Addressing the Opioid Crisis

Prevention, Treatment, Harm Reduction, & Recovery

Orange County Alcohol and Drug Advisory Board
OC Health Care Agency Behavioral Health Services
OVERVIEW

- Stakeholder Participation
- Compare identified community needs to current services for prevention, harm reduction, treatment and recovery
- Discuss gaps and strategies to address them
Stakeholders

- Surveys, ADAB Public Hearings, Opioid Events, Research Materials
  - Targeted Surveys to four groups:
    - Current and previous opioid users
    - Treatment providers
    - Family and friends
    - Community stakeholders
  - Over 800 responses received from all areas of the county
Survey Respondents

Consumers:
326 current/previous opioid users

- Female (43%)
- Male (56%)
- 26-45 Years (56%)
- Spanish (10%)
- Vietnamese (1%)
Current/Former Opioid Users

Q10: How did you get started with opioid use?

- Friends: 50.7%
- Family: 8.5%
- Medical prescription due to illness/injury: 36.6%
- Other: 4.2%

- Now Abstinent (81%)
- Heroin (6%)
- Presciption Opioid Pills (5%)
- Used Opioids for more than a year (96%)
Opioid Use History

- 37% started with pills and then heroin
- 19% used only pills
- 19% used only heroin
- 11% used fentanyl
Opioid Use History

- 28% OD’d at least once
- 30% were unaware of Naloxone
  - 8% administered Naloxone
  - 11% OD reversed by Narcan/Naloxone
- 29% treated in ED/Hospital for overdose
Q19: What follow up services were provided after going to the ER or hospital?

- None, was treated and released from ER with no referral to drug treatment: 54%
- Admitted from ER to hospital for more treatment/observation: 8%
- Released from ER/hospital; advised to get drug treatment but given no information on drug treatment programs: 25%
- Released from ER/hospital & received information on how to contact local drug treatment programs: 17%
- Released from ER or hospital and referred directly to drug treatment: 10%
- After release, someone contacted me from the hospital or a treatment program to get me into treatment: 3%
Criminal Justice Involvement

- Low number of responses
  - 47.9% of those responding \((n=38)\) arrested on drug charges
  - Of those arrested, 68.4% \((n=26)\) served time in custody for drug charges
  - 40% of those responding \((n=18)\) never participated in Drug Court
Current/Former Opioid Users

Opioid Treatment History

- Never Prescribed Any Medication for Recovery (59%)
- Two or more treatment episodes (47%)
- 1 in 4 never received any treatment
Other Survey Respondents

Treatment Providers, n=302

- 48% Therapists, Counselors
  - 20.4% Program Directors/Managers
  - 31.6% Other including physicians, psychiatrists, nurses, volunteers, & peers

Family Members, n=80

- 35.9% Parent
- 19% Sibling
- 9% Child
Other Survey Respondents

Community Stakeholders, n=95

- 32% Family/Friend
- 30% Health Care Professionals
- 38% Social Service Agencies
Who Needs Opioid Services?

- Young Adults
- Teens
- Chronic pain sufferers
- Homeless
- Released from jail/prison
- Co-occurring mental health issues
Barriers to Getting Services

- Cost/lack of insurance
- Denial of need or don’t want
- Stigma - Personal and/or Social
- Don’t know how to get help
- Delayed admission/wait lists
- Refused re-admission to previous program
What Services Are Needed

- Asked Respondents to identify top three
- Analyzed in relation to:
  - Prevention
  - Harm Reduction
  - Treatment
  - Recovery Support
- Compared to what’s currently available
- Where are gaps, strategies?
Prevention

Need:

- Prevention and education for children and teens about dangers of opioids
- Increased surveillance and training of prescribers
- Targeted prevention activities to at-risk groups
Current Prevention Services

Prevention activities in Orange County

- HCA Public Health Services Alcohol & Drug Prevention Education Team (ADEPT)
- HCA Behavioral Health Services Prevention, Education and Intervention (PEI)
- Outreach & Engagement
- Screening, Brief Intervention and Referral to Txt. (SBIRT)
- Coalitions to address SUD and OUD issues
- Drug Drop Boxes
- Monitor, Secure, Destroy Campaign
- Support DEA Take Back days
Current Prevention Services

Prescribing Practices and Monitoring

- California Substance Utilization Review and Evaluation System (CURES)
- SAFE Rx Coalition
- CalOptima Opioid Strategy
- CHOC Pediatric Education Program
- Medical School Curricula
Other Prevention Strategies

- SBIRT provided in middle school, high school and college
- Expand opioid year-round drug collection sites
- Expand printed campaigns
- Prevention messages on pharmacy packaging
- Expand use of social media campaigns
- Others?
Treatment

Needs

- More accessible no/low cost
  - Inpatient
  - Detox
  - outpatient
- Co-occurring opioid use and mental health disorders treatment
- Medication Assisted Treatment
- Co-occurring OUD and Medical treatment
Current Treatment Services

- Over 600 certified, licensed SUD treatment programs in Orange County
- Behavioral Health Services for co-occurring mental health disorders
- Approximately 70 MDs Buprenorphine certified
- Perinatal, Gender, and Adolescent specific programs
- Evidenced Based Practices
- Collaborative Courts
- FQHC’s
- CalOptima MOU to provide integrated care for SUD and health problems
Other Treatment Strategies

- Chronic disease treatment model, based upon medical necessity
- Increased availability of MAT in all treatment settings
- SUD treatment in custodial settings
- Increased MAT in custodial settings
- Use of Drug Medi-Cal funding to support additional services
- Other?
Harm Reduction

Needs:

- Availability of Naloxone in the Community
  - Reverse opioid overdose
- Clean Needles/Syringes
  - Reduce transmission of HIV, Hepatitis C
- Safe disposal containers
  - Public Health and Safety
Current Harm Reduction Services

- Pharmacies carry Naloxone
- First Responders carry Naloxone
- Treatment facilities have Naloxone
- Volunteer Activities
  - Naloxone distributed to opioid users, families
  - Needle Exchange provided in Santa Ana on a weekly basis
  - Needle Exchange provider offers safe disposal
Other Harm Reduction Strategies

- Expand Naloxone access to all first responders
- Provide Naloxone to opioid users upon release from jail custody and to OD patients upon release from Emergency Department/Hospital
- Co-prescribe Naloxone with opioids for acute or chronic pain in ED’s and medical offices
- Case management in jails and ED’s for linkage and warm hand-off to treatment upon release
- Establish SUD Information and Referral Locations at proposed Restoration Centers
- Educate users about tolerance levels
- Other?
Recovery Supports

Needs:

- Housing/Safe Environments
- Employment
- Community
- Family Services
Current Recovery Supports

- Aftercare and alumni groups at treatment programs
- Recovery Maintenance Program
- 12-Step groups
- Other secular recovery groups
- Sports/Exercise Programs
- Recovery Residences in Orange County
- OC Re-entry Program Job Fairs
Other Recovery Support Strategies

- Recovery Residences for housing while actively participating in treatment
- Follow Drug Medi-Cal recovery model including counseling, linkage to vocational, pre-vocational, health and other services
- Peer Support programs
- Other?
Speakers

- Prevention
- Harm Reduction
- Treatment
- Recovery Support
Resources

- http://www.ochealthinfo.com/opioids
  Prevention - Treatment - Harm Reduction
  Coalitions - Drop Box Locations - Naloxone

- http://ochealthinfo.com/bhs/about/adab

- Email: opioidinfo@ochca.com

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