State-Local Partnerships to Build Sustainability, Innovation, and Impact for Overdose Prevention and Response

Learning Objectives
In this session, participants will:
Describe one way to integrate state and local prevention and response efforts to further public health impact.
List specific strategies that can be implemented for community-level overdose prevention and immediate impact.

Statement of Purpose
To strengthen state and local integration of prevention and response efforts, the North Carolina (NC) Division of Public Health (DPH) directed approximately half of its CDC opioid crisis funds to local communities. The purpose of this initiative is to enable local health departments/districts (LHDs) to implement strategies from the state’s Opioid Action Plan to prevent overdoses, increase linkages to care, and build local capacity to respond to the overdose epidemic in NC.

Methods
In Fall 2018, DPH awarded funding to 22 of 85 NC LHDs through a Request for Applications with a heavy emphasis on local partnerships and collaborations. Selection criteria included organizational readiness and need, project description and sustainability, evidence of collaborations/partnerships with letters of commitment, and evaluation plan. Applicants selected from three main pre-approved strategies from the state Opioid Action Plan: Support syringe exchange program(s); Connect justice-involved persons to harm reduction, treatment, and recovery services; and Establish EMS-based post-overdose response teams.
Given early successes, this process will be repeated with the next round of funding. We will continue the same key strategies to promote sustainability of these programs, and we will add an optional innovative component to enable communities to propose new strategies. Given the evolving nature of the overdose epidemic, local communities are the first to see its effects and the first to know how to respond. Allowing communities to propose new approaches via LHDs enables development of promising practices and innovative strategies that can, in return, inform the state’s priorities.

Results
The key result of this approach is strengthened state-local integration of priority strategies to address the overdose epidemic, including sustainability of evidence-based strategies and development of innovative, promising practices.

Conclusions
Other states can immediately model this dynamic, reciprocal approach for state and local alignment of priority strategies. This model allows for both evidence-based and promising practices to be implemented for immediate impact, which is critical to support the most vulnerable populations for overdose prevention. This structure also enables the state health department to focus on its own strengths of developing technical assistance and resource tools with communities to strengthen the evidence base.
Amy Patel, MPH is an Injury Prevention Consultant at the North Carolina Division of Public Health, where she manages the overdose prevention-related grants and contract work for the Injury and Violence Prevention Branch. Her work includes developing partnerships and technical assistance with local health departments, community-based programs, and healthcare organizations. She received her education from the University of North Carolina at Chapel Hill.
The Role of Employers in Addressing the Opioid Crisis

Learning Objectives
In this session, participants will:
Objective 1 - Recognize the impact of substance use including opioids in the workplace.
Objective 2 - Identify NSC resources to help employers address opioid use in the workplace.
Objective 3 - Discover opportunities to expand partnerships to reduce the impact of the overdose crisis in communities including workplaces.

Statement of Purpose
Little attention is paid to the impact of the opioid crisis on employers, and the role that employers can play in prevention, treatment, and recovery. This session will examine the impact of opioids on the workplace, and how public health professionals can work with the employers in their communities to prevent and address substance use disorders. Topics will include a presentation of data from the National Safety Council’s Opioids At Work Employer Survey, workplace strategies and human resources policies to prevent opioid misuse and help employees navigate the opioid treatment and recovery landscape, and reducing stigma and other barriers to successfully addressing opioids in the workplace.

Methods
The National Safety Council has taken a multifaceted approach to addressing opioids in the workplace. NSC surveyed over 500 managers, HR professionals, and safety professionals to gauge concerns, impacts, and current practices on opioid use in the workplace. NSC, in partnership with NORC and Shatterproof, also developed a Substance Use Cost Calculator, an easy-to-use tool providing business leaders with specific information about the cost of substance use in their workplace based on size of employee base, industry and state.

Results
Data from NSC’s Opioids At Work Employer Survey, in addition to data from NSC’s Substance Use Cost Calculator, guided the development and implementation of the National Safety Council’s Opioids At Work Employer Toolkit, a set of more than 50 tools directed at workplace professionals. These tools aim to help employers lessen the impact of opioid use and misuse on the workplace, and provide strategies and interventions promoting policy change, education, and culture change. The toolkit will be continuously evaluated after its release in September 2019.

Conclusions
The workplace is a key environment for reaching employees, families, and communities to help prevent further opioid misuse, addiction, and overdose, and to help those already affected. Providing public health professionals tools to work with employers to prevent and address substance misuse is essential in moving towards our collective impact in the IVP field, and to reducing the impact of the overdose crisis in our communities and workplaces.

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Tammy Franks has worked in the injury prevention field for more than 20 years. She is an NSC subject matter expert on causes of preventable death at home and on the road. Prior to joining NSC, Tammy worked as the child passenger safety coordinator for a multi-hospital system based in Oregon and Washington. In this role, she developed and coordinated inpatient, outpatient and community outreach services. Additionally, she served as the statewide child passenger safety training coordinator.

A nationally certified Child Passenger Safety Technician Instructor since 1999, Tammy currently serves as chairperson of the National Child Passenger Safety Board and co-vice chairperson of KIDS IN MOTION, Inc., which offers a national child passenger safety conference annually. Tammy holds a bachelor’s degree in Political Science and German from Wittenberg University and a master’s degree in International Politics from the University of North Texas. In her free time, she enjoys exploring the National Parks.
Overdose Fatality Reviews: A tool for Guiding Overdose Prevention

Learning Objectives
Attendees will be able to develop ideas for implementing opioid overdose fatality reviews that meet their community needs
Attendees will be able to identify potential partners for forming their own opioid overdose fatality review teams
Attendees will be able to describe and define potential outcomes and future goals of opioid overdose fatality reviews

Statement of Purpose
In response to the opioid epidemic, the City of Minneapolis Police Department (MPD), the Minneapolis Health Department, along with the Minnesota Department of Health (MDH) made a commitment to pursue fatality reviews to prevent future overdose deaths. A planned pilot of six reviews were implemented. Opioid overdose fatality reviews increase understanding among the myriad of people that are involved with or affected by an opioid overdose death. The overall goals of the pilot were to promote interagency collaboration, improve system response, mitigate risk, and prevent overdose deaths.

Methods
The Overdose Fatality Review cases were opioid-involved overdose deaths concurrent with homelessness, law enforcement involvement, or recent institutional release. The cases were selected to include a range of ages, genders, and racial demographics. Additional partner agencies with interactions or who provided services to the decedent were invited to attend specific reviews, along with subject matter experts. The reviews focused on case level details, leading to discussions about systems’ improvements that could be applied in the short term. Additionally, these reviews have been used to identify long-term structural and policy changes, with the goal of preventing future opioid overdose deaths.

Results
Through the review process, Minneapolis was able to better identify immediate changes to data collection within their police department, identify gaps in linkages to care, and determine a subset of recommendations for policy makers. The partnership between the MPD, Minneapolis Health Department and MDH created a successful pilot of overdose fatality reviews. It is the vision of MDH to improve this process by which local communities can lead their own overdose fatality reviews with technical assistance provided by MDH. These pilot cases aided in the development of more comprehensive overdose prevention programs in Minneapolis.

Conclusions
Multidisciplinary perspectives are valuable for opioid overdose fatality reviews. Fatality review follow up should include an implementation plan so that generated proposals are used to inform future program improvements, processes, and policy responses to the opioid epidemic. States should invest their time
and plan to incorporate opioid overdose fatality reviews. Reviews provide a deeper narrative to collected data driving a bigger picture mindset when it comes to opioid overdose prevention.

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Jamie Margetta, MPH, earned her MPH in Environmental Health in 2018 and has worked in the Injury and Violence Prevention Section since May of 2018. Her primary work focuses on the morbidity component of the Enhanced State Opioid Overdose Surveillance cooperative agreement. She has successfully analyzed and completed ESOOS CDC reporting requirements for ED/EMS Data for both 2017 and 2018 data. Jamie has experience in SAS data analyzes and using multiple data sources.