

Opioid Misuse Resource and Needs Assessment for Fayette County, Kentucky

Presentation to the
Lexington-Fayette Urban County Council
September 25, 2018

Introduction

- The opioid epidemic is impacting the service delivery system in Fayette County
- Although some data sources exist, an assessment of the Fayette County service system response was needed
- A comprehensive opioid resource and needs assessment was commissioned

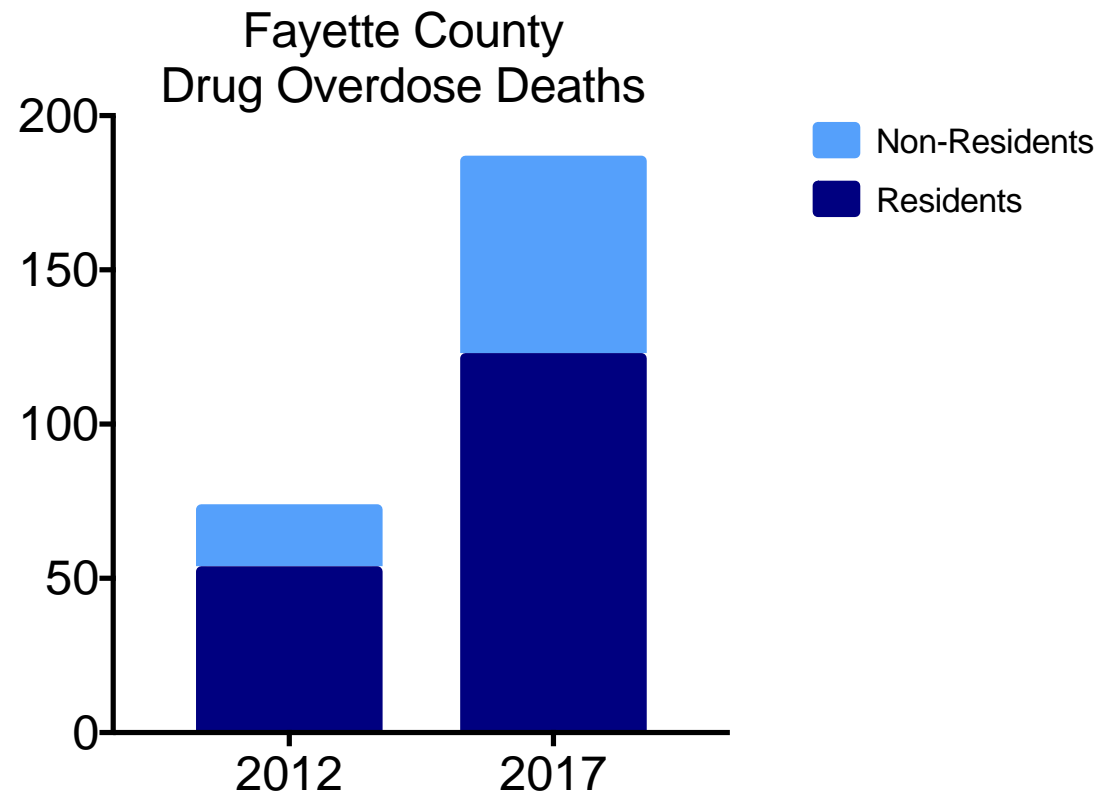
Research Team



- Erika Pike, PhD, Post-Doctoral Fellow
- Michele Staton, PhD, MSW, Associate Professor
- J. Matthew Webster, PhD, Associate Professor

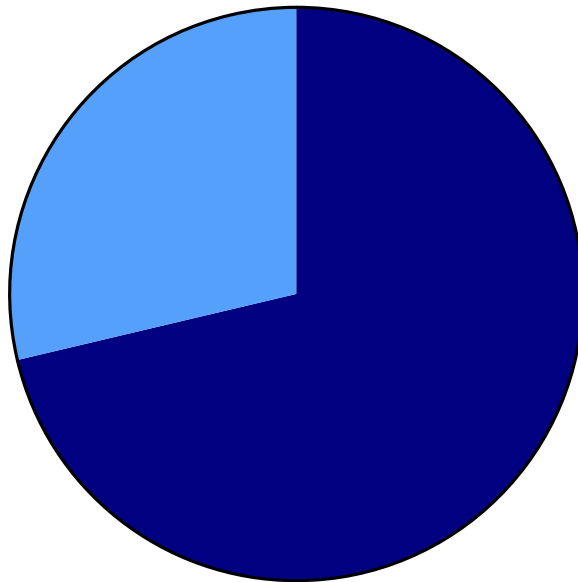
Scope of the Problem

- Drug overdose deaths have significantly increased in Fayette County
- More than 80% of overdose deaths in Fayette County involve opioids



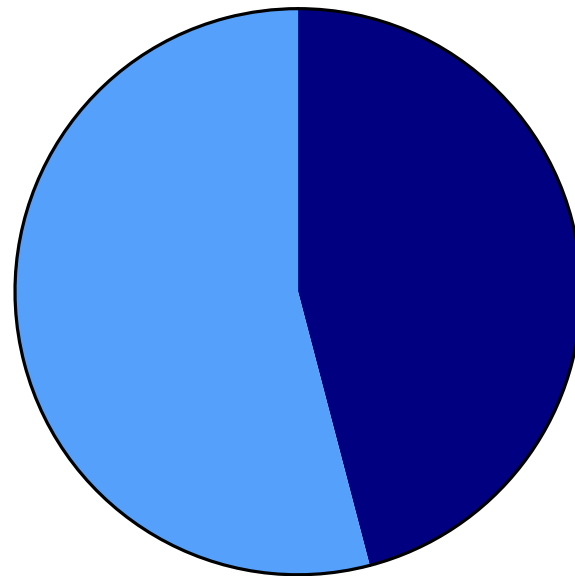
Scope of the Problem

Fayette County
emergency department visits
following an overdose, 2017



Total=1432

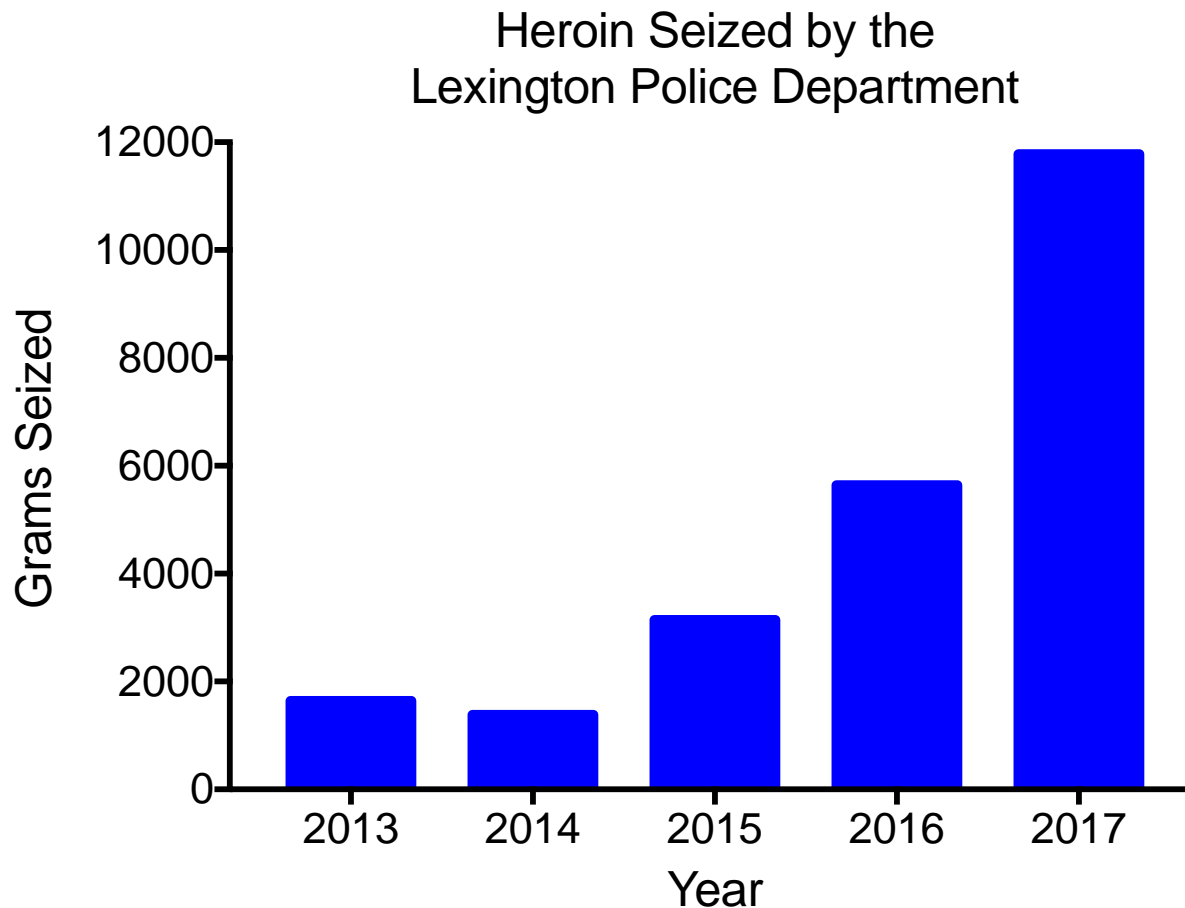
Fayette County
inpatient hospitalizations
following an overdose, 2017



Total=993

■ Residents
■ Non-Residents

Scope of the Problem



Purpose

- Identify the strengths within Fayette County to respond to the opioid epidemic
- Identify unmet needs or barriers to accessing available resources

Methodology

- Online survey with service providers and first responders
- Interviews with service providers and individuals who reported opioid misuse
- Existing data sources

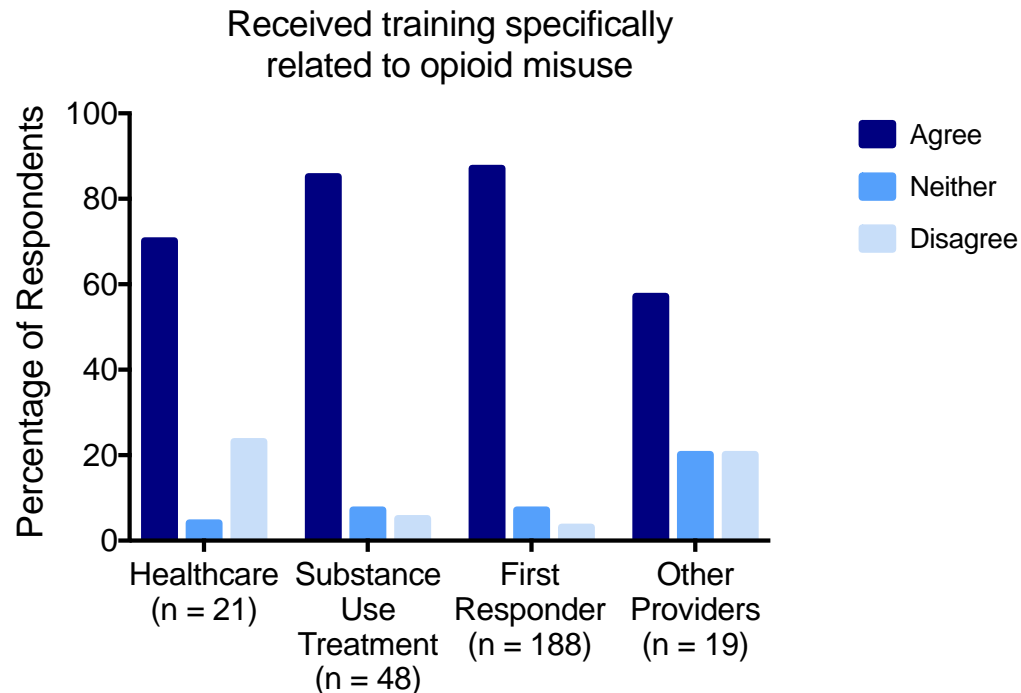
Identified Strengths

- Fayette County has a variety of substance use treatment and other resources available
- Innovative approaches include:

- Needle exchange
- Increased community access to naloxone
- Community Paramedicine Team
- The Good Samaritan law
- University of Kentucky bridge clinic

Identified Strengths

- Fayette County has invested in professional trainings to address opioid misuse, particularly in the administration of naloxone



Identified Needs

- Support for service providers to reduce and prevent burnout

“We spend an inordinate amount of time on this issue [opioid abuse].” [Social service provider]

“Almost everything I do has some nexus to the opioid epidemic.” [First responder]

- Remove barriers to accessing treatment (e.g., cost/insurance, transportation)

Identified Needs

- Widespread training and education
 - Prevention programs
 - Continued training for service providers
 - Naloxone administration
 - Good Samaritan Law

“Yes, you are always afraid to do the right thing, you are afraid to call the police when someone is overdosing ... that if the cops come, they will end up taking you to jail because you were trying to help someone...”

Identified Needs

- Increased access to and utilization of HIV and hepatitis C confirmatory testing

“Because individuals that use needles for opioids have higher rates of HCV, we have higher rates. But, we find it hard to link them to confirmatory testing and treatment.”

Actionable Recommendations

- The response to the continuing opioid epidemic will require partnerships between community organizations, including LFUCG.
- Three themes were identified:
 - Access to substance use treatment
 - Awareness and education
 - Engagement and coordination

Access to Substance Use Treatment

- Establish a position (s) to follow-up with individuals who access services related to opioid misuse to help them navigate the system to better address their needs (e.g., substance use treatment, insurance, healthcare, harm reduction).
- Identify locations where first responders can take individuals who are seeking help for substance use disorder treatment.
- Continue the Lexington Division of Fire and Emergency Medical Services' Community Paramedicine Program.

Access to Substance Use Treatment

- Continue to apply for funding to expand and enhance evidence-based substance use treatment and other services related to the opioid epidemic.
- Increase access to medication assisted treatment (MAT) programs, including MAT initiation in the emergency department, when appropriate.
- Increase access to all levels of substance use disorder treatment (e.g., medical detox, outpatient, intensive outpatient, residential, recovery and MAT).
- Increase substance use disorder screenings in healthcare settings.

Awareness and Education

- Make available concise resource and service guides for service providers and individuals who misuse opioids.
- Encourage burnout and compassion fatigue prevention activities among first responders and other service providers involved with substance use disorders.
- Identify and plan for the systematic collection of data that measure the impact opioid misuse has on Fayette County.

Awareness and Education

- Provide/distribute information on the Good Samaritan Law (SB192).
- Provide substance use disorder prevention education for youth.
- Provide community education regarding opioid misuse.

Engagement and Coordination

- Reinforce community outreach promote understanding of substance use disorder thus fostering a community where individuals with substance use disorder are comfortable reaching out for help.
- Reconvene the heroin workgroup to encourage people to discuss possible solutions to the access issues and educational needs raised in the report.
- Improve communication between community agencies that provide services to those with substance use disorder and their families.

Engagement and Coordination

- Work with employment assistance programs to share information with those coming out of treatment programs.
- Identify affordable housing options, including sober living, for individuals completing treatment.
- Provide support for families and children of individuals who misuse opioids.
- Increase access to naloxone.
- Reduce barriers and concerns of individuals who could potentially benefit from services offered by the Fayette County Health Department's Needle Exchange Program.

Conclusion

- Opioid misuse is a complex problem which requires a complex solution, including collaborative partnerships.
- Innovative programs and resources exist, but there are barriers to accessing these resources.
- Significant burdens exist for service providers in a variety of fields in Fayette County and there is a need for service provider support (e.g., mental health resources).

Questions?
