



SUGGESTIONS FOR THE OPIOID OVERDOSE CRISIS IN CARBON COUNTY

SOCIAL SERVICES APPROPRIATIONS SUBCOMMITTEE
STAFF: RUSSELL FRANSEN

ISSUE BRIEF

SUMMARY

Nine panelists provided twenty-nine suggestions to address the opioid overdose crisis in Carbon County: nine for the supply/provider side and twenty for the demand/user side.

DISCUSSION AND ANALYSIS

The Social Services Appropriations Subcommittee invited ten panelists to participate in its September 17, 2018 town hall meeting at the Carbon County Events Center in Price. Those panelists provided a total of twenty-nine suggestions before the meeting to address the opioid overdose crisis in Carbon County, which are included in the two lists below.

Nine Suggestions for the Supply/Provider Side of Opioids

1. “Educating law enforcement about the nature of addiction, what drives a person to misuse substances.” (Carbon Addiction Reduction & Elimination)
2. “Helping community members understand the opioid epidemic is not unique to just pain killers. Overall substance abuse is an issue and often opioid misuse begins with abusing other drugs such as alcohol, tobacco and marijuana.” (Carbon Addiction Reduction & Elimination)
3. “I believe we should create a risk assessment for opioid prescribing.” (Southeast Utah Health Department)
4. “I believe that often patients are not even aware that their prescriptions are an opioid. Patient education is important when creating awareness of opioids and how they work.” (Southeast Utah Health Department)
5. “Implement best practices for prescription drug monitoring programs including interoperability with other states, proactive reporting, and enhanced accessibility for clinicians through electronic health record integration.” (Department of Health)
6. “Enhance linkage to care for those with an opioid use disorder or at risk of an overdose by connecting patients with a wide range of treatment and wrap around services.” (Department of Health)
7. “Identify and implement promising emergency department interventions to create post-overdose protocols, policies and procedures to ensure vulnerable patients are receiving naloxone, being referred to [Medication Assisted Treatment], provided “warm hand-offs” to community-based recovery organizations, and are linked to patient navigators.” (Department of Health) “Deploy community health workers as part of a post-overdose hospital care team.” (Department of Health)
8. “Facilitate prescribers obtaining their [Drug Addiction Treatment Act] waiver in coordination with substance abuse prevention partners.” (Department of Health)
9. “Partner with syringe service programs to offer comprehensive services that facilitate both reduction of opioid-related harms and linkages to care for opioid use disorder.” (Department of Health)

Twenty Suggestions for the Demand/User Side of Opioids

1. “Recommendations to decrease demand would be to not only encourage evidenced based strategies across the spectrum of care but to provide the necessary resources and infrastructure required to deliver those strategies with fidelity, to population saturation and with sustainability.” (Carbon Addiction Reduction & Elimination)
2. “Messaging to reduce the stigma of getting [Substance Use Disorder] help in the first place - so folks will seek help earlier on in their addiction.” (Four Corners Community Behavioral Health) “Reducing stigma for those with an opioid use disorder, educating about effective substance use treatment modalities, and harm reduction messages about the dangers of synthetic opioids.” (Department of Health)
3. “A local facility to hold recovery meetings.” (Four Corners Community Behavioral Health)
4. “Something for adolescents to do (besides party) for kids to do - Build Carbon County a rec center! Splash Pad for young families and babies to ‘build community’ locally.” (Four Corners Community Behavioral Health)
5. “Resources for Families to raise resilient youth.” “Give funds to provide resiliency skills to elementary school kids and provide jobs for their parents!” (Four Corners Community Behavioral Health)
6. “[Intergenerational Poverty]- Help us tackle this problem with job training and JOBS. Help us diversify- from extraction to diverse businesses. Local Industry development- more diverse industry resources in Carbon County.” (Four Corners Community Behavioral Health)
7. “Jobs/employment opportunities for those in long term recovery. Tax credits for incentives for employers to hire folks in recovery” (Four Corners Community Behavioral Health)
8. “Funding- NOT just one year funding things to promote -- long term change.” “Help financially sustaining the [Opioid Treatment Program] in the long term.” (Four Corners Community Behavioral Health)
9. “Neonatal Syndrome-Help with this problem- these are the next generation” (Four Corners Community Behavioral Health)
10. “Daycare assistance for parents to attend treatment” (Four Corners Community Behavioral Health)
11. “Support for grandparents raising grandkids” (Four Corners Community Behavioral Health)
12. “Medicaid expansion so folks have an insurance benefit to pay for care.” (Four Corners Community Behavioral Health)
13. “Funding to create and provide sober living.” (Four Corners Community Behavioral Health)
14. “Parenting mentors” (Four Corners Community Behavioral Health)
15. “Transportation – give us a bus or two or three to help folks get to treatment” (Four Corners Community Behavioral Health)
16. “A ‘Treatment Navigator’ to help families of those addicted and persons addicted” (Four Corners Community Behavioral Health)
17. “Emergency interventions help at the moment they request help.” (Four Corners Community Behavioral Health) “Use technology to facilitate connections to care (for example, a “reservations” system that allows referring clinicians to see what treatment options are available and to reserve a spot for a patient in need of fast connection to care).” (Department of Health)

18. “Enhance linkage to care for those with an opioid use disorder or at risk of an overdose. This includes connecting patients or their peer/family/community with a wide range of treatment and wrap around services.” (Department of Health)
19. “Stand up a local call center or another platform for community members and others to gain access to information about the public health crisis.” (Department of Health)
20. “The solutions could be related to the Medicaid program and facilitating reimbursement; providing funds for purchases by government programs that are directly treating patients, such as the Department of Veterans Affairs; including the NSS-2 BRIDGE in special evaluation programs; etc.” (Innovative Health Solutions)

Sources and Additional Information

1. [DOPL Price Utah Opioid September 2018](#)
2. [Health Providers Handout - September 2018](#)
3. [Four Corners Community Behavioral Health - Provider Handout](#)
4. [Southeast Utah Health Department - Opioid September 2018](#)
5. [Carbon Addiction Reduction and Elimination \(CARE\) Coalition - Supply](#)
6. [Veterans Affairs - Price Questions - September 2018](#)
7. [Health - General Public Handout - 9-2018](#)
8. [Four Corners Community Behavioral Health - Demand Handout](#)
9. [NSS-2-BRIDGE One Page Insurance Summary](#)
10. [Carbon Addiction Reduction and Elimination \(CARE\) Coalition - Demand](#)