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American College of Healthcare Executives
of Middle Tennessee

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Event Writeup –The Impact of the Opioid Epidemic on the Health Care System

ACHEMT was proud to sponsor an educational luncheon on March 22nd involving a topic that affects every healthcare leader today: **the opioid crisis**. Tennessee ranks #2 in the nation for opioid abuse. We had a record number of 131 registered attendees that heard from a variety of voices active in solving this epidemic.

Our opening speaker was Commissioner Marie Williams, LCSW, from the Tennessee Department of Mental Health and Substance Abuse Services and Chairman of the Governor's Opioid Workgroup. Ms. Williams shared fascinating statistics from the Substance Abuse Treatment Group, illustrating the populations that seek out treatment for illnesses. 77% of those with hypertension, 73% of those with diabetes, and 11% of those with an opioid addiction will seek out treatment. Commissioner Williams also drew attention to a National Institute of Health study that documented patients with asthma and hypertension relapse more often than those addicted to opioids. William's task force is working hard to change the popular attitude that addiction is a moral failure rather than a disease.

Our panel moderator was Cheryl McClatchey, VP of Behavioral Health Programs of Blue Cross Blue Shield of Tennessee. McClatchey orchestrated a compelling discussion with our panelists.

Dr. Elizabeth Ann Stringer, neuroscientist, Chief Science Officer and Co-Founder of Axial Healthcare discussed JACHO assessments on pain and the catalyst for the epidemic. She also spoke about risk stratifying and "catastrophizing", or the ability to cope rating. Dr. Stringer emphasized the government needing to bring multiple stakeholders together and the unintended consequences to policy instituted into law. From a neuroscientist standpoint, she also emphasized the importance of setting expectations according to a patients' ability to cope rating and recognizing that everyone's pain progression is different.

Dr. Jeff Guy, VP of Critical Care and Emergency Department services for HCA, brought a unique voice to the discussion. His experience as a burn and trauma surgeon is reflected in his concern regarding stigmatizing legitimate opioid prescription and use. He also shared that pain is the #1 chief complaint in emergency rooms across the nation. Over 10 million patients per year are seeking treatment for pain through the ED. His framework of viewing the epidemic through treatment of underlying conditions, such as depression, bipolar, etc, looks to clinical effectiveness and tools of prediction, such as a history of trauma.

Dr. Bill Paul, Director of Metro Nashville Health Department, also spoke to a patient's trauma history, such as Adverse Childhood Events, and a community's response to this. Financially, he pointed out the significant downstream costs of opioid addiction, such as HIV and Hepatitis C. Excellent points were made concerning not marginalizing victims of the epidemic, decreasing the stigma, and teaching coping mechanisms in schools. He also spoke to expanding Medicaid to cover services and incorporating law enforcement, EMS and other stakeholders involved in keeping Naloxone readily available in emergency situations. Dr. Paul emphasized being "trauma informed" and teaching resiliency while decreasing silos and decreasing the separation of behavioral health from all other areas of medicine.

Justin Lanning brought his experience as CEO of 180 Health

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Be sure to check out our website www.achemt.org!



Joanna Conley Honored

Joanna Conley, FACHE, CEO at TriStar Southern Hills Medical Center has been selected as part of the Women to Watch Class of 2018. Women selected are recognized for their impact on the healthcare community. Conley, along with 10 of the top female healthcare leaders in Middle Tennessee, was honored at a breakfast on June 12th. Details regarding all the recipients may be found on the [Nashville Medical News Website](#).

Continued from page 1. . . Partners and shared ideas on a “cortisol reduction programs” and coaching people to utilize healthier coping mechanisms.

Mr. Lanning’s emphasis is on decreasing the number of opioid addicted babies. He also spoke to Adverse Childhood Events and a call to action involving 3 components. First, provide appropriate expectations, this would include not emphasizing a 0 out of 10 pain result but perhaps a 1 or 2 out of 10 and the ability to adequately perform activities of daily living. Second, helping those in need manage their stress. Third, provide mentoring programs.

All of our expert panelists agree that decreasing the stigma that separates opioid addiction from other medical illnesses is essential to solving this crisis. Setting appropriate expectations and reducing the opioid epidemic will take all stakeholders involved.