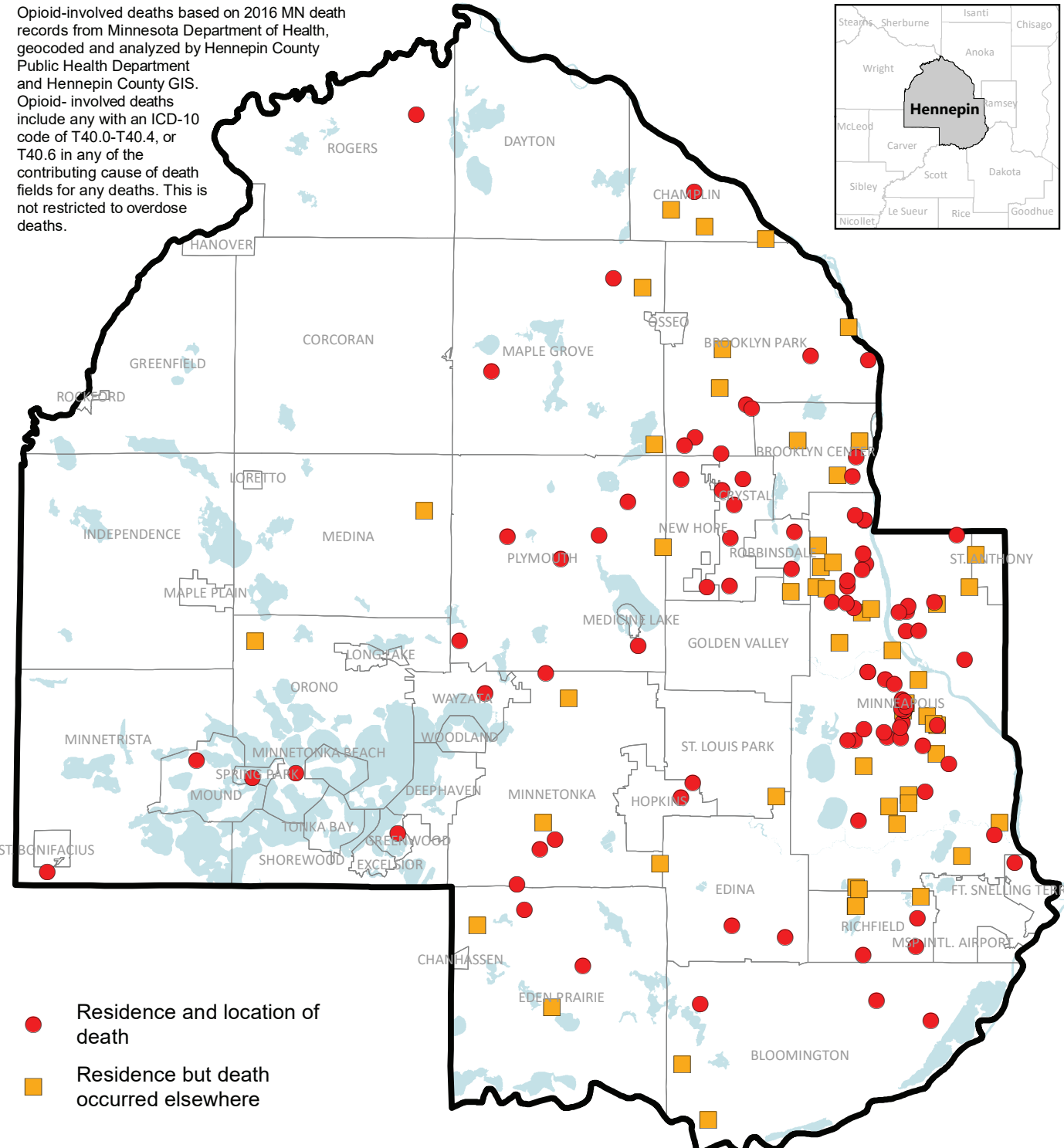


Opioid-involved Deaths

2016 County Resident Deaths ** For Internal Distribution Only **

HENNEPIN COUNTY
MINNESOTA
Health and Human Services

Opioid-involved deaths based on 2016 MN death records from Minnesota Department of Health, geocoded and analyzed by Hennepin County Public Health Department and Hennepin County GIS. Opioid-involved deaths include any with an ICD-10 code of T40.0-T40.4, or T40.6 in any of the contributing cause of death fields for any deaths. This is not restricted to overdose deaths.



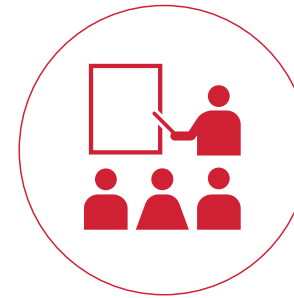
- Residence and location of death
- Residence but death occurred elsewhere

Publication date: 11/8/2017
Data sources: MN Dept of Health, 2016 Death Data



Disclaimer: This map (i) is furnished "AS IS" with no representation as to completeness or accuracy; (ii) is furnished with no warranty of any kind; and (iii) is not suitable for legal, engineering or surveying purposes. Hennepin County shall not be liable for any damage, injury or loss resulting from this map.

Strategy pillars and priorities



Primary prevention

Prevent further spread of the opioid crisis

- Monitoring and communication
- Education and stigma reduction
- Manage access
- Safe storage and disposal
- Public safety intervention



Response

Avert overdose deaths

- Rescue
- Harm reduction



Treatment and recovery

Provide evidence-based treatment and recovery services

- Access to treatment and recovery services
- Justice-involved population supports





Primary prevention:

Monitoring and communication: Develop a system for tracking, analyzing and sharing timely comprehensive data to support the opioid prevention framework and develop new strategies.

- Determine membership and establish a county-wide data coordination team
- Develop a data collection and sharing tool
- Develop a communication strategy for sharing results with key stakeholders

Education and stigma reduction: Increase and coordinate education and stigma reduction messaging to key audiences with the goal of raising awareness and knowledge of the possible adverse effects of opioid use, including overdose and opioid use disorder.

- Document existing communications plans/campaigns at the local, state, and national level, including efficacy
- Develop and implement a communication plan to coordinate existing efforts, identify gaps, and implement new/promising strategies

Manage access: Support and obligate providers to use best practice prescribing guidelines.

- Provide education to county staff with medical prescription authority on adopting best practices guidelines, including new state prescribing guidelines
- Advocate for state-level inclusion of evidence-based non-opioid pain treatment coverage in state-sponsored health plans
- Lead efforts to integrate PMP into electronic health systems

Safe storage and disposal: Promote safe storage and environmentally sound disposal of medications.

- Create structure of collaboration among public and private entities
- Increase medication disposal boxes in the county through targeting healthcare facilities and retail pharmacies
- Provide proper disposal information to residents

- Collaborate with the public education and stigma reduction group to educate patients on safe storage
- Explore feasibility of using disposal bags as a supplement to medication drop boxes and identify areas where gaps may exist for safe disposal

Public safety interventions: Reduce illegal distribution and use of opioids.

- Develop best practices in investigating and prosecuting overdose related crimes
- Develop a diversion court for individuals with a substance use disorder who have been charged with lower level offenses to ensure they have quick access to treatment and recovery support
- Review current probationary practices in drug court to ensure compliance with best practices



Response:

Rescue: Ensure all first responders, necessary county employees, and targeted stakeholders have access to and are trained to administer naloxone.

- Verify and complete sourcing of naloxone supply for all local law enforcement Hennepin County
- Identify protocol for initial and follow-up naloxone administration training
- Determine county role in naloxone distribution, funding, sourcing, policy and training

Harm Reduction: Coordinate county safe syringe services and naloxone distribution.

- Coordinate safe syringe services and naloxone distribution with non-governmental agencies in Hennepin county
- Collaborate on drug user education
- Monitor innovative practices, including community health injection locations (CHIL) operating in other jurisdictions



Treatment and recovery services:

Access to treatment and recovery services:

Design and implement culturally and evidence-based interventions by engaging communities disproportionately impacted by the opioid epidemic; and transform the substance use disorder (SUD) treatment system from acute, episodic care to a longitudinal model of care.

- Use data from opioid related deaths to gather info on age, race/ethnicity, and geographic area of residency to determine those communities disproportionately impacted
- Create an Intervention Design team composed of community members disproportionately impacted
- Create an advisory committee of health care professionals disproportionately impacted (human services/child protection, public health, medical examiners, emergency medical service responders, addiction medicine physicians, Substance Use Disorder treatment providers) that will report to the intervention design team
- Implement Substance Use Disorder reform within Hennepin County
- Develop and expand withdrawal management (Detox) services at 1800 Chicago Avenue in compliance with 2017 state statute and Medicaid requirements
- Seek new opioid grant opportunities through state and federal sources that support evidence-based models of addiction care
- Review contracts to ensure appropriate accommodations are in place for people on medications for opioid use disorder (MOUD)

Justice-Involved Population Supports: Increase treatment options and transition planning in correctional settings.

- Develop a plan including the feasibility and effectiveness for medications for opioid use disorder (MOUD) during periods of incarceration
- Expand transition from jail to community (TJC) and integrated access team (IAT) to include opioid use disorder target population
- Establish standards to be used in law enforcement interventions

