NORTH IDAHO

OPIOID

STRATEGIC PLAN

PROPOSED BY

PANHANDLE HEALTH DISTRICT

September - December 2018

PROS

PRESCRIPTION OPIOID SOLUTIONS

5 Counties | 4 Work Groups | 3 Years | 2 Make a Difference
COEUR d’ALENE — Local experts came together Wednesday to tackle the opioid crisis in Kootenai County.

The North Idaho Prescription Opioid Solution Symposium was organized by the Panhandle Health District.

Kelsey McCall, Panhandle Health education specialist, said the goal of Wednesday’s event was to “develop a North Idaho-specific prescription opioid strategic plan.” With such a plan, local organizations could apply for funding to implement its recommendations.

Sen. Mary Souza serves as vice-chair of the Idaho Senate Health and Welfare Committee and is a member of the state’s task force on opioid abuse. She said the state and medical providers need to understand the difference between those in chronic pain who have become addicted, and those who are addicted because of social or mental health reasons.

“It is so important that providers create a plan to deal with a patient’s pain before they reduce the prescription,” she said.

Dr. William H. Miller of Kootenai Health framed a discussion about chemical dependencies by stating they should be viewed as diseases. Like other diseases, addictions are preventable, treatable, they changes one’s feelings, and if untreated can last a lifetime, he explained.

Opiates are addictive because they stimulate dopamine in the brain, which provides feelings of well-being.

“People get addicted because they want to feel better. Who doesn’t want to feel better?” he asked.

Miller said the brain changes with opiate abuse but can recover if given enough time without drugs overloading its dopamine receptors. The longer the period of abstinence from drug use, the greater the recovery. After three to five years, the brain can greatly heal, he explained. However he said, a few weeks in rehab is not nearly long enough. People who are detoxing need support and a safe place to live in order to give their brains plenty of time to heal.

He also said stereotypes about the type of person who becomes addicted to opioids are incorrect.

As society, we have to figure out how to treat them as we would any other illness. That kind of support is the only thing that will help. It won’t be a quick fix,” Miller said, but public attitudes need to change in order to see progress regarding opioids.
Kootenai County EMS Chief Chris Way cited an example from his own life to reinforce Miller’s point. A good friend of his from childhood developed an addiction to opiates and died of an overdose, said Way. This friend had suffered two herniated discs on the job and couldn’t get physical therapy and surgery. The medical system found it easier to give him pain medication, said Way. In the end, he was getting 400 hydrocodones per month.

Participants in the afternoon work session were invited to join one of four work groups for a brief discussion Wednesday, and committed to continuing their work over the next 12 months. David Atkins, a licensed physician assistant with Heritage Health, started his career in Grangeville where he saw the effects of opiate addiction. He headed a work group on prevention, with a goal of educating physicians on safe prescribing, to increase awareness of risks, and to use a prescription monitoring program.

Way headed up a work group on harm reduction focused on safe storage and disposal, improved screening, associated disease testing, and Naloxone. Way said Naloxone has been overused and put into the wrong hands. It’s very appropriate for first responders to carry it, but not for partiers who use it as a backup plan, he explained. Way said while most of the county’s residents may not think opioids are a problem in North Idaho, those who work in emergency rooms and clinics see the problem clearly. “We do have a problem. Unless we admit there is a problem, we’re never going to fix the problem,” he said.

Licensed social worker Lynne Clark led a work group on access and awareness of treatment. She has worked with pregnant, addicted women and with addicts whose families had intervened but had no active medical detox center to bring them to in Kootenai County. She said there is a lot of room for doing good work in the county.

Clark Richman of St. Vincent de Paul also led a work group geared toward community resources such as transportation, holistic person support, and making sure people don’t fall through the cracks in between agencies.

PHD health services administrator Don Duffy said “There are a lot of individual, positive efforts underway” in the area. “Bringing those all together in a community collaborative effort, we believe, can make a positive impact on the problem.”
ONE

THE INCIDENCE RATE OF OPIOID RELATED EMERGENCY DEPARTMENT PRESENTATIONS.

<table>
<thead>
<tr>
<th>Year</th>
<th>Rate</th>
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<tbody>
<tr>
<td>2017</td>
<td>42.3/10,000</td>
</tr>
<tr>
<td>2018</td>
<td>43.9/10,000</td>
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TWO

THE AVERAGE AGE ADJUSTED RATE OF DRUG INDUCED DEATHS.

<table>
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<tr>
<th>Year</th>
<th>Rate</th>
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<tbody>
<tr>
<td>2016</td>
<td>17.8/100,000</td>
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THREE

THE OPIOID PRESCRIPTION RATE PER 100 PERSONS

<table>
<thead>
<tr>
<th>Year</th>
<th>Rate</th>
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<tbody>
<tr>
<td>2017</td>
<td>79.9/100</td>
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MISSION

THE PREVENTION WORKGROUP WILL WORK TO REDUCE AND MINIMIZE THE MISUSE OF PRESCRIPTION OPIATE MEDICATION BY PATIENTS AND THE PUBLIC.

GOAL 1 STANDARD OF CARE

By June 2021, achieve a 20% reduction in overall opioid prescribing in each of the 5 northern Idaho counties.

GOAL 2 ADULT EDUCATION

By December 2020, increase awareness and education of opioids and opioid use in individuals aged 27 and older through coordinated messaging in North Idaho.

GOAL 3 YOUTH EDUCATION

By December 2020, increase awareness and education of opioids and opioid misuse in individuals aged 26 and younger by partnering with 40% of North Idaho schools.

BASELINE DATA

Total Opioid Prescriptions in Idaho's Five Northern Counties

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<thead>
<tr>
<th></th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
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<tbody>
<tr>
<td>Total # Rx</td>
<td>187,991</td>
<td>192,473</td>
<td>187,862</td>
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<tr>
<td>Rate / 100</td>
<td>84.1</td>
<td>84.2</td>
<td>80.0</td>
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According to the Idaho Board of Pharmacy Prescription Monitoring Program
MISSION
THE HARM REDUCTION WORKGROUP MINIMIZES RISKS ASSOCIATED WITH OPIOID MISUSE THROUGH INCREASED ACCESS, AWARENESS, AND ASSESSMENT OF SUGGESTED OPIOID USE PROTOCOL.

GOAL 1 NALOXONE
By June 1, 2019, 5 local pharmacies in the region will begin adhering labels to the seal of all Narcan prescriptions warning patients to dial 911 for medical care when the seal is broken and prescription is used.

GOAL 2 SAFE STORAGE
By 2021, the North Idaho Harm Reduction group will reduce the risk of exposure to opioids by distributing public education about safe medication storage via electronic and print campaigns through partnerships with key stakeholders in the 5 northern Idaho counties.

GOAL 3 SAFE DISPOSAL
By January 1 2020, increase number of permanent box locations by at least 3 so all counties have one in their jurisdiction.

BASELINE DATA
3 out of 5 county seats have a permanent medication drop box
4 out of 5 county sheriff department's have permanent medication drop boxes.
MISSION
THE ACCESS AND AWARENESS OF TREATMENT WORK GROUP FOCUSES ON IMPROVING TREATMENT OPTIONS AND AVAILABILITY FOR PEOPLE WITH OPIOID USE DISORDER THROUGH EDUCATION AND OUTREACH.

GOAL 1 HUB AND SPOKE
By June 2021, improve access and awareness to addiction treatment by increasing opioid use disorder treatment teams to provide services in all five northern counties.

BASELINE DATA
North Idaho Opioid Treatment Facilities
North Idaho MAT Providers
MISSION

THE COMMUNITY RESOURCES WORKGROUP SEeks TO IDENTIFY AND ENHANCE PARTNER CONNECTIONS BY ESTABLISHING STANDARDS FOR STRUCTURAL AND POLICY IMPROVEMENTS TO PROVIDE APPROPRIATE SERVICES.

GOAL 1 DIRECTORY

By June 2020, 100% of agencies are contact and encouraged to upload services to Live Better Idaho Resource Directory.

GOAL 2 DETOX CENTER

By June 2021, one detox center is piloted in North Idaho serving at least five opioid withdrawal patients.

GOAL 3 RESOURCE ASSESSMENT

By December 2021, develop a process for evaluation, appropriate referrals, and continuum of care for individuals or families experiencing effects of opioid use disorder. Focus on: Post chemical dependency inpatient treatment

BASELINE DATA

Out of 5 counties have a stand alone medical detox center with opioid withdrawal capacity

Out of 5 counties have a resource referral system from chemical dependency
Axis Spine Center
Bonner General Health
Coeur d’Alene School District
Dragon Fly Support Services
Heritage Health
Idaho Child Welfare Research and Training Center
Idaho Department of Health and Welfare
Kaniksu Health Services
Kootenai Care Network
Kootenai County Juvenile Probation
Kootenai Recovery Community Center
Kootenai County Coroner
Kootenai County EMS
Kootenai County Fire and Rescue
Kootenai County Sheriff Department
Kootenai Health
Kootenai Health Family Medicine Residency Program
Lewis Clark State College
Life Recovery Solutions
Lyman Medical Research Foundation
Marimn Health
Mountain States Early Head Start
North Idaho Crisis Center
Northwest Hospital Alliance
Northwest Specialty Hospital
Panhandle Health District
Port of Hope
Region 1 Behavioral Health Board
Restored Horizons
Restored Paths
Sequel Alliance
St. Vincent de Paul
Trinity Group Home
University of Idaho
University of Washington
Washington State University

Thank you to all the community members who have worked to successfully plan for a healthier North Idaho.