




Heroin and Prescription Opiate Task Force
-King County, Cities of Seattle, Auburn and Renton



Co-Chairs Brad Finegood and Jeff Duchin





 King County

HEROIN AND OPIOID TRENDS



in King County

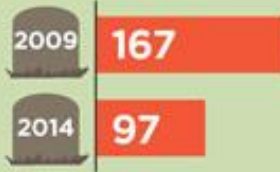


HEROIN AND OPIOID USE ARE AT CRISIS LEVELS

DEATHS FROM HEROIN OVERDOSE HAVE TRIPLED...



WHILE DEATHS FROM PRESCRIPTION OPIOID OVERDOSE HAVE DECREASED



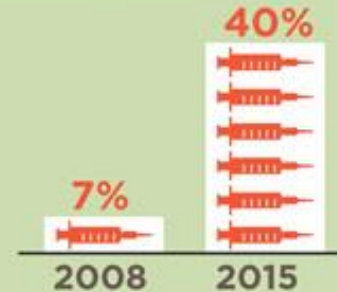
Source: C. Banta-Green, ADAJ, drug trends data

Overdose is now the leading cause of injury-related death for 25-65 year olds nationwide.

Source: CDC

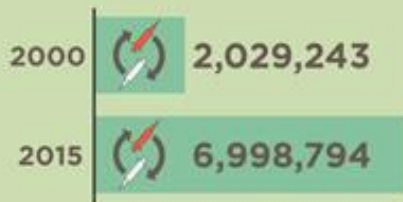


THE PERCENT OF KING COUNTY DRUG SEIZURES TESTING POSITIVE FOR HEROIN HAS INCREASED NEARLY SIX-FOLD



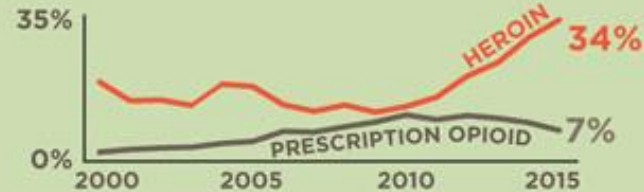
Source: WA State Patrol Crime Lab

THE NUMBER OF NEEDLES EXCHANGED HAS MORE THAN TRIPLED



Source: Public Health Seattle-King County Needle Exchange Program/ People's Harm Reduction Alliance

PEOPLE SEEKING TREATMENT FOR HEROIN HAVE INCREASED AS A PERCENT OF ALL DRUG TREATMENT ADMISSIONS





Shilo Murphy

YOUNG ADULTS ARE LARGEST GROWING GROUP SEEKING OPIATE DETOX

People Under 30 Seeking Detox for All Drugs



Source: BHRD 2014 Substance Abuse Prevention and Treatment Report

PEOPLE WHO ARE HOMELESS HAVE LESS SUCCESS ACCESSING METHADONE TREATMENT THAN THOSE WHO ARE STABLY HOUSED



Source: Needle Exchange Program

Current Methadone Treatment Slots: 3,025

Source: bhrd



Tim Durkin

MEDICATION-ASSISTED TREATMENT SAVES LIVES

Medication-Assisted Treatment **cuts risk of death from overdose in half** compared to people in counseling alone or not in treatment



Source: Pierce, M., Bird, S. M., Hickman, M., Marsden, J., Dunn, G., Jones, A., and Millar, T. (2016) Impact of treatment for opioid dependence on fatal drug-related poisoning: a national cohort study in England. *Addiction*, 111: 298-308. doi: 10.1111/add.13193

WHAT KING COUNTY IS DOING

King County has convened the **Heroin and Prescription Opiate Addiction Task Force** that includes individuals from across many disciplines who will come together over a period of six months to develop both short and long-term strategies to prevent abuse and addiction, prevent overdose, and improve access to different types of treatment for opioid addiction. For more information, visit: kingcounty.gov/heroin-opioids-task-force

Equity and Social Justice Charge

- Task Force will apply an Equity and Social Justice (ESJ) lens to all of its work-
- “War on Drugs” has disproportionately adversely impacted some communities of color
- Need to ensure interventions do not replicate this pattern
- All recommendations by the Taskforce will be reviewed using a racial impact statement framework





PREVENTION



Increase awareness of the possible adverse effects of opioid use, including overdose and opioid use disorder.



Promote safe storage and disposal of medications.



take back
YOUR MEDS

Work with schools and health care providers to improve screening practices so we can prevent and identify opioid use.



Raise awareness and knowledge of the possible adverse effects of opiate use, including overdose and opioid use disorder.

- Continue to educate physicians on responsible opiate prescribing practices and pain management oversight.
- Distribute counseling guidelines on prescription opiate safety.
- Create and distribute an educational flyer and counseling guide for use during opiate prescribing visits that addresses OUD risk factors
- Encourage providers to register and use the PDMP.
- Launch education campaign targeting general public and medical professionals.



Promote safe storage and disposal of medications.

- Encourage pharmacies to provide on safe storage and disposal of opioids and other controlled substances
- Increase pharmacy participation in promoting safe storage and medicine disposal.
- Expand access to prescription-take-back programs and collaborate with King County Secure Medication Return to facilitate population wide and pharmacy based education.
- Engage local pharmacies to distribute mail back envelopes with each opiate prescription dispensed.
- Use social media to promote safe storage and disposal of medications.



Leverage and augment existing screening practices in schools and health care settings to prevent and identify opioid use disorder.

- Expand existing school based screening, brief interventions and referrals for substance use.
- Provide professionals with training on opioid use disorders, local resources, and interventions
- Explore opportunities to expand screening to other settings and populations.
- Work with Children's Administration on referral process for high risk youth for substance use disorder treatment.





TREATMENT EXPANSION



Make buprenorphine more accessible and available in communities with the greatest need.



Make treatment on demand available for all types of substance-use disorders.



Alleviate artificial barriers placed upon opioid treatment programs.



Create access to buprenorphine for all people in need of services, in low-barrier modalities close to where individuals live.

- Utilize multiple access points to facilitate buprenorphine induction and maintenance. A hub and spoke model should be utilized to ensure timely induction and ultimate transfer of maintenance services to community providers.
- Centralized client care coordination across the system should be developed to ensure treatment on demand and successful transfer of buprenorphine services.
- A “buprenorphine first” model should be implemented to support induction services and a collaborative care model should be used to support expansion of treatment access.



Develop Treatment on Demand for all Modalities of Substance Use Disorder Treatment Services

- Develop a plan and protocol for all outpatient behavioral health providers in King County to provide “open access” to services.
- Ensure all treatment modalities (including residential and detox beds) are available to achieve treatment on demand for King County residents.
- Develop a plan to address the substance use disorder treatment workforce shortage and to support achievement of treatment on demand, timely and meaningful follow-up, and engagement of individuals seeking treatment.
- Standardize access to continuation of opiate treatment for incarcerated individuals in King County who are booked into jail and already stabilized on medication for treatment of opioid use disorder. Develop a plan to assist individuals incarcerated with untreated opioid use disorder, with direct referrals to a community-based MAT program upon release.
- Develop and implement a plan for establishing and maintaining good neighbor relations.



Alleviate barriers placed upon opiate treatment programs, including the number of clients served and siting of clinics.

- Work to eliminate the state cap on the number of clients at opiate treatment programs.
- Support a call to action for community collaboration in establishing opiate treatment programs and associated supportive and/or complimentary services.
- Work to amend RCW 71.24.585 (Recodified from 70.96A.400) (Opiate substitution treatment – Declaration of regulation by state) to reflect the potential need for long-term MAT as a current standard of care for effective treatment of opioid use disorder.

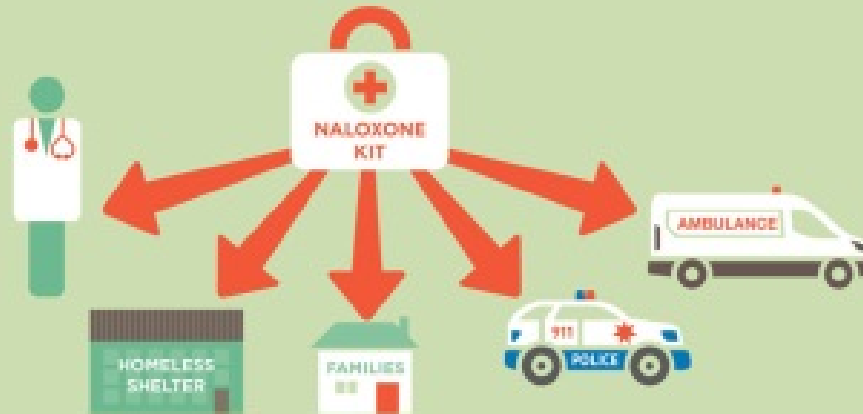




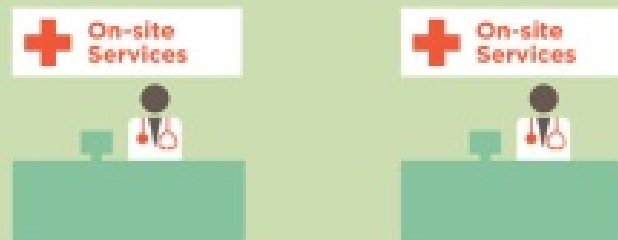
USER HEALTH SERVICES & OVERDOSE PREVENTION



Continue to distribute naloxone kits to reverse the effects of heroin overdose to more locations such as treatment providers, homeless shelters, law enforcement, and first responders.



Create at least two locations where adults with substance-use disorders will have access to on-site services while safely consuming opioids or other substances under the supervision of trained healthcare providers.



Expand distribution of naloxone in King County, WA

- Encourage prescribing of take-home naloxone to those at elevated risk for overdose.
- Expand distribution of take-home-naloxone to individuals using heroin and pharmaceutical opiates and their social networks.
- Evaluate police, fire, Emergency Medical Services (EMS), social/health services staff, schools having naloxone for administration in the course of their work.
- Implement systematic and consistent ways to document naloxone distribution, utilization and disposition.
- Improve communication between stakeholders about practices and protocols related to naloxone distribution.
- Educate the public about opioid use disorder and the Good Samaritan 911 Overdose Law.



Establish, on a pilot program basis, at least two CHEL sites where supervised consumption occurs for adults with substance use disorders in the Seattle and King County region.

- The Taskforce recommends a rigorous evaluation process be integrated into the planning and design of the CHEL program.
- Continue to engage members of the community and potential CHEL clients to inform planning and implementation and ensure the environment and services adequately and appropriately address the needs of clients and the surrounding community.
- Multiple sponsorship frameworks should be considered when CHELs sites are implemented
- CHEL sites should be implemented in areas with geographic concentration of drug consumption and overdose.
- A range of essential and highly desired medical, behavioral health and other supportive services have been identified for inclusion in CHEL site model



What are some possible actions cities can take to address the opioid crisis:

- **School and Community Actions**
- **Health Care System Actions**
- **Policy Actions**



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Actions in Partnership with Schools and Community

- Host a meeting to discuss the issue with your local school board
- Encourage local schools to implement screening and referral protocols
- Encourage local schools to implement opioid education programs
- Host a community conversation in your city
- Broadcast an opioid presentation on your local public access channel
- Build awareness of opioid disorders and treatment through your city's social media outlets



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Actions in Partnership with Health Care Providers

- Provide first responders in your city with Naloxone
- Provide homeless shelters, libraries, treatment providers and others with Naloxone
- Host a drug take back site at your city hall
- Convene a meeting with local health care providers & encourage them to increase buprenorphine access
- Work with local healthcare systems/providers to promote judicious pain medication prescribing and use of the Prescription Drug Monitoring Program (PDMP)



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Policy Actions

- Draft an op ed for your local newspaper
- Make a presentation at a city council meeting
- Include a request for funding for behavioral health treatment in your city's legislative agenda
- Remove barriers to hosting substance use treatment providers in your city legal code
- Entertain a local initiative to assess a community health engagement location site



What will you commit to do?

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