

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



Working Together for Strong Communities®

NeighborWorks®
AMERICA

NeighborWorks® America

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



Food

• HEALTHY COMMUNITIES •
A Survey of the NeighborWorks Network

Exponential Impact



NeighborWorks.org/healthycommunities

Data represents responses from 232 NeighborWorks America network organizations



Health Services

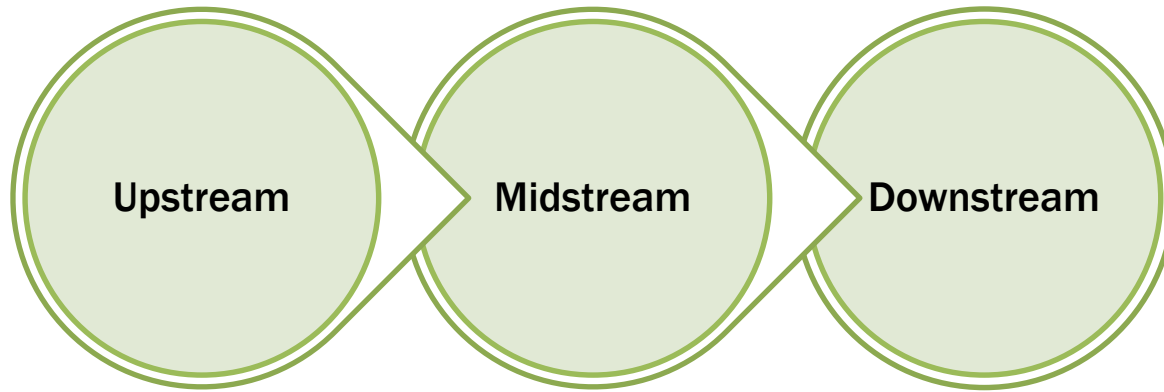


Community Engagement



Physical Activity

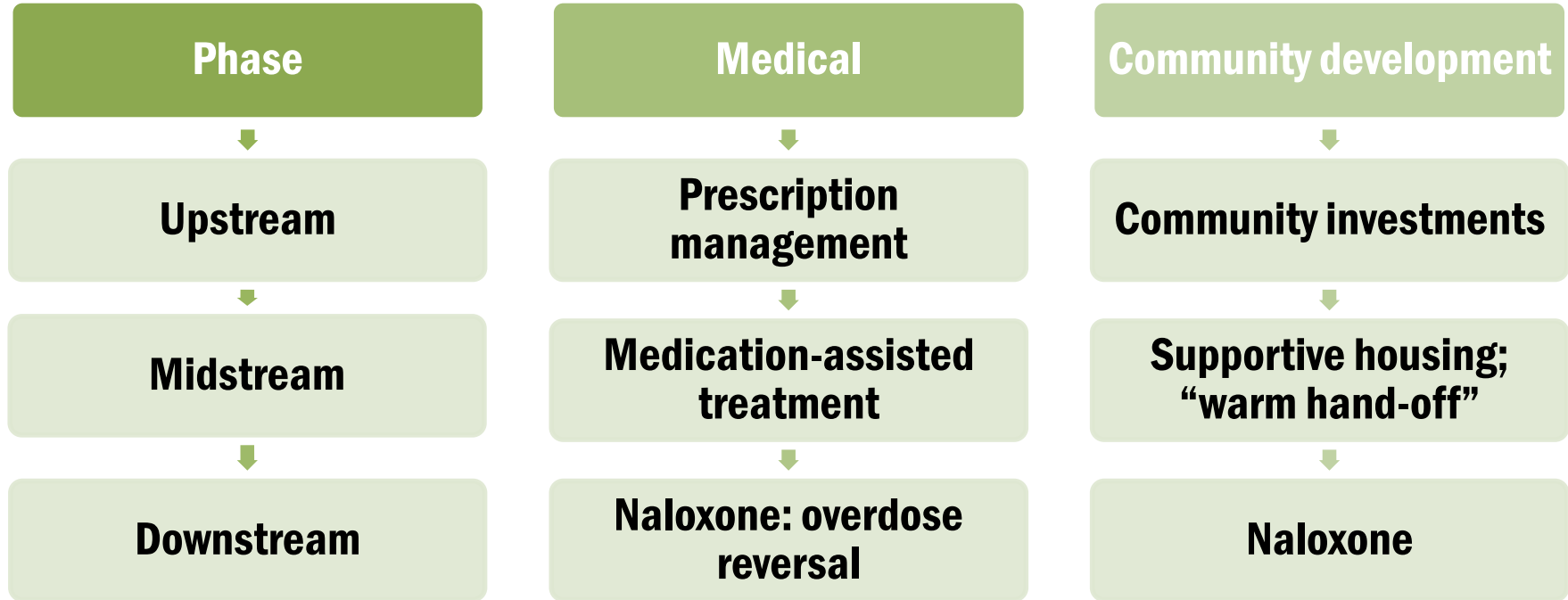
Responding to the opioid epidemic



Working Together for Strong Communities[®]

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Prevention and response: example approaches



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

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- 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



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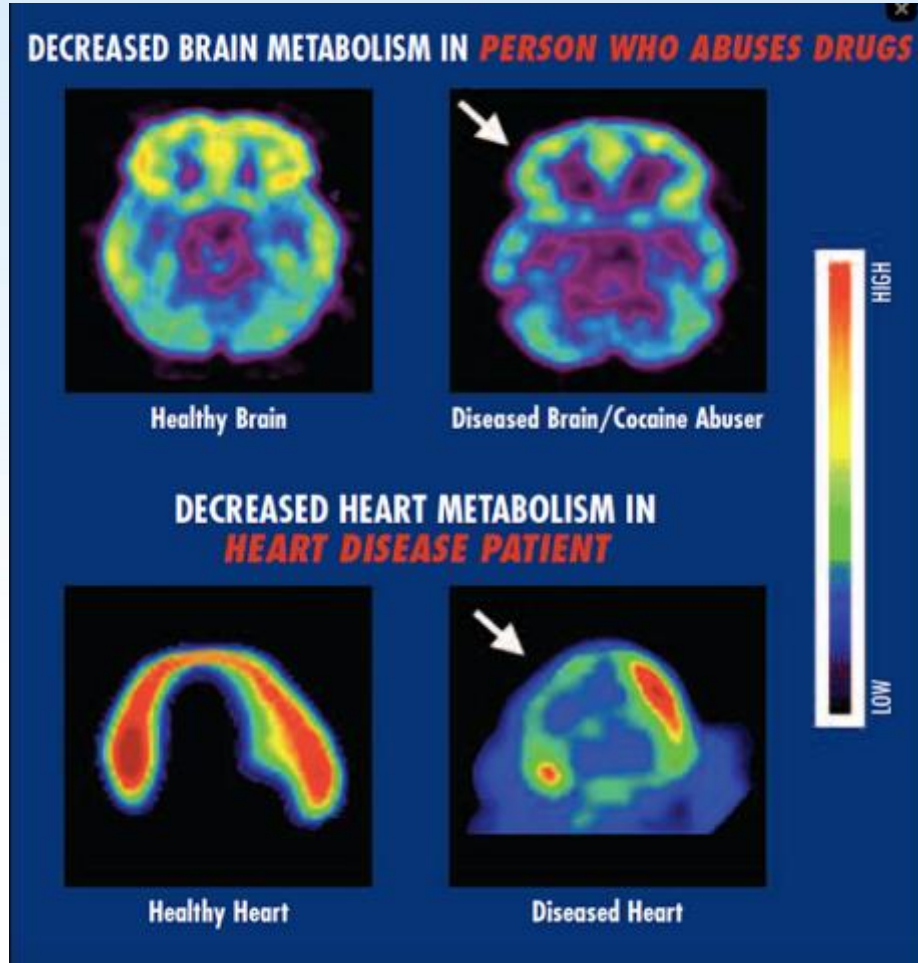
The Opioid Crisis

- What is addiction?
- National problem
- Local problem
- What can we do?



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HEALTH.

Addiction





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HEALTH.

Diagnosis

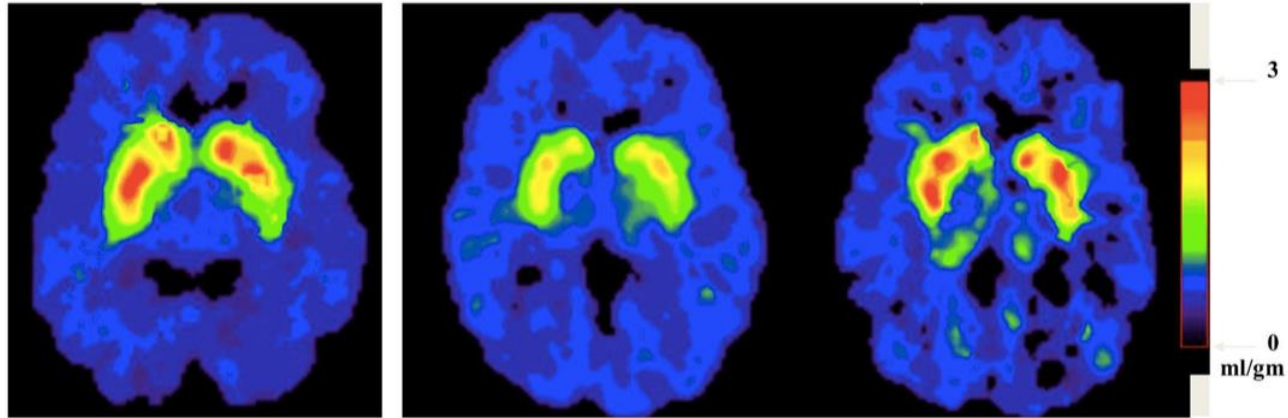




ESKENAZI
HEALTH.

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)

Source: Volkow, ND et al., *Journal of Neuroscience* 21, 9414-9418, 2001.



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HEALTH.





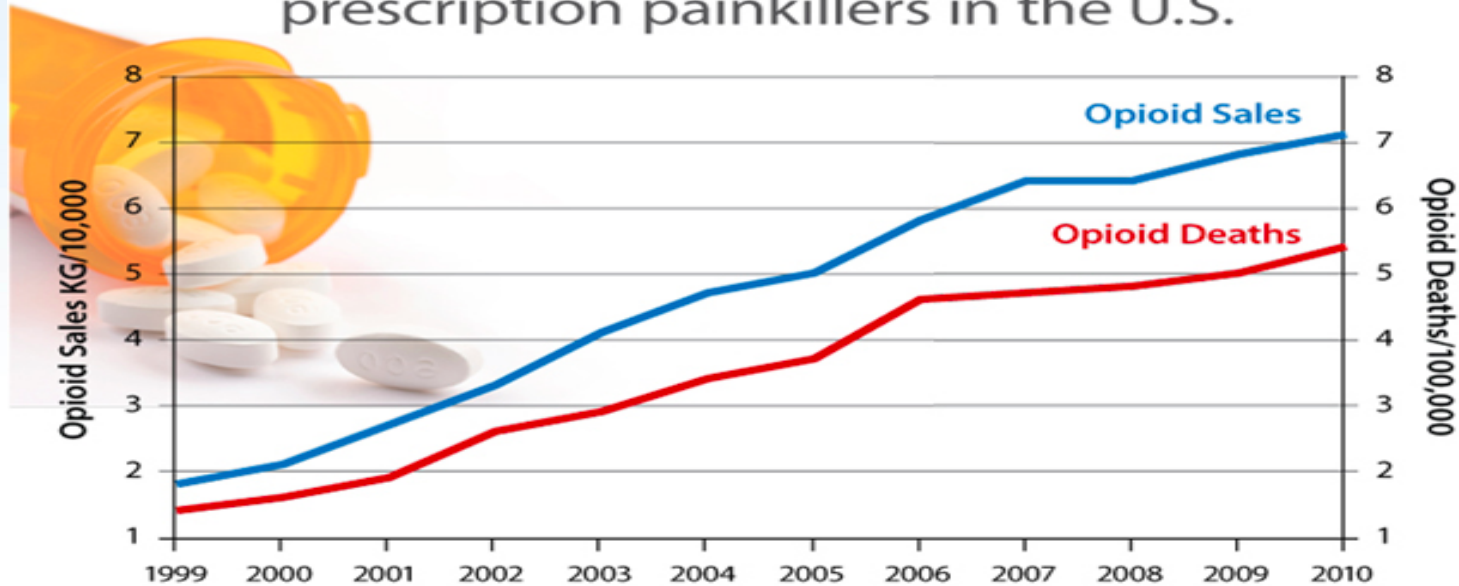
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HEALTH

Treatment is cost effective

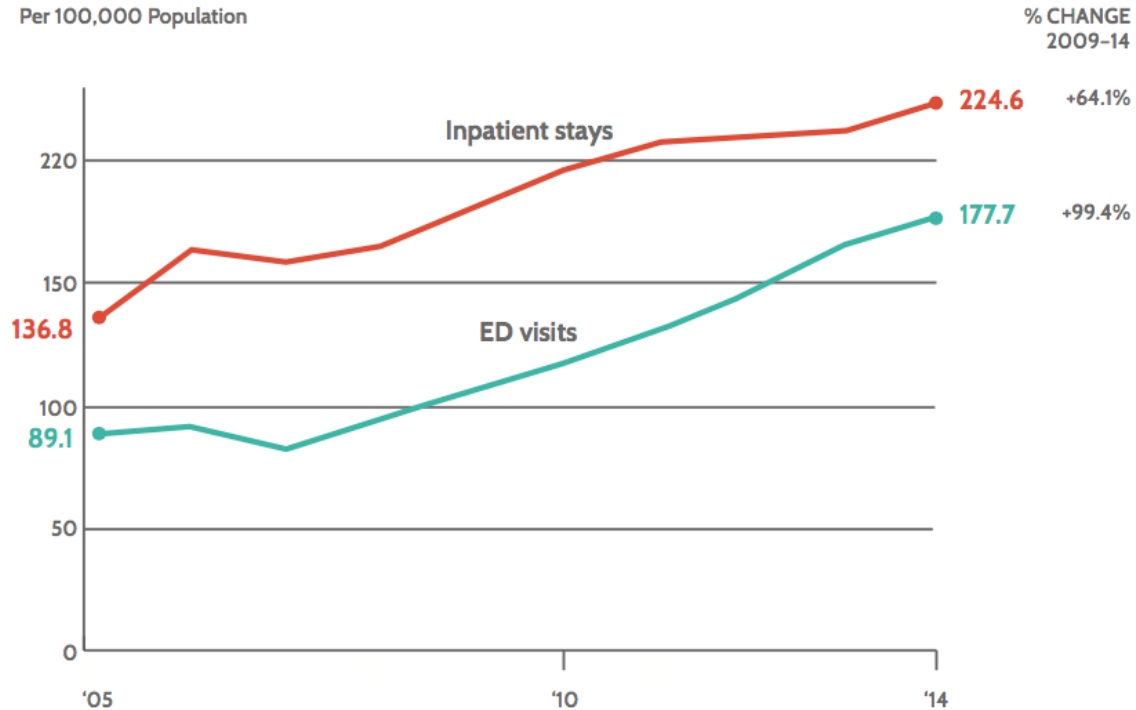
- Average cost of one year of methadone maintenance: \$4,700 per person
- Average cost of one year of imprisonment: \$18,400 per person³
- Methadone treatment has been shown to decrease criminal behavior by as much as 50%.³

An Iatrogenic Epidemic

Parallel trends in overdoses and sales for prescription painkillers in the U.S.

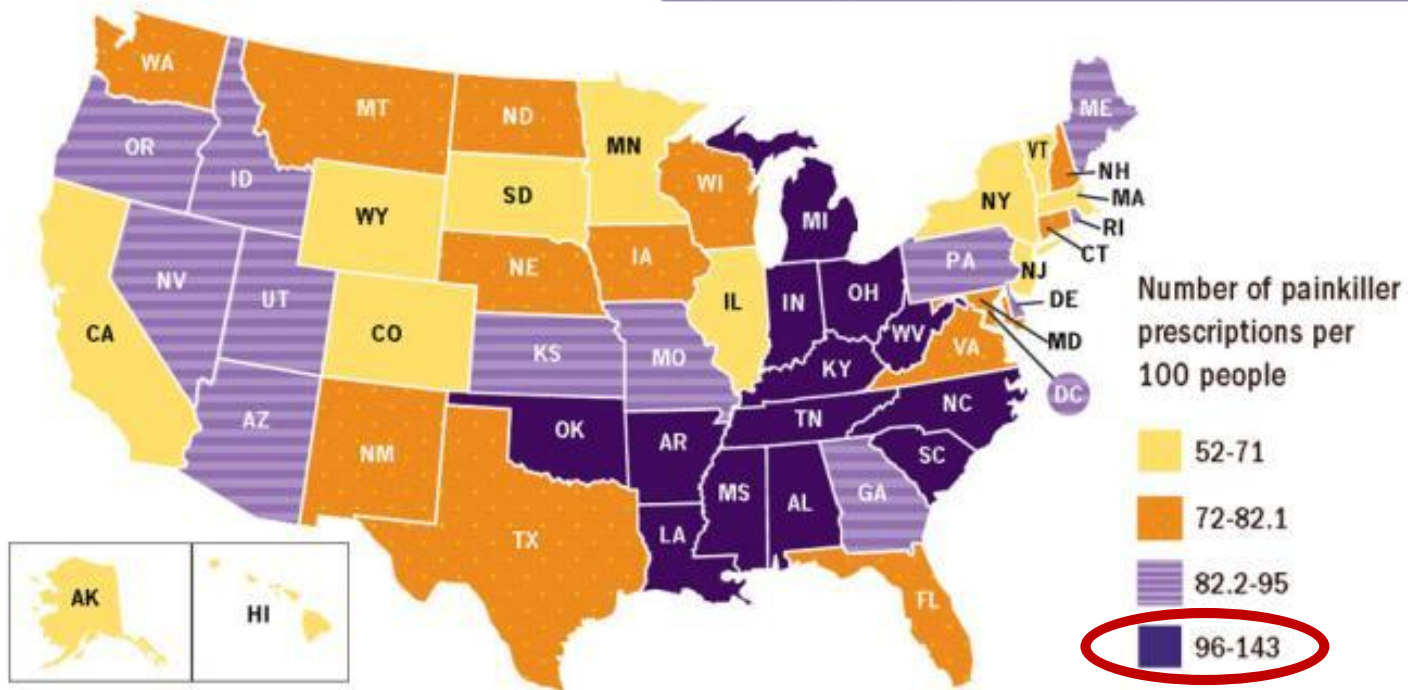


U.S. RATE OF OPIOID-RELATED INPATIENT STAYS AND EMERGENCY DEPARTMENT VISITS



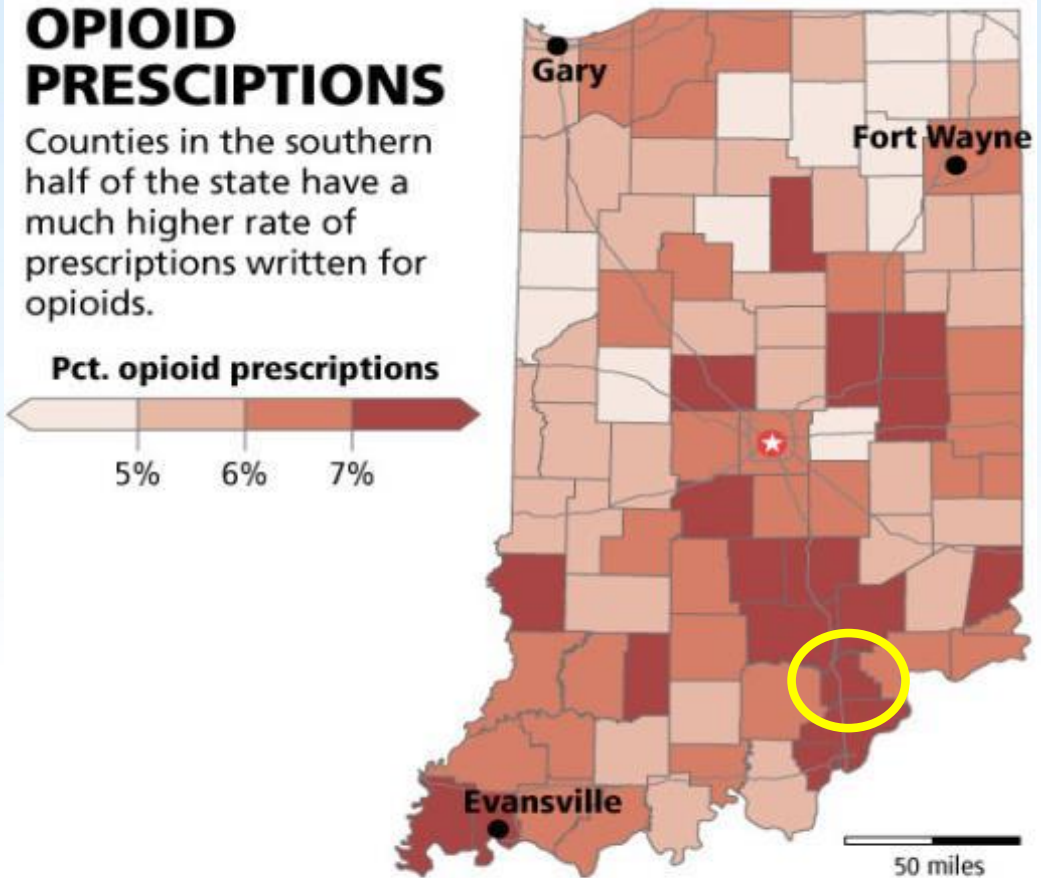
Source: Agency for Healthcare Research and Quality Center for Delivery, Organization, and Markets' Healthcare Cost and Utilization Project: HCUP Fast Stats, Opioid-Related Hospital Use

Some states have more painkiller prescriptions per person than others.



SOURCE: IMS, National Prescription Audit (NPA™), 2012.

- 1 in 5 Indiana adolescents admit to abusing pills
- Indiana ranks 17th in the nation for overdose deaths



SOURCE: Centers for Medicare & Medicaid Services

STEPHEN J. BEARD / INDYSTAR

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

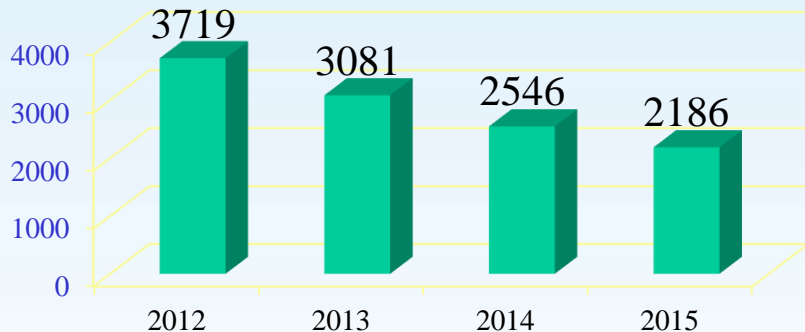
Refine Opioid Prescribing

- State legislation
- Dr. Palmer Mackie's Integrative Pain Program
- Epic modifications

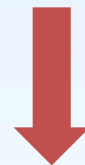
Oxycodone/APAP

5/325mg

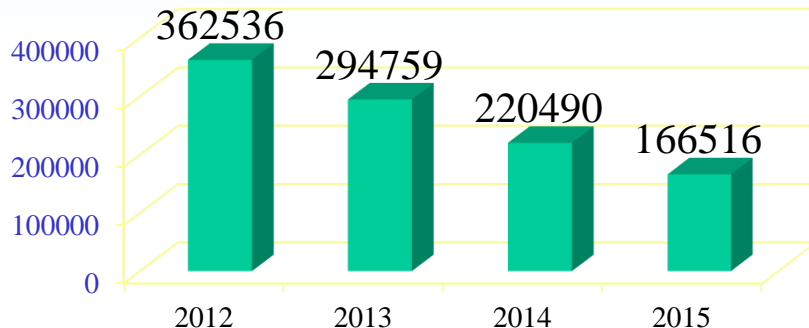
Rx Count



Rx Count DOWN by
41.2%
From 2012 to 2015



Tablet Count

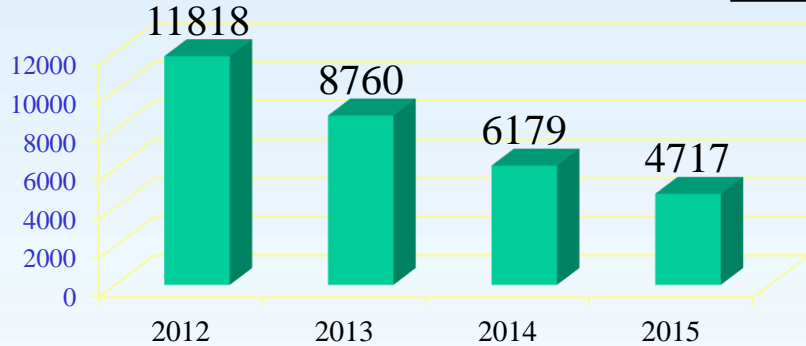


Tablet Count DOWN by
54.1%
From 2012 to 2015

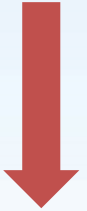


Hydrocodone/APAP 5/325mg

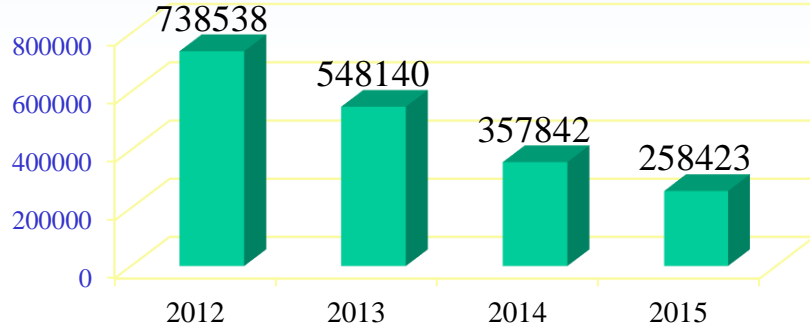
Rx Count



Rx Count DOWN by
60.1%
From 2012 to 2015



Tablet Count



Tablet Count DOWN by
65.0%
From 2012 to 2015



Support Overdose Rescue Efforts

Project Point

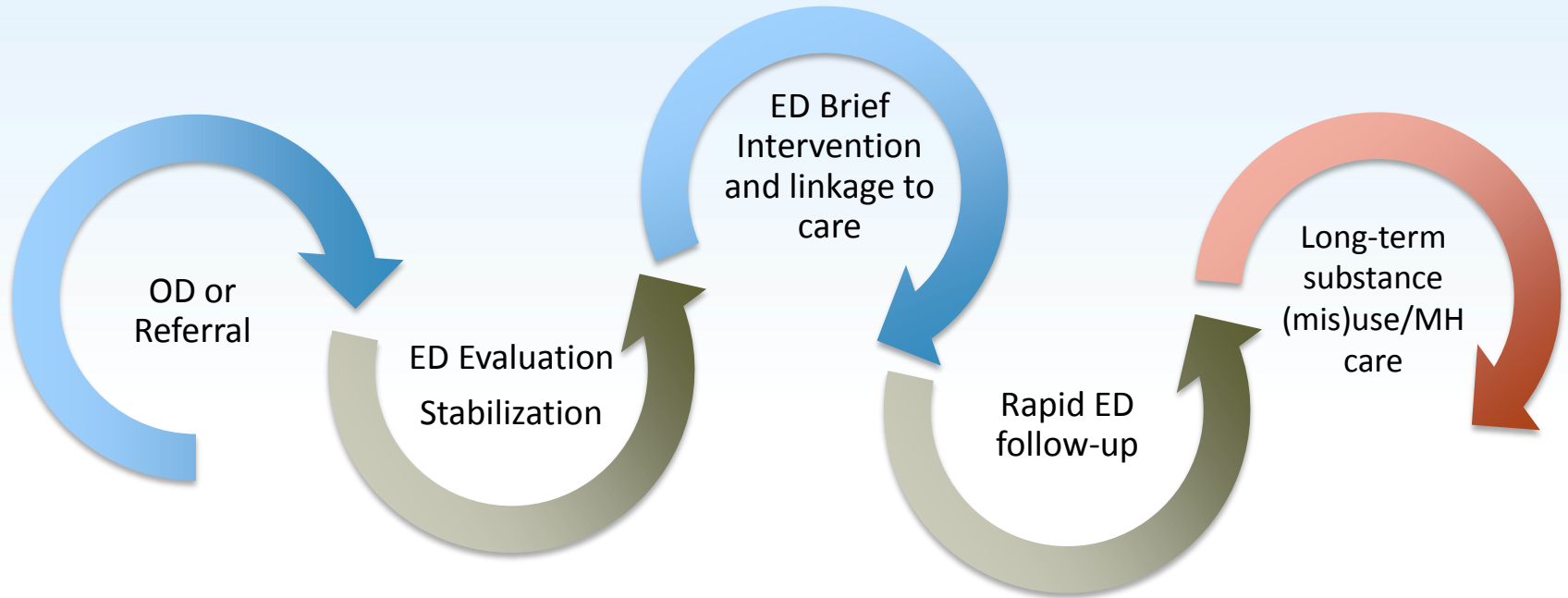
Planned **O**utreach, **I**ntervention, **N**aloxone and **T**reatment



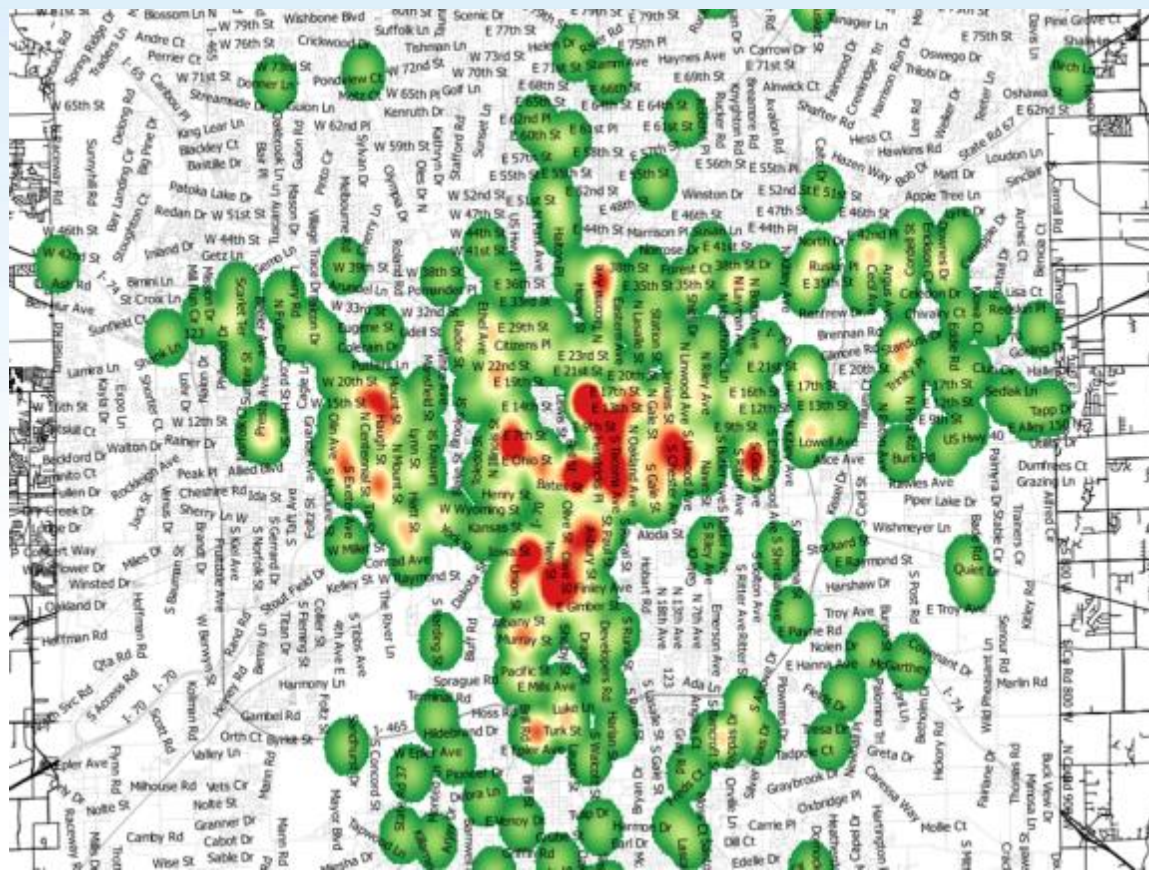
POINT Goals

- 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

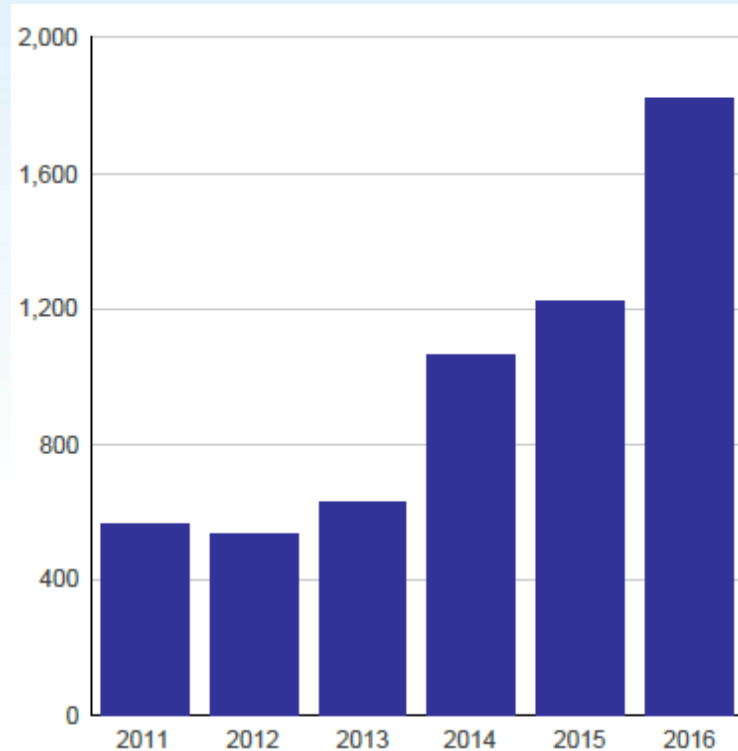
Project Point



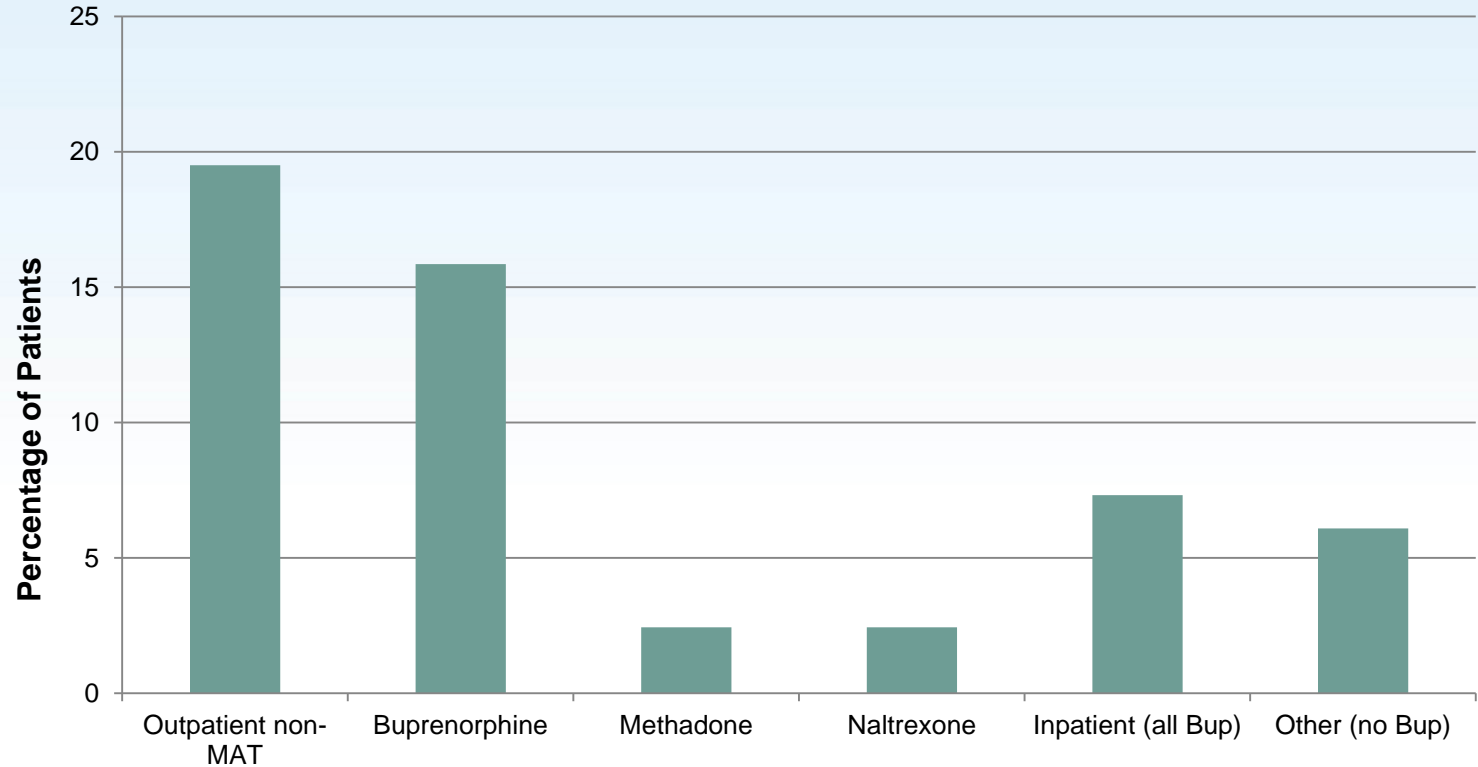
IEMS Naloxone Administration



Naloxone doses delivered by IEMS



Initial Follow Up Data



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**

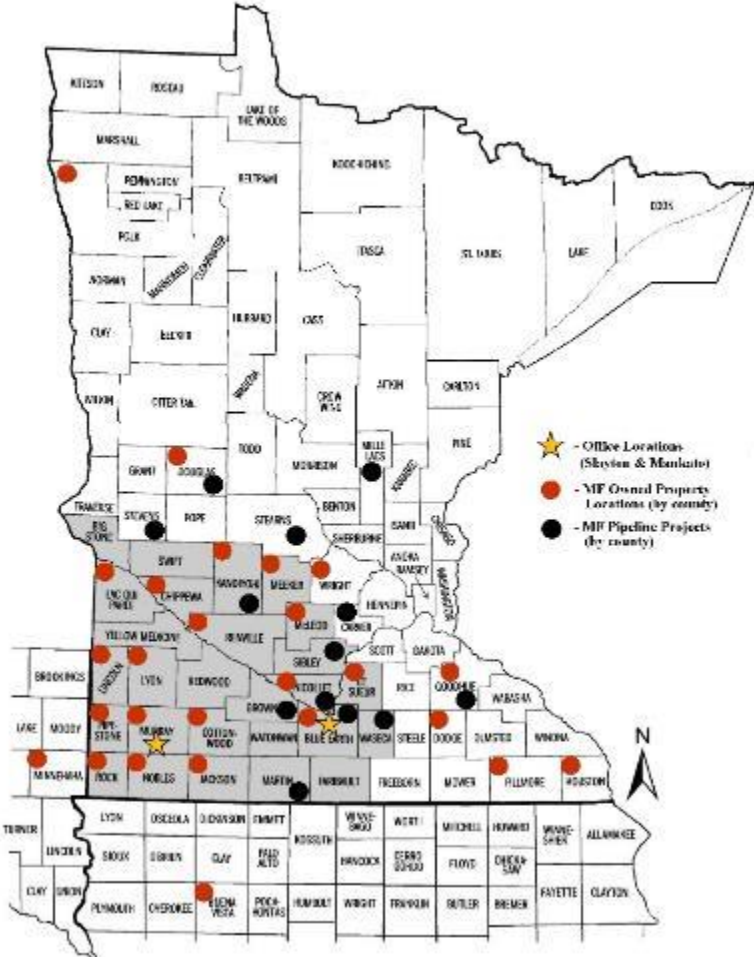
Prosperity Indiana Conference

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



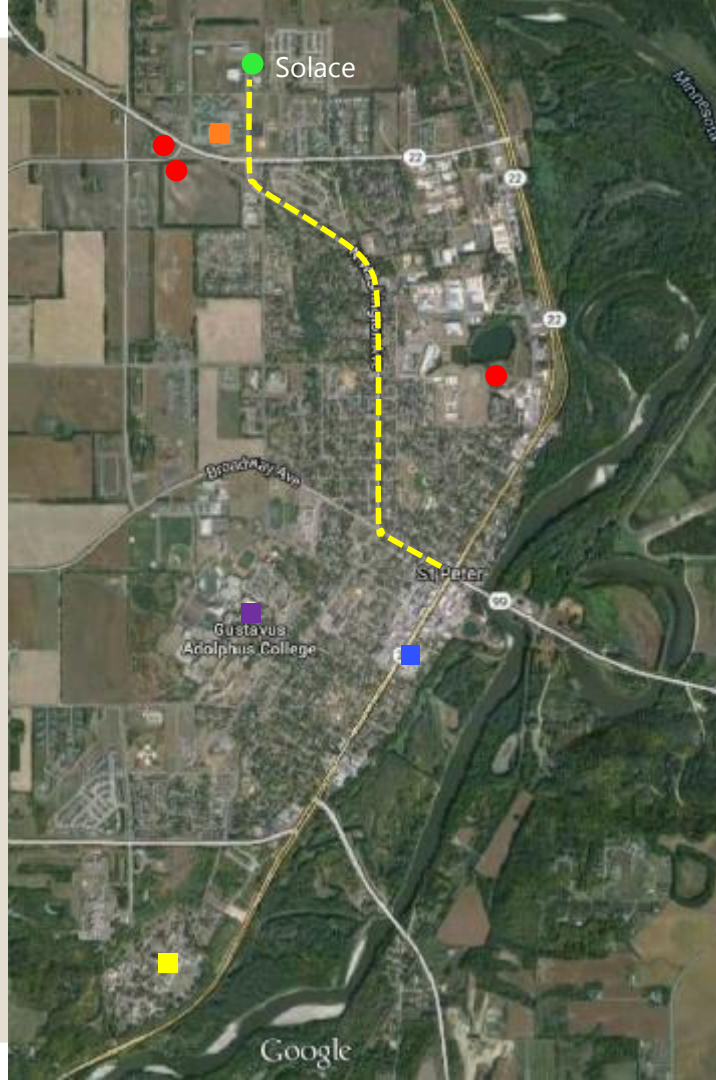
Saint Peter, MN

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.



Southwest Perspective



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