Neighborhood level responses to the opioid crisis

NeighborWorks America
Eskenazi Health
State of Indiana
Southwest Minnesota Housing Partnership
Neighborhood level responses to the opioid crisis

Sarah Norman, director
Healthy Homes & Communities
NeighborWorks® America is a national nonpartisan, nonprofit organization established by Congress. For over 35 years, we create opportunities for people to live in affordable homes, improve their lives and strengthen their communities.

Delivering Knowledge and Expertise

- 360,100 Families assisted with affordable housing
- 21,000 New homeowners
- 154,100 Rental homes owned and/or managed
- 115,000 Customers counseled and educated
- 55,600 Homes repaired
- 2.1 million Customers counseled through the National Foreclosure Mitigation Counseling program since 2008
83% of organizations provide services that unite health, housing, and community development.

NeighborWorks organizations are active in the following areas:
- Healthy Homes: 75%
- Food: 64%

**HEALTHY COMMUNITIES**
A Survey of the NeighborWorks Network

**CONNECTING**
Health Housing & Community

**NeighborWorks® AMERICA**

![Image]

- Health Services: 63%
- Community Engagement: 53%
- Physical Activity: 52%

Data represents responses from 232 NeighborWorks America network organizations.
Responding to the opioid epidemic

Upstream

Midstream

Downstream
Prevention and response: example approaches

- **Phase**
  - Upstream
  - Midstream
  - Downstream

- **Medical**
  - Prescription management
  - Medication-assisted treatment
  - Naloxone: overdose reversal

- **Community development**
  - Community investments
  - Supportive housing; “warm hand-off”
  - Naloxone
Addressing substance use disorder

“Diseases of despair can be exacerbated by community conditions, such as exposure to chronic stress or trauma, lack of housing, or limited economic opportunity. These diseases can be caused by clinical illnesses and traumatic injuries. However, many are derived from the collapse of community support systems that protect residents and foster well-being.

“While we need to expand access to mental health care and treatment and support for those with substance use conditions, we also need to go much deeper to change the community conditions that determine whether communities will thrive or struggle.”

–Benjamin Miller and Larissa Estes, “To Address Opioids And Diseases Of Despair, Communities Must Build Resilience”, Health Affairs
Presenters

• Ashley Overley, Chief Executive Officer
  • Eskenazi Health Midtown Community Mental Health

• Jim McLelland, Executive Director
  • Drug Prevention, Treatment and Enforcement

• Rick Goodemann, Chief Executive Officer
  • Southwest Minnesota Housing Partnership
Responding to the Opioid Crisis

1.24.18 Prosperity Indiana

Ashley Overley, MD
CEO, Eskenazi Health Midtown Community Mental Health
The Opioid Crisis

- What is addiction?
- National problem
- Local problem
- What can we do?
Addiction
Diagnosis
Treatment is effective

Partial Recovery of Brain Dopamine Transporters in Methamphetamine (METH) Abuser After Protracted Abstinence

Normal Control  METH Abuser (1 month detox)  METH Abuser (14 months detox)

Treatment is cost effective

- Average cost of one year of methadone maintenance: $4,700 per person

- Average cost of one year of imprisonment: $18,400 per person\(^3\)

- Methadone treatment has been shown to decrease criminal behavior by as much as 50\%.\(^3\)
An Iatrogenic Epidemic

Parallel trends in overdoses and sales for prescription painkillers in the U.S.
U.S. RATE OF OPIOID-RELATED INPATIENT STAYS AND EMERGENCY DEPARTMENT VISITS

Per 100,000 Population

Inpatient stays

- 136.8 in 2005
- 224.6 in 2014, +64.1%

ED visits

- 89.1 in 2005
- 177.7 in 2014, +99.4%

Source: Agency for Healthcare Research and Quality Center for Delivery, Organization, and Markets' Healthcare Cost and Utilization Project: HCUP Fast Stats, Opioid-Related Hospital Use
Some states have more painkiller prescriptions per person than others.

Number of painkiller prescriptions per 100 people

- 52-71
- 72-82.1
- 82.2-95
- 96-143

Source: IMS, National Prescription Audit (NPA(R)), 2012.
• 1 in 5 Indiana adolescents admit to abusing pills

• Indiana ranks 17th in the nation for overdose deaths
Opioid Epidemic: Marion County

- Marion County has the most overdose deaths and non-fatal emergency room visits due to overdose of any county in the state.
How has Eskenazi Health responded?
Identified Best Practices

• Assess and refine opioid prescribing practices
• Support overdose rescue efforts
• Screen, treat, and monitor opioid use
Refine Opioid Prescribing

• State legislation
• Dr. Palmer Mackie’s Integrative Pain Program
• Epic modifications
Oxycodone/APAP
5/325mg

Rx Count DOWN by 41.2%
From 2012 to 2015

Tablet Count DOWN by 54.1%
From 2012 to 2015
Hydrocodone/APAP
5/325mg

Rx Count DOWN by 60.1%
From 2012 to 2015

Tablet Count DOWN by 65.0%
From 2012 to 2015
Support Overdose Rescue Efforts

Project Point

Planned Outreach, Intervention, Naloxone and Treatment
POINT Goals

• Increase access to Naloxone among high risk patients

• Provide a brief intervention/harm reduction information

• Link people to treatment/services

• Investigate barriers to accessing treatment

• Collect data

• Use data to improve services in the ED and linkage to care
Project Point

OD or Referral → ED Evaluation → Stabilization → ED Brief Intervention and linkage to care → Rapid ED follow-up → Long-term substance (mis)use/MH care
IEMS Naloxone Administration
Naloxone doses delivered by IEMS
Initial Follow Up Data

Percentage of Patients

- Outpatient non-MAT
- Buprenorphine
- Methadone
- Naltrexone
- Inpatient (all Bup)
- Other (no Bup)
Screen, treat, and monitor opioid use

• 3171 North Meridian: Adult and Adolescent
• 38th Street
• Narcotics Treatment Program
• Phoenix Place
• Primary Care: Opioid Learning collaborative
Narcotics Treatment Program (NTP)

- Medical evaluation, prescription, dosing, re-assessment

- Nursing Assessment & Health Screening (TB skin test, pregnancy tests, HIV screening, urinalysis)

- Individual therapy and case management services

- Education, Family treatment, and Sobriety Enhancement Groups
Opioid Learning Collaborative

Goal: Integrate substance abuse services into primary care clinics to better identify and treat problematic opioid use.
Case Study

“David”

63 year old white male
40 year history of opioid abuse
Over 10 years of incarceration d/t heroin use
Using 2 grams of heroin per day, about $100 per day prior to entering treatment
Unable to maintain employment
“I would rather die than go through withdrawals”
Success

• Seen for unrelated medical issue initially, referred to Dr. Mark Tiritilli and Ryan Martin
• Started suboxone within one week of presenting to PCP
• Currently has been in treatment 9 months with no positive UDS
• Steady full-time employment
• Reconciling with family
• Has thanked Dr. Tiritilli for “giving me my life back”
Jim McLelland
Executive Director
Drug Prevention, Treatment, and Enforcement
State of Indiana
Solace Apartments
Ending the Cycle
Prosperity Indiana Conference
Southwest Minnesota Housing Partnership

- **Mission** – Create thriving places to live, grow & work through partnerships with communities
  - Provide healthy quality housing
  - Identify & respond to community need
  - Seize opportunities to innovate & lead
- **Our People** – 27 staff/12 board
- **Our Results (since 1992)**
  - 9,050+ (housing units developed or preserved)
  - $618 mm in direct investments
  - 6,500+ (education – financial lit, homeownership)
Southwest Minnesota Housing Partnership

Service Area Map
Saint Peter, MN
Quick Facts

Population 11,570
(2014 Census)

- Nicollet County Seat
  (intended MN capitol)
- Gustavus Adolphus College
- Minnesota Regional Treatment Center
- River’s Edge Hospital & Clinic

City Motto:
"Where History & Progress Meet"
Genesis of Solace Apartments

- Drug Court
- Housing Market Conditions
- Direct Costs to Stakeholders
- Societal Impacts
- Co-occurring disorders – Need for intensive Services
Community Partnership

Solace Committee

- Three-year planning process
- Formed by Initial Partners
  - Drug Court
  - Nicollet County H&HS
  - SWMHP
  - ASC Psychiatric Services
- Held meetings throughout planning process

Solace Committee Members

- City of St. Peter (Administrator/Council)
- Nicollet County (Commissioner)
- Probation
- County Prosecutor
- Defenders Office
- School District
- Public Health
- Hospital (Administrator)
- Drug Court Graduate
- Property & Asset Management Staff
Solace Objectives

- Break recidivism cycle
- Housing First Model (stable housing)
- Targeted Pop. (women exiting criminal justice – family reintegration)
- Provide integrated behavioral & medical treatment
- Provide comprehensive family oriented services
- Enhance target population health insurance & other benefits
- Training & education – point of contact agencies
Solace Services Plan

**Services**
- Services Navigator
- Housing Supports (RA)
- MH Assessment
- Family/child Assessment
- CD Assessment
- Case Management (ARMHS)
- Medical Assessment
- Health Education
- Transportation
- Front desk

**Service Providers**
- SWMHP (Navigator/Hsg Supports)
- Horizon Homes (case man)
- ASC (mental health & fam/child)
- New Beginnings (chemical dep)
- St. Peter Clinic/Open Door (FQHC)
- Nicollet County Public Health
- St. Peter public transportation
- Lloyd Management
Schematic Site

- 1 apartment + common building
- Central “core” for community and supportive service spaces
- Outdoor play space and equipment - fenced for security
- 50 parking spaces
Solace Supportive Housing

“Ending the Cycle” – Community for families and individuals beyond incarceration.
Capital Structure

30 unit Supportive Housing Development
TDC $7,201,182

- Private Activity Bonds/4% LIHC (MN HFA Issuer)
- HOME
- National Housing Trust Funds
- Greater Minnesota Housing Fund (McKnight Foundation)
- SWMHP (NeighborWorks America)
- City of St. Peter – Site & tax increment financing
- Nicollet County – Housing Supports (GRH)
- Minnesota Equity Fund (Investor)
Conclusions

- This is a community issue that requires community solutions
- The system is incredibly siloed & incredibly complex
- Barriers
  - Rural Support Services
  - Issues were raised around the Olmstead Decision
  - Financing - development/intensive services support
  - Population is difficult to house for a reason
  - Property & services (managing off-setting objectives)
  - Security provision/cost
- NIMBY