications to individuals under quarantine.

- OTPs may consider implementing social distancing strategies (e.g. postponing support group meetings, substituting Internet and phone counseling for in-person sessions) as deemed appropriate for your area.
- Notify the SOTA office of any service/schedule changes.
- If a clinic closure is necessary, it must be approved by the SOTA and SAMHSA.
- OTPs are **strongly encouraged** to maintain at least a 4-week supply of medication (methadone, suboxone, etc.).

Facility/Staff Preparation

- OTP staff should use *interim infection prevention and control recommendations in health care settings* published by the Centers for Disease Control and Prevention.
- OTPs should remain open during regular business hours to field calls from patients. After-hours and emergency contact should be made available and communicated to individuals in treatment.
- Ensure the facility has an adequate supply of cleaning products, masks, and gloves, as applicable.
- Provide disinfecting wipes to clean frequently touched surfaces multiple times a day (telephones, door knobs, etc.).
- Display posters illustrating preventative measures such as proper handwashing instruction. It would be useful to post in languages spoken by populations served.
- Place EPA-approved hand sanitizer at the front desk.

Patient-Education

- Encourage frequent and thorough handwashing at home.
- Call clinic if individual or member of household is experiencing fevers and dry cough to find out dosing protocols.
- Follow the guidance of local health department and city/county officials. (Subscribe for updates if available)
- If symptomatic individuals are seeking testing and do not have insurance, please direct them to contact the county health department of residence.

Central Registry (Lighthouse)

- Ensure emergency contact information, emergency consent, photograph and dosing information is accurate for all individuals in treatment.
- Utilize the broadcast message function to provide detailed messages regarding clinic closures, and reduced hours of operation.
- Participate in the mock clinic closure drill this month to test out policy and procedures and ensure staff are prepared to act.

Resources

- **Disaster Planning Handbook for Behavioral Health Treatment Programs**
<https://store.samhsa.gov/system/files/sma13-4779.pdf>
- **Substance Abuse and Mental Health Services Administration, COVID-19 Guidance for Opioid Treatment Programs** <https://www.samhsa.gov/medication-assisted-treatment/statutes-regulations-guidelines/covid-19-guidance-otp>
- **Centers for Disease Control and Prevention – COVID-19**
<https://www.cdc.gov/coronavirus/2019-ncov/index.html>

Each county and OTP have their own unique resources and obstacles. We urge you to assess your own organizational capacity and strengthen relationships and communication with local partners. Key partnerships include:

- Local hospitals and health care centers
- County Emergency Operations Center
- County Health Department, Regional Managing Entity
- Regional Licensure Office
- Law Enforcement
- Media Outlets
- Pharmacies
- Public Transportation
- Naloxone Distributors.

Lastly, Governor DeSantis issued an Executive Order which allows state agencies to suspend rules and statutes if strict compliance would in any way prevent, hinder, or delay necessary action in coping with COVID-19. We are currently reviewing Chapter 397, F.S. and Chapter 65D-30, F.A.C. and will promptly communicate the temporary suspension of any rule language.

If there are any questions concerning the suggestions above, please contact me at (850) 717-4427 or Corine.Stancil@myflfamilies.com or Christopher Weller at (850) 717-4286, Chris.Weller@myflfamilies.com. We will update and distribute as needed.

Thank you.

Sincerely,

A handwritten signature in cursive script that reads "Corine Stancil". The signature is written in black ink and is positioned above the printed name and title.

Corine Stancil
State Opioid Treatment Authority