

**TCG**

THOMAS  
CONSULTING  
GROUP

# Office of Community Health and Safety

*Transition Briefing*



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## Executive Summary

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The Office of Community Health and Safety (OCHS), housed in the Mayor's Office, was established in 2020 and began operating in earnest in 2021. OCHS operates under the co-direction of the Department of Public Safety and Office of the Mayor. OCHS was established to address longstanding health, safety, and justice issues in the City of Pittsburgh. The office is tasked with redirecting city resources to better address community needs by housing social services, public health, and social work experts who can assist community members and first responders in situations that require longer-term support, harm reduction approaches, and other services. However, the actual execution and effectiveness of the work that OCHS is tasked with has been challenged by a lack of coordination with the county, which historically has had jurisdiction for providing the social services to which OCHS has been tasked with directing resources. The lack of coordination that exists between OCHS and the county is a product largely of the division of city and county government. Given this, and the \$5 million budget increase in this office for next year, the incoming administration may wish to reconsider whether this belongs in the already funded county health department.

Public safety agencies, like the OCHS, serve as a safety net for individuals with complex health and social needs. Police officers, paramedics, EMTs, and firefighters spend a significant portion of time responding to non-emergency calls involving mental and behavioral health conditions, homelessness, and substance use. While first responders have adapted to these circumstances, OCHS recognizes that the complex needs of individuals can only be met when the right responder is sent to assist them.

To change this paradigm, the OCHS is developing programs that properly address individuals' health and safety needs, guided by evidence-based practices and community input. This includes hiring social workers, outreach workers, and other professionals to connect residents with services that will provide long-term support and address the root causes of the challenges that they face.

The OCHS provides services in the following areas:

- **Consistent Community Engagement and Partnership:** Continued community engagement, transparency, and accountability to the community and first responders is critical to building trust and facilitating change in the current response continuum.



The OCHS is creating a collaborative model of program development and evaluation, prioritizing continuous review to ensure that deficits are quickly addressed and used for growth. The OCHS is partnering with existing community organizations and prioritizing community members who have been harmed and who may not have been engaged in traditional meetings. Initial efforts are focusing on creating multiple advisory collaboratives centered on Black neighborhoods that were most harmed by the war on drugs and systemic racism. To that end, the Office has developed a Neighborhood Health & Safety Academy, a Youth Leadership Board, and a Community Advisory Board(s)/Strategic Planning Leaders (subcommittee of the STV Oversight Committee).

- **Continuum of Support:** Through continued collaboration with first responders and community members, analysis of calls for service, mapping of existing services, development of new partnerships, and evaluation of existing models, the OCHS is establishing a continuum of resources and a task-diverse group of responders to address community unmet social-service needs, often encountered by our Public Safety partners. First responder social-support referrals, case conferencing and review, and service gap analysis are all being utilized to build this continuum. To that end, the Office has developed the Allegheny Health Network (AHN) Program partnership, a Diversion program, to try to solve the issues of specific individuals who place service calls regularly, Crisis Response & Intervention Teams, as well as Post Engagement Response/Victim Assistance.
- **Implementation of Public Health-Informed Practices:** Public Safety personnel consistently respond to community needs that exceed what they can provide in a single engagement model; however, first responders have significant exposure to issues that affect community members' health and well-being. OCHS is working with the Department of Public Safety, public health entities, and academic partners to evaluate new programs and responses to proactively address issues (especially upstream interventions) and reduce harm experienced by community members. To that end the Office is developing a Community Paramedicine program, an OD Prevention/Prehospital Buprenorphine initiative (in which Pittsburgh is only one of a



handful of cities administering the drug to community members on opioids), and an expansion of a SwimSafe initiative for children in local communities in need.

- OCHS, along with its partners, evaluates best practices, facilitates focus groups, and elevates translational experiences.

OCHS's strengths are in its partnerships and willingness to collaborate with other agencies, including county and public safety partners. Partnership also presents the greatest opportunity for growth and improvement for this office. The new administration will need to be laser focused on building existing and new partnerships that will allow the City to provide more support programs and initiatives that connect residents with services that will provide long-term support and address health and safety challenges, while also ensuring that OCHS is not duplicating the efforts of Allegheny County. Pittsburgh has more than its fair share of health and safety issues, which also means that both the City and county have more than enough work to sustain both agencies. The key will be ensuring that efforts are complimentary and not competing.



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## Findings

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This section summarizes our team's findings in the Office of Community Health and Safety. These findings have been validated and, in some instances, include recommendations or decision points for the incoming Administration.

## Need to Collaborate with Other Agencies Doing Complimentary Work

In our interviews of internal and external stakeholders, it is evident that the services provided by OCHS are in high demand. Despite continued efforts from Public Safety professionals and other direct-service providers, data from the CDC suggests that opioid overdose fatalities have accelerated during COVID-19, following a trend of increasing opioid overdoses that began prior to the pandemic. In response to the worsening crisis, the OCHS is committed to utilizing insights gained from improved data analysis to inform progressive opioid overdose prevention strategies that seek to reduce harm associated with drug use, employ a person-first approach, and address social determinants of health. Within the Office of Community Health and Safety, this work is led by the Overdose Prevention Program Coordinator in partnership with Pittsburgh EMS and the Allegheny County Health Department's CDC-funded Overdose Data to Action program, which aims to strengthen local capacity to address overdoses across the county. The City of Pittsburgh is among stakeholders partnering with ACHD through this county-wide program to monitor emerging trends to inform prevention activities that reduce harms associated with substance use. OCHS will need to continue and expand its network of collaborative partners to be most effective and continue progress fighting the City's opioid crisis.

## Social Worker Ride-Alongs

OCHS has launched a program to support social workers conducting ride-alongs with the Bureau of Police. Social workers have long worked alongside law enforcement, often treating clients in prisons and jails, inpatient psychiatric facilities, and immigration detention centers. A 2020 report on reimagining policing by the National Association of Social Workers suggests collaboration could strengthen public safety, reduce racially-driven incidents, and improve the relationship between law enforcement and communities of color. The Pittsburgh program is just launching, but it shows great promise for the future of public safety. One important milestone for this program will be to work with the Department of Law to sort out



liability regarding allowing social workers in police cars with the express purpose of providing treatment to citizens.

## Need to Clearly Define Role of Office

Like several other city departments, the Office of Community Health and Safety needs a refresh on its office/departamental measurable goals and objectives to maximize efficiency and equitable outcomes. There appears to be some conflicting direction in duties with a lack of clarity in responsibilities assigned to OCHS and other offices/departments, resulting in confusion over departmental authority. This perception could result in organizational conflict if not properly managed. OCHS, along with other offices/departments with intersecting work, should be brought together to clearly define roles, expectations, and opportunities for partnership and collaboration.



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## About the Agency

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## Contact

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## Enabling Legislation

Title I, Art. III, Chapter 113

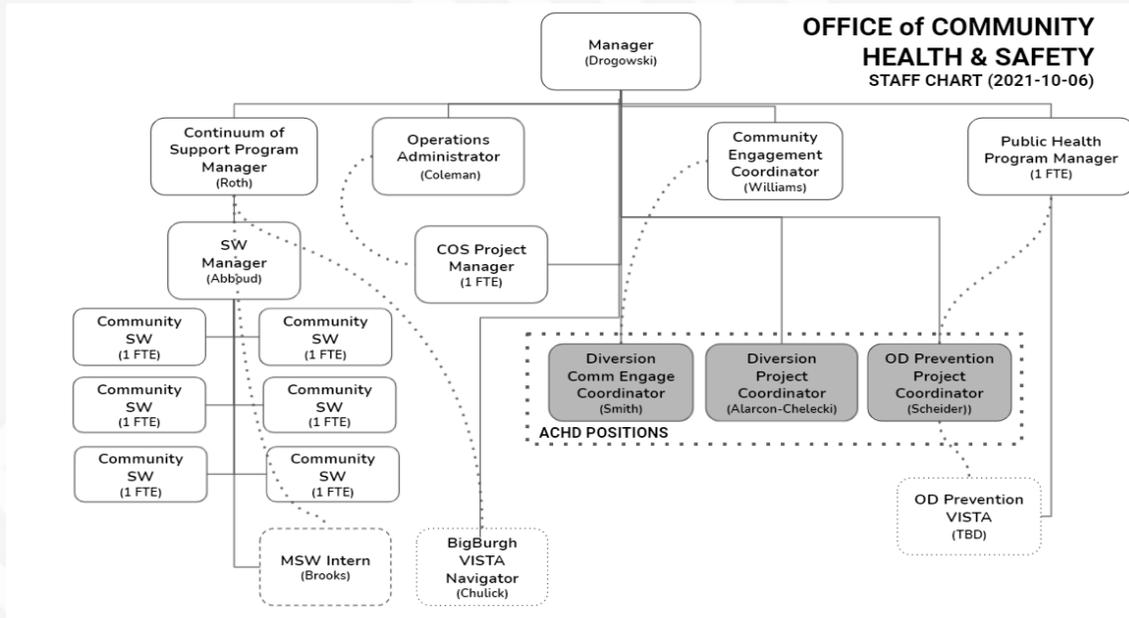
## Mission and Vision

The mission of the OCHS is to improve community safety and well-being, and support public safety personnel by building a public health-informed response continuum.

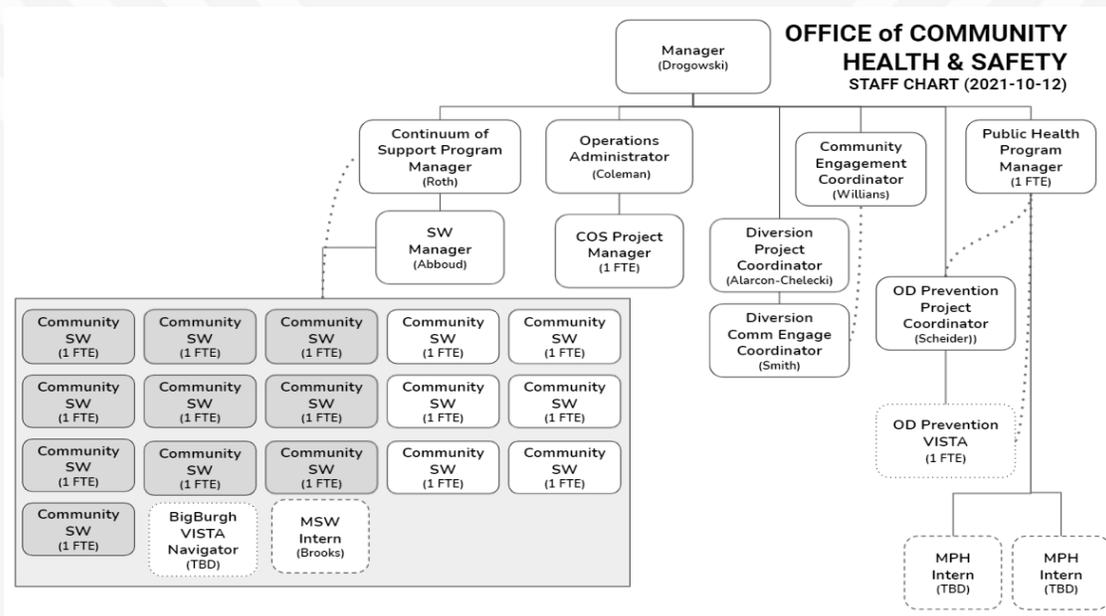


## Organizational Chart

### Current Organizational Chart



### Proposed Organizational Chart





### Description of Services

The OCHS operates under the co-direction of Public Safety and the Office of the Mayor. The goals and directives of the office are to:

- Develop community health and safety priorities and programs based on community input and areas of need most frequently encountered by community members and Public Safety personnel.
- Establish a group of community health and safety advisors, made up of public health leaders, to advise, educate, and inform on best practices for sustainable social and health support in city programs, policies, and legislation.
- Conduct regular trainings with all public safety personnel designed in collaboration among staff, experts, and communities to ensure first responders are prepared to appropriately engage with complex situations that may require additional harm reduction support.
- Collaborate with higher education programs throughout the City to provide training opportunities for social work students to help respond to community needs.



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## **Agency Goals & Performance Metrics**



Develop community health and safety priorities and programs based on community input and areas of need most frequently encountered by community members and Public Safety personnel.

*Strategies to Achieve Goal:*

- Create diverse pathways for community needs assessment to be conducted, including, but not limited to place-based focus groups and meetings, email surveys, social media surveys, etc.
- Facilitate small focus group sessions for public safety personnel to explore issues they face on the job, as well as troubleshoot potential solutions to identified issues.

*How Success Will Be Measured:*

- Level of community and stakeholder support received when the Office launches new or ongoing programs and initiatives. When stakeholders are actively engaged, they will co-own the work with the Office.

Establish a group of community health and safety advisors, made up of public health leaders, to advise, educate, and inform on best practices for sustainable social and health support in city programs, policies, and legislation.

*Strategies to Achieve Goal:*

- Convene diverse, small stakeholder groups consistently and periodically to discuss best practices, barriers, challenges, and solutions.
- Keep stakeholders apprised of plans and outcomes resulting from group feedback and discussion

*How Success Will Be Measured:*

- Development of a stakeholder engagement approach or strategy for the Office.



Conduct regular trainings with all public safety personnel designed in collaboration among staff, experts, and communities to ensure first responders are prepared to appropriately engage with complex situations that may require additional harm reduction support.

*Strategies to Achieve Goal:*

- In collaboration with public safety agencies, convene a cross-section of groups to participate in training. The cross section of public safety agencies will aid in building relationships across agencies.
- Develop an ambassador program whereby former participating public safety personnel recruit others in their network to pursue the training.

*How Success Will Be Measured:*

- Increased participation in harm reduction trainings.

Collaborate with higher education programs throughout the City to provide training opportunities for social work students to help respond to community needs.

*Strategies to Achieve Goal:*

- In collaboration with local colleges, convene a cross-section of groups to participate in training. Recruitment for these participants can be achieved through engaging clubs and organizations on college campuses.
- Develop an ambassador program whereby students can recruit others in their network to pursue the training.

*How Success Will Be Measured:*

- Increased participation of students conducting place-based trainings on responding to community needs.



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## Budget



## Staffing & Salaries

City of Pittsburgh Operating Budget  
Fiscal Year 2022

Office of Community Health and Safety  
102300

### Subclass Detail

|  | 2020<br>Actual | 2021<br>Budget   | 2022<br>Budget      | Increase/<br>(Decrease) | %<br>Change      |
|--|----------------|------------------|---------------------|-------------------------|------------------|
| <b>Expenditures</b>                                  |                |                  |                     |                         |                  |
| <b>53 - PROFESSIONAL &amp; TECHNICAL SERVICES \$</b> | — \$           | 15,000 \$        | 5,036,000 \$        | 5,021,000               | 33,473.3%        |
| 53301 - Workforce Training                           | —              | —                | 6,000               | 6,000                   |                  |
| 53901 - Professional Services                        | —              | 15,000           | 30,000              | 15,000                  |                  |
| 53905 - Prevention                                   | —              | —                | 5,000,000           | 5,000,000               |                  |
| <b>56 - SUPPLIES</b>                                 | —              | 5,000            | 22,000              | 17,000                  | 340.0%           |
| 56101 - Office Supplies                              | —              | —                | 1,000               | 1,000                   |                  |
| 56151 - Operational Supplies                         | —              | 5,000            | 21,000              | 16,000                  |                  |
| <b>57 - PROPERTY</b>                                 | —              | —                | 9,000               | 9,000                   | n/a              |
| 57501 - Machinery & Equipment                        | —              | —                | 9,000               | 9,000                   |                  |
| <b>Expenditures Total \$</b>                         | <b>— \$</b>    | <b>20,000 \$</b> | <b>5,067,000 \$</b> | <b>5,047,000</b>        | <b>25,235.0%</b> |



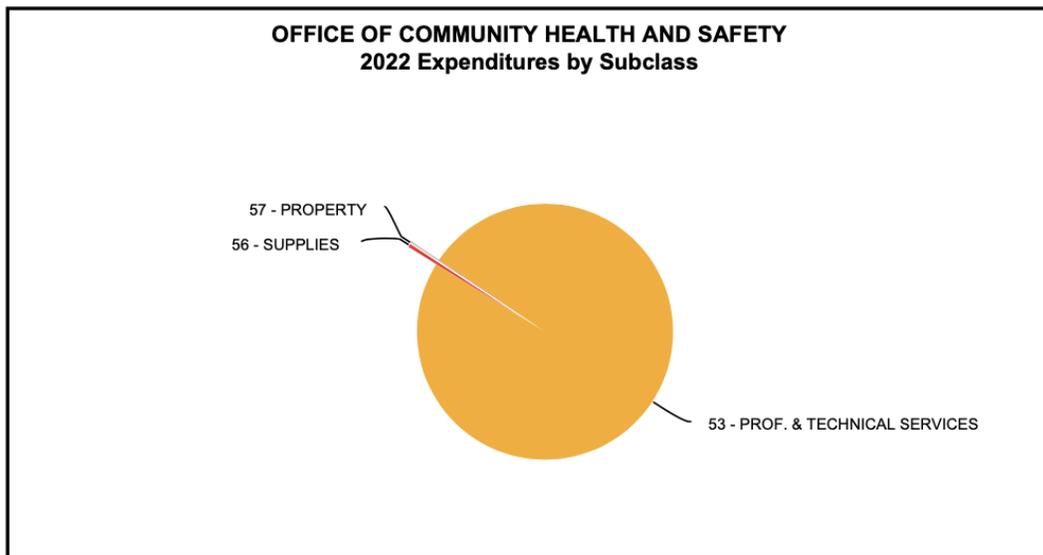
## 5-Year Forecast

City of Pittsburgh Operating Budget  
Fiscal Year 2022

Office of Community Health and Safety  
102300

### Five Year Forecast

|                                 | 2022                | 2023                | 2024             | 2025             | 2026             |
|---------------------------------|---------------------|---------------------|------------------|------------------|------------------|
| <b>Expenditures</b>             |                     |                     |                  |                  |                  |
| 53 - PROF. & TECHNICAL SERVICES | \$ 5,036,000        | \$ 5,036,000        | \$ 36,000        | \$ 36,000        | \$ 36,000        |
| 56 - SUPPLIES                   | 22,000              | 22,000              | 22,000           | 22,000           | 22,000           |
| <b>Total</b>                    | <b>\$ 5,067,000</b> | <b>\$ 5,058,000</b> | <b>\$ 58,000</b> | <b>\$ 58,000</b> | <b>\$ 58,000</b> |
| % Change from Prior Year        | 25,235.0%           | (0.2)%              | (98.9)%          | —%               | —%               |





## 2020 Year Budget

| STOP THE VIOLENCE EXPENDITURES            |           |          |                   |                     |          |                   |                   |                     |                   |
|---|-----------|----------|-------------------|---------------------|----------|-------------------|-------------------|---------------------|-------------------|
| OCH&S POSITIONS                           | #         | GRADE    | SALARY            | + BENEFITS          | MONTHS   | ACTUAL            | + BENEFITS        | DELTA               | STAFF MEMBER      |
| Manager, Community Health and Safety      | 1         | 34E      | \$ 98,369         | \$ 132,798          | 12       | \$ 98,369         | \$ 132,798        | \$ -                | DROGOWSKI, LAURA  |
| Operations Administrator                  | 1         | 27E      | \$ 74,194         | \$ 100,162          | 7        | \$ 43,280         | \$ 58,428         | \$ (41,734)         | COLEMAN, BRENNAN  |
| Public Health Program Manager             | 1         | 27E      | \$ 74,194         | \$ 100,162          | 1        | \$ 6,183          | \$ 8,347          | \$ (91,815)         | vacant            |
| Continuum of Support Program Manager (PT) | 1         | 27E      | \$ 53,505         | \$ 53,505           | 7        | \$ 31,211         | \$ 31,211         | \$ (22,294)         | ROTH, SHEILA      |
| Continuum of Support Project Manager      | 1         | 25E      | \$ 66,458         | \$ 89,718           | 2        | \$ 11,076         | \$ 14,953         | \$ (74,765)         | vacant            |
| Community Engagement Coordinator          | 1         | 24E      | \$ 65,804         | \$ 88,835           | 3        | \$ 16,451         | \$ 22,209         | \$ (66,627)         | WILLIAMS, ERIC    |
| Community Social Work Manager             | 1         | 24E      | \$ 65,804         | \$ 88,835           | 3        | \$ 16,451         | \$ 22,209         | \$ (66,627)         | ABBOUD, ALEXANDRA |
| Community Social Worker                   | 1         | 22E      | \$ 60,563         | \$ 81,760           | 2        | \$ 7,570          | \$ 10,220         | \$ (71,540)         | vacant            |
| Community Social Worker                   | 1         | 22E      | \$ 60,563         | \$ 81,760           | 1.5      | \$ 7,570          | \$ 10,220         | \$ (71,540)         | vacant            |
| Community Social Worker                   | 1         | 22E      | \$ 60,563         | \$ 81,760           | 1.5      | \$ 7,570          | \$ 10,220         | \$ (71,540)         | vacant            |
| Community Social Worker                   | 1         | 22E      | \$ 60,563         | \$ 81,760           | 1.5      | \$ 7,570          | \$ 10,220         | \$ (71,540)         | vacant            |
| Community Social Worker                   | 1         | 22E      | \$ 60,563         | \$ 81,760           | 1.5      | \$ 7,570          | \$ 10,220         | \$ (71,540)         | vacant            |
| Community Social Worker                   | 1         | 22E      | \$ 60,563         | \$ 81,760           | 1.5      | \$ 7,570          | \$ 10,220         | \$ (71,540)         | vacant            |
| <b>TOTAL</b>                              | <b>13</b> | <b>-</b> | <b>\$ 861,706</b> | <b>\$ 1,144,576</b> | <b>-</b> | <b>\$ 268,444</b> | <b>\$ 351,475</b> | <b>\$ (793,102)</b> |                   |

| STV OCH&S OPERATING COSTS      | BUDGETED         | ACTUAL           | DELTA              |
|--------------------------------|------------------|------------------|--------------------|
| BigBurgh Professional Services | \$ 15,000        | \$ 15,000        | -                  |
| Operations                     | \$ 5,000         | \$ 5,000         | -                  |
| MSW Interns                    | \$ 20,400        | \$ 5,000         | \$ (15,400)        |
| MPH Interns                    | \$ 20,400        | \$ -             | \$ (20,400)        |
| <b>TOTAL</b>                   | <b>\$ 60,800</b> | <b>\$ 25,000</b> | <b>\$ (35,800)</b> |

|   | BUDGETED           | ACTUAL            | DELTA               |
|---|--------------------|-------------------|---------------------|
| TOTAL OCH&S ANTICIPATED STAFF BUDGET      | \$1,144,576        | \$ 351,475        | \$ (793,102)        |
| TOTAL OCH&S ANTICIPATED SUPPLY/OPS BUDGET | \$ 60,800          | \$ 25,000         | \$ (35,800)         |
| <b>TOTAL BUDGET</b>                       | <b>\$1,205,376</b> | <b>\$ 376,475</b> | <b>\$ (828,902)</b> |

## 2021 Year Budget

| STOP THE VIOLENCE EXPENDITURES       |           |          |          |           |                   |                    |  |
|--------------------------------------|-----------|----------|----------|-----------|-------------------|--------------------|--|
| OCH&S POSITIONS                      | #         | GRADE    | % EFFORT | SALARY    | COST              | + BENEFITS         |  |
| Manager, Community Health and Safety | 1         | 34E      | 100%     | \$101,320 | \$ 101,320        | \$ 136,782         |  |
| Operations Administrator             | 1         | 27E      | 100%     | \$ 76,420 | \$ 76,420         | \$ 103,167         |  |
| Public Health Program Manager        | 1         | 27E      | 100%     | \$ 76,420 | \$ 76,420         | \$ 103,167         |  |
| Continuum of Support Project Manager | 1         | 25E      | 100%     | \$ 70,512 | \$ 70,512         | \$ 95,191          |  |
| Community Engagement Coordinator     | 1         | 24E      | 100%     | \$ 67,778 | \$ 67,778         | \$ 91,500          |  |
| Community Social Work Manager        | 1         | 24E      | 100%     | \$ 67,778 | \$ 67,778         | \$ 91,500          |  |
| Community Social Worker              | 6         | 22E      | 100%     | \$ 62,380 | \$ 374,280        | \$ 505,278         |  |
| Continuum of Support Program Manager | 1         | 27E      | 50%      | \$ 76,420 | \$ 38,210         | \$ 38,210          |  |
| MSW Interns                          | TBD       | TBD      | TBD      | \$ 20,400 | \$ 20,400         | \$ 20,400          |  |
| MPH Interns                          | TBD       | TBD      | TBD      | \$ 20,400 | \$ 20,400         | \$ 20,400          |  |
| <b>TOTAL STAFF</b>                   | <b>12</b> | <b>-</b> | <b>-</b> | <b>-</b>  | <b>\$ 913,518</b> | <b>\$1,205,596</b> |  |

| OCH&S NON-PERSONNEL            | COST             |
|--------------------------------|------------------|
| BigBurgh Professional Services | \$ 15,000        |
| Office Operations              | \$ 5,000         |
| <b>TOTAL NON-PERSONNEL</b>     | <b>\$ 20,000</b> |

|                     |                     |
|---------------------|---------------------|
| <b>TOTAL BUDGET</b> | <b>\$ 1,225,596</b> |
|---------------------|---------------------|



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## Programs & Projects

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### 2021 Accomplishments

- Collaborated with the Bureau of EMS to develop the third prehospital buprenorphine pilot program in the United States, empowering paramedics who respond to a person in acute withdrawal or who has experienced an opioid-related overdose to treat the patient using buprenorphine;
- Worked with the Mayor's Office to pass an executive order decriminalizing the possession, distribution, and use of fentanyl test strips for harm reduction purposes, plus outreach strategies and ongoing development of public safety policies and supply distribution;
- With support from Allegheny County Health Department, trained more than 300 city staff members, city authority staff, and CLA participants to recognize and respond to overdoses; equipped Pittsburgh Police with Narcan holsters;
- Collaborated with the Bureau of Fire to pilot a specialized team response to people who have frequent calls to 911 for non-emergency situations. As of October 1, 2021, the program has been successful with more than 37 patients, who have made 432 calls to 911; and
- The victim assistance program has worked with over 800 people who have survived offenses to connect them with resources to ensure compensation and trauma-informed supportive services.

### OCHS Programs Overview:

#### Opioid Overdose Dashboard

**<https://pittsburghpa.gov/publicsafety/overdose-dashboard>**

In order to develop policies and programs that more effectively address opioid use risk in the City of Pittsburgh, improved data analysis with greater transparency is needed to enhance Public Safety response and empower community efforts to address the growing overdose crisis. Using de-identified (HIPAA-compliant) data from the Pittsburgh Bureau of EMS, information regarding opioid overdose calls for service in the City of Pittsburgh are published to this publicly-available dashboard on a monthly basis. The dashboard includes the number of individuals who experienced an opioid overdose each month, neighborhood-level mapping, demographic information, and other statistics regarding care provided on-scene by



Public Safety professionals. All data is from the electronic patient care report software (*ePCR*), *emsCHARTS*, which is used by EMS to document patient care.

### Prehospital Buprenorphine Program

With so many factors contributing to a resurgence in opioid overdoses and opioid overdose deaths, it is imperative that every opportunity be taken to strengthen supports for people who use drugs and create alternative pathways to recovery. Throughout the pandemic and over the past several years, Pittsburgh Public Safety professionals have served as the safety net for people in crisis. Unequipped to handle the needs of people struggling with complex social, physical, and mental health needs, Pittsburgh police and EMS providers have asked for additional tools to address these needs. The City of Pittsburgh's Office of Community Health and Safety was created to integrate public health informed practices into public safety operations and develop new ways to support vulnerable populations. Programs such as the AHN Street Outreach Team<sup>12</sup> and Pre-Arrest Diversion<sup>13</sup> have helped ensure that public safety professionals capitalize on every interaction with a person requiring additional assistance, recognizing that every public safety encounter is an opportunity to connect people with proper resources and find definitive solutions to the complex issues they face.

### Fentanyl Test Strip Kits Program

The OCHS requested funding for 25 fentanyl test strip kits (100 strips/kit). On average, Pittsburgh EMS distributes 15 naloxone leave-behind kits to patients following an opioid overdose each month. Twenty (20) fentanyl test strips will be added to each naloxone leave-behind kit, allowing patients to test their substances and increase their awareness of the presence of fentanyl. After treating a patient for an overdose, Pittsburgh EMS providers would give the patient a kit containing naloxone, fentanyl test strips, and a list of resources to access treatment and harm-reduction supports. Estimates indicate that the requested funds will supply enough fentanyl test strips for distribution to approximately 90 patients (1,800 fentanyl test strips) over the course of six months. The remaining 700 fentanyl test strips would be distributed at community overdose prevention events throughout the City of Pittsburgh.



## Other OCHS Projects & Initiatives

OCHS Staff have identified the following as additional projects and initiatives the Office is engaged in currently.

A more detailed description of each of these projects or initiatives can be viewed at: <https://docs.google.com/presentation/d/1cLwWY4yB2F-zVx4aeTHydfOeQH-yyjulFEhC73uOhLU/edit?usp=sharing>

## Community Engagement & Partnership (CE&P)

- Responsiveness to Community Members
- Neighborhood Health & Safety Academy
- Youth Leadership Board
- Community Advisory Board(s)/Strategic Planning Leaders (subcommittee of STV Oversight Committee)

## Continuum of Support

- AHN Program
- Diversion
- High Utilizer Program
- Crisis Response & Intervention Teams
- Post Engagement Response/Victim Assistance

## Translational Public Health

- Community Paramedicine
- OD Prevention/Prehospital Buprenorphine
- SwimSafe Expansion

## Office Operations

- Org Chart
- 2021 Org Chart/Budget (projected based on Q3/4 hiring)



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## Opportunities & Risks

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This section is designed to make the incoming administration aware of important program/project events, as well as important decisions that will have to be made over the next year.

### Risks Ahead:

#### Continued-Growth Opioid Crisis

- In response to the worsening crisis, OCHS has remained committed to utilizing insights gained from improved data analysis to inform progressive opioid overdose prevention strategies that seek to reduce harm associated with drug use, employ a person-first approach, and address social determinants of health. However, this is a *worsening (with emphasis)* crisis, and additional financial resources and human capital resources will be required to accommodate the growing rates of cases. Additionally, the focus on the opioid crisis cannot be to the detriment of treatments for non-opioid, drug-related issues facing Pittsburgh citizens. There will be a need for the office to be able to address multiple crisis simultaneously.

#### Funding & Sustainable Structure

- OCHS has a \$5 million budget increase for next year. While some of OCHS' programs and initiative are funded, in part, through partnerships, the budget increase will be coming from the City's general fund. The incoming administration will have to determine if the \$5 million increase, primarily associated with an increase in the number of social workers in OCHS, is a sustainable model going forward. If so, the administration may need to explore how to secure additional funding through grants and other partnerships.

#### Increase in Social Workers within the Office

- The Office's proposed organizational chart increases the number of its social works from six (6) to sixteen (16). While many perceive this social worker ride-along program as a unique opportunity to de-escalate situations before law enforcement is necessary and/or required, it does come with some risks and potential challenges. Some members of the social workers' union believe that social



workers often come with their own set of unconscious bias, and that a system in which social workers collaborate with police or replace them in certain situations would be policing with a different name. There should be more analysis of best practices with this model before full implementation and ramp up. Implicit bias and equity training should be required for all social workers and officers participating in this program.

### Important Decisions Between 1/6/21 and 12/31/22

- OCH&S-Council Town Halls/Community Listening Campaign Launch **[11/2021]**
- Prehospital buprenorphine pilot complete & scaling **[11/2021]**
- Co-Responder Academy first class complete **[12/2021]**
- CRIT co-response, 1 team/2 Zones, daylight **[01/2022]**
- 2022 Stop The Violence OCH&S Roadmaps collaboratively developed & released **[01/2022]**
- Comprehensive Public Health initiatives plan developed **[01/2022]**
- Community-based social work community office hours **[02/2022]**
- High utilizer referrals from all bureaus & community **[02/2022]**
- NH&SA first class complete, participants join advisory board **[02/2022]**
- Law Enforcement Assisted Diversion (LEAD) **[03/2022]**:
  - Operating in Zone 1
  - Piloting in Zones 2 and 5
  - Planning in 3, 6, and 4
- AHN **[03/2022]**:
  - Daylight across zones
  - Co-responding
  - Scaling



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## Reports



## Voluntary Employee Beneficiary Association Trust Funds

- Stop The Violence Fund: OCHS Progress Update (10-12-2021) (created by current staff). See full update at: <https://docs.google.com/presentation/d/1cLwWY4yB2F-zVx4aeTHydfOeQH-yyjulFEhC73uOhlU/edit?usp=sharing>
- Opioid Overdose Dashboard (monthly reports beginning in October 2020) (detailed geographic data). See the dashboard at: <https://pittsburghpa.maps.arcgis.com/apps/dashboards/4750c482e06c4c348e6cc0d54e6475af>