

Grays Harbor Opioid Needs Assessment Stakeholder Meeting Notes 2/22/18

Goal 1	What does this look like?	Who needs to be involved?	How will this impact the local crisis?
<p>1. Educate public about prescription opioid safety, storage, disposal and stigma reduction.</p>	<p>State media campaign for community (facebook or Posters in ED or PC offices), Epi News for Medical community, Use of Best Practice language when discussing overdose situations by all media, word of mouth, distribution of lock boxes</p>	<p>ED, My Town Coalition, PC, Treatment Providers, Police, Hospice, Tribes</p>	<p>Older Adults fears will be heard and addressed with more education, decreased denial of problem for many families, better understanding of how controlled Rx can be retrieved after death, increased awareness, decreased stigma, more people get the help they need</p>
<p>2. Promote PMP use and CDC guidelines around opioid prescribing.</p>	<p>PC offices can be educated about how to use the PMP by state trainers, Offices build in a simple routine (designate the role) to use the PMP more regularly</p>	<p>Medical community, State</p>	<p>Help medical community more effectively manage patients, risk of patients turning from legal to illegal forms of opioids</p>
<p>3. Adopt best practice (drug) prevention curriculum in K-12 schools.</p>	<p>School resource officer or Substance Abuse Counselor (TruNorth) can be a link to delivering curriculum in schools; ESD 113, OSPI (Lifeskills curriculum free best practice from OSPI) to be adopted by all schools.</p>	<p>Schools, YMCA, TruNorth</p>	<p>Long term investment, increase in resiliency of our community</p>

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<p>4. Adopt a local pharmaceutical stewardship ordinance to support, expand and sustain drug take back efforts.</p> <p style="text-align: center;">Goal 2</p>	<p>Use ordinance models from other counties</p> <p style="text-align: center;">What does this look like?</p>	<p>State, counties/cities, Chief Myers, commissioners, Pharmacies, Tribes</p> <p style="text-align: center;">Who needs to be involved?</p>	<p>Give our community more options of Drug Take Back Programs, get unused drugs out of community, less Rx dumps at PC offices (which puts them at risk)</p> <p style="text-align: center;">How will this impact the local crisis?</p>
<p>5. Ensure adequate access for those seeking Medication Assisted Treatment.</p>	<p>Mobile treatment options (Evergreen is planning for), transportation needs addressed (Evergreen hopes for improved relationship with para-transit), Licensed workforce (BHO is providing internships as a way of recruitment), more services in one stop for patients (Evergreen and Lifeline are partnering for mental health services).</p>	<p>Great Rivers, Evergreen, A First Place, Lifeline, PC, Tribes</p>	<p>Better support system for clients that lasts their whole life.</p>
<p>6. Strengthen link between community and criminal justice involved treatment services.</p>	<p>Communication, warm handoffs, education alongside treatment while in justice care, Drug court providing MAT and other wrap around services, Diversion program wrap around services, naloxone kits distributed for all those getting MAT in jails upon release. Naltrexone (Vivitrol) would be beneficial for some individuals.</p>	<p>GH Jail, Evergreen, Therapeutic Courts, GHPHSS Naloxone Distribution</p>	<p>Long term solution, reduced recidivism</p>

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<p>7. Promote online resource guide for behavioral health services.</p>	<p>Links to the Great Rivers http://greatriversbho.org/graysharbor and other GH resource pages, awareness of these online resources for case workers, and PC referral specialists and our faith based community</p>	<p>GHPHSS, any other OAT member with a web space or community bulletin board</p>	<p>Increased number of people in the right care</p>
<p>8. Conduct follow-up outreach to individuals who have experienced an overdose.</p> <p style="text-align: center;">Goal 3</p>	<p>Very tough to implement, would add one more barrier to calling for emergency care</p> <p style="text-align: center;">What does this look like?</p>	<p>NA</p> <p style="text-align: center;">Who needs to be involved?</p>	<p>NA</p> <p style="text-align: center;">How will this impact the local crisis?</p>
<p>9. Support ER to develop and implement protocols on providing overdose education and take-home naloxone kits to individuals seen for opioid-related complications.</p>	<p>Is there a barrier to providing medications out of the ER? Who gives education-nurses?</p>	<p>Hospitals, GHPHSS Naloxone Distribution</p>	<p>Get Naloxone kits into the right hands at the right time=save lives</p>

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<p>10. Continue overdose education and naloxone distribution through syringe services program.</p>	<p>Every Wed from 11am-3pm Aberdeen, One for One Syringe Services Program</p>	<p>GHPHSS Naloxone Distribution</p>	<p>Since April 2017, given out 703 kits to lay community, save lives</p>
<p>11. Develop partnerships with community agencies around overdose education and naloxone use.</p>	<p>Naloxone Administration Education to volunteer community partners</p>	<p>Community Partners, GHPHSS Naloxone Distribution</p>	<p>Get Naloxone kits into the right hands at the right time=save lives</p>
<p>12. Support policies to equip volunteer fire departments and law enforcement agencies with naloxone and provide overdose education.</p>	<p>Naloxone Administration Education to volunteer fire fighters</p>	<p>Volunteer Fire Departments—Dr. Buck, GHPHSS Naloxone Distribution</p>	<p>Get Naloxone kits into the right hands at the right time=save lives</p>
<p>Goal 4</p>	<p>What does this look like?</p>	<p>Who needs to be involved?</p>	<p>How will this impact the local crisis?</p>

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<p>13. Develop policy to mandate reporting of overdoses.</p>	<p>What would it tell us? What would we do with the information? Data won't be accurate because making this a mandated report may scare individuals into not reporting or calling for help.</p>	<p>NA</p>	<p>NA</p>
<p>14. Develop local reporting system/tool for EMS to record overdose-related interactions.</p>	<p>Track how many Narcan administrations occurred annually, track how many Naloxone kits were administered before EMS arrival annually.</p>	<p>Aberdeen Fire Department (already does), County/City Fire Departments</p>	<p>Ability to track Naloxone/Narcan use rates to compare from year to year. This paired with our GPHSS Naloxone Distribution Data helps to paint an accurate picture.</p>
<p>Additional Strategy: OAT members facilitate Town Hall Meetings in local Libraries to discuss Opioid Crisis in our community</p>	<p>OAT members facilitate speakers and/or discussion around how opioid use disorder affects all of us</p>	<p>Community members, Media, Timberland Regional Library, Drug Task Force, OAT members</p>	<p>Help to destigmatize, more people get the help they need, more people feel like they are part of the solution.</p>