

2020 PLAN



**COLUMBUS & FRANKLIN COUNTY
ADDICTION PLAN**

Bridging the Gap for Opiate & Drug Addiction Recovery

A MESSAGE FROM THE COLUMBUS HEALTH COMMISSIONER

Addiction is a chronic, relapsing brain disease that people neither choose nor want. Yet every day, moms and dads, sons and daughters, friends, neighbors and colleagues are taken from their loved ones and our community by addiction. Their loss is our loss. And we are committed to addressing this public health crisis so that we can help those who are addicted and prevent people from becoming addicted in the first place. Columbus Public Health is proud to lead the Columbus and Franklin County Addiction Plan to guide our efforts. Together with our partners, we are working to stabilize the crisis in the short term, while offering important long-term prevention strategies that will decrease drug overdoses, death and the spread of infectious diseases. And for the first time, we will measure our success so we will know how our community is doing along the way. Addressing this crisis requires a sustained, collaborative effort from all of our partners and we are in it for the long haul so that no other family or community has to suffer. The Columbus and Franklin County Addiction Plan is our roadmap to meet the changing needs of the opiate crisis and offer the best solutions for our community.

Best of Health,



Mysheika W. Roberts, MD, MPH
Health Commissioner



A MESSAGE FROM THE MAYOR

Our country is facing an opioid addiction crisis, and our community has been particularly hard hit. Ohio has one of the highest opioid death rates in the country, and each death leaves behind an empty seat at the dinner table and a permanent gap in our community. Opioid addiction also has a ripple effect. More kids than ever before are now in the foster care system due to parental drug use. The word “crisis” is not an exaggeration, and the solution is not simple. But we are committed to doing whatever it takes to help those with the disease of addiction, their families and neighborhoods. The Columbus and Franklin County Addiction Plan is our community’s comprehensive approach to attacking this problem and we are proud to play a role. The new plan has a cross section of interventions and measurable outcomes for collective impact on this crisis and it will guide our work in the coming years. We have a long way to go in the fight against addiction. But I believe in the work we are doing and am encouraged by the commitment of our partners and community.

Sincerely,



Mayor Andrew J. Ginther



A MESSAGE FROM THE FRANKLIN COUNTY BOARD OF COMMISSIONERS

Opiate addiction is the greatest public health crisis in the United States today. Communities across the nation are working collaboratively to decrease drug overdoses, expand addiction treatment and stabilization services, prevent overdose deaths, and reduce the spread of infectious disease by strengthening safe exchange efforts. The Columbus and Franklin County Addiction Plan meets these challenges head-on with measured strategies and interventions, prevention and treatment plans, equitable access and care, prevention education, and strong data collection that informs our best practices model and will help direct our efforts for years to come. The scope of this crisis can be overwhelming, but with determination and collaboration our community can overcome all obstacles. We continue to stand shoulder to shoulder with those affected by this crisis and will do all we can to help our families and neighbors stabilize, rebuild and prosper.

Sincerely,



Marilyn Brown, President 2019
Franklin County Board of Commissioners



BACKGROUND

Like cities all across the country, our community is in the midst of an opiate epidemic. Despite our best efforts at the local, state and national levels, addiction rates remain very high. In 2017, 48,861 drug overdose deaths nationwide involved opioids, and in Franklin County during that same period, 388 overdose deaths involved opioids. Preliminary data for Franklin County from 2018 indicate that 424 overdose deaths involved opioids. The overprescribing and abuse of opioids is traumatizing the entire community, resulting in death, injuries, infectious disease, increased runs by first responders, long periods of hospitalization, and unquantifiable loss felt by those who are addicted to these drugs, as well as their families and neighbors.



WHERE WE STARTED

2017-2019: The Original Franklin County Opiate Action Plan

In 2017, the City of Columbus, Franklin County and community partners created the Franklin County Opiate Action Plan in response to the opiate crisis, to stabilize the issue in the short term while offering important long-term prevention strategies. The plan—which was developed collaboratively and with input from community stakeholders—was structured around four areas to guide our work:

PREVENTION AND EDUCATION

Educating the community about the risks of early drug use and the addictive nature of prescription medications, including providing individuals and families with alternative methods for dealing with pain, stress and life challenges.

TREATMENT

Providing immediate access to treatment for people living with substance use disorder, as well as expanding access to and decreasing wait time for treatment.

HEALTHCARE AND RISK REDUCTION

Reducing the number of opiate-related deaths (and the spread of infectious disease) by helping the community understand the risks of using prescription pain medication, and encouraging doctors to identify substance use disorder at an early stage, as well as offer alternatives for pain management.

LAW ENFORCEMENT AND FIRST RESPONDERS

Ensuring all emergency personnel and first responders are equipped to quickly and effectively respond to an opiate overdose.

HOW DID WE GET HERE?

Many social factors, like poverty and trauma, can increase a person's risk of becoming addicted to a substance—but three major factors have caused the country's opiate problem to shift to a crisis:

Misuse and abuse of prescription drugs: Drug abuse can happen when a person misuses, illegally obtains or becomes addicted to a prescription.

Resurgence of heroin: As prescription pain pills became more difficult to get with the crackdown on pill mills and overprescribing, people turned to heroin, which is cheaper and easier to get.

Synthetic opiates such as fentanyl and carfentanyl: Although heroin use and fentanyl are not new, the scale of the problem has increased dramatically, particularly due to the increasing prevalence of fentanyl which is now being put in all street drugs, sometimes without the user's knowledge.

MOVING FORWARD IN 2019 & BEYOND

The Columbus & Franklin County Addiction Plan

As the opiate epidemic evolved, the City of Columbus and Franklin County developed the second generation of the plan to cover all types of substances that lead to addiction, as both national and local statistics continue to show that many illicit drugs contribute to unnecessary death. To support this work, the plan was renamed the Columbus and Franklin County Addiction Plan (CFCAP) in February 2019, and — with input from experts in the field of addiction, mental health, public health, community outreach and public safety — clarified its objectives, tactics and goals to address the changing landscape of addiction in our community.

GOALS

The goals of the Columbus & Franklin County Addiction Plan represent the gains we expect to see as a result of our work along with measures of success.

OBJECTIVES

The objectives of the Columbus & Franklin County Addiction Plan establish the focus areas of our work.

INTERVENTIONS

The intervention areas of the Columbus & Franklin County Addiction Plan help organize our objectives into concrete actions and activities.



GOALS

The goals represent the gains we expect to see per year as a result of our work along with measures of success.

GOAL 1:

Decrease drug overdoses by 15% as measured by EMS runs and emergency department visits for suspected overdoses.

- ⬆️ Increase the **number of naloxone trainings** by 100%.
 - ⬆️ Increase the **number of people that receive overdose prevention education** by 30%.
 - ⬆️ Increase the **number of naloxone doses distributed** by 30%.
 - ⬇️ Reduce the **number of doses of opioid and stimulants dispensed per patient**.
 - ⬆️ Increase **incentivized program** through county network of care that offers same-day, immediate admission to treatment.
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GOAL 2:

Decrease drug overdose deaths by 15%.

- ⬆️ Increase the **number of overdose reversals** by 20%.
 - ⬆️ Increase **naloxone administration by first responders** to overdose victims by 20%.
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GOAL 3:

Decrease incidence of blood borne infectious disease, such as hepatitis C, by 10%.

- ⬆️ Collect 20% more **syringes for safe disposal**.
- ⬆️ Distribute 20% more **sanitized drug prophylactic instruments**.
- ⬆️ Increase **testing for hepatitis C** by 20%.

OBJECTIVES

The objectives establish the focus areas of our work.

PREVENTION EDUCATION

Provide prevention education to both consumers and prescribers.



SCHOOLS & COMMUNITY CENTERS

Increase education programming in schools and community centers.



ENSURE EQUITY & INCREASE CAPACITY

Ensure equity of access and care, and increase treatment capacity.



DECREASE STIGMA

Decrease stigma surrounding substance abuse.



PREVENTION EFFORTS

Conduct prevention efforts using data trends that reduce overdoses surges and anomalies.



INTERVENTIONS

The intervention areas help organize our objectives into concrete actions and activities.

POPULATION INTERVENTIONS

HEALTH EQUITY INTERVENTIONS

HEALTH SYSTEM INTERVENTIONS

POPULATION INTERVENTIONS

Using community resources and programming to provide substance use disorder education

- Provide community education and primary prevention services to local schools and the community through outreach services that encourage parents, patients and caregivers to:
 - Build resiliency and protective factors for youth.
 - Dispose of unused and expired medications (with the provision of Detera bags from the Ohio Opioid Education Alliance).
 - Participate in Drug Take Back events to safely dispose of drugs.
 - Use drug drop off boxes in community locations to safely get rid of drugs.
 - Advocate for alternative treatment methods for pain management and healing.
 - Engage in conversations about substance abuse and the negative consequences that can ultimately cause death.
- Increase the number of schools and community centers where prevention education programming occurs by 10%.
- Conduct 10 community events annually, focused on secondary prevention efforts for prescribers and patients/caregivers (such as incentivized programming that asks patients and caregivers to sign a wellness contract to agree to ask three questions prior to accepting a new prescription).
- Continue to support Tobacco 21 programming as tobacco can create a pathway of addiction and gateway to other drug use.
- Increase access to naloxone for individuals in need with special attention on disenfranchised populations, including victims of human trafficking, LGBTQ+, people of color and the homeless population.
- Continue to monitor overdoses and other indicators of the opiate crisis through the Opiate Overdose Surge Notification Process (OOSNP).

OPIATE OVERDOSE SURGE NOTIFICATION PROCESS

Monitors overdoses in the community and reports quarterly key metrics to the Core Principal Committee.

Columbus Public Health, EMS, law enforcement, hospital systems and the coroner's office monitor their internal thresholds to determine if an opiate overdose surge has been met or exceeded.

If a surge has occurred, all partners join a conference call to discuss what might be causing the increase in overdoses and to determine an appropriate plan of action and response to protect the community.

INTERVENTIONS, continued

HEALTH EQUITY INTERVENTIONS

Ensuring everyone has access to care, treatment and recovery support

- Establish a neighborhood center that can provide comprehensive support and care for individuals seeking treatment and families seeking support.
- Provide culturally appropriate messaging on the harms of alcohol and substance use to communities disproportionately targeted by the alcohol industry.
- Maintain and enhance the comprehensive and sustainable syringe exchange system Safe Point at Equitas Health.
- Decrease disparities among community members being referred to the specialized docket programs.
- Improve access to care by holding quarterly “walk-in” events in high-overdose communities to provide wound care, immunization, assessments and linkage to immediate treatment services (led by Columbus Public Health, Franklin County Public Health, OhioHealth, Ohio State University Hospitals, Mt. Carmel Hospitals and local treatment agencies).
- Engage and educate homeless service and shelter providers about the disease of addiction.
- Provide education on adverse childhood experiences, trauma, mental health and substance use to decision makers and community leaders, including police departments, courts and human services organizations via an annual conference.
- Increase the training opportunities, development and implementation of recovery support programs.



INTERVENTIONS, continued

HEALTH SYSTEM INTERVENTIONS

Supporting health care providers and institutions in addressing addiction

- Work with and educate medical providers on the correlation between high-risk prescribing and substance use disorder with the utilization of health ambassadors at continuing medical education and community events.
- Reduce high-risk prescribing through the use of Health Ambassadors at community events.
- Assess and encourage health care organizations to adopt medication screening and prescribing guidelines.
- Increase availability of medication-assisted treatment (MAT) for substance use disorder from emergency departments to treatment in order to ensure continuity of care.
- Reduce alcohol and illicit drug use before, during and after pregnancy.
- Develop a system of care for mothers in recovery and infants with neonatal abstinence syndrome (NAS), up to two years post-birth.
- Provide education on adverse childhood experiences, trauma, mental health and substance use to healthcare providers via membership associations, state licensing board and local hospital association.
- Provide harm reduction education and medication-assisted treatment (MAT) for substance use disorder in jails.



PROGRAM HIGHLIGHTS

WOW: The first ever Week of Walk-ins (WOW) was a series of free, walk-in clinics led by Columbus Public Health and Franklin County with the help of community partners to offer resources—such as fentanyl test strips, naloxone training, hepatitis A vaccination, and medication-assisted treatment (MAT)—to residents in seven neighborhood locations. The event brought treatment options and critical services to people with the disease of addiction right where they live and work, to protect their health and improve their lives.

ADAMH INCENTIVE: Incentivize ADAMH network providers to offer same-day, immediate admissions to treatment. In consultation with community behavioral health providers, develop procedures to incentivize and increase access to same-day treatment.

COLUMBUS CITY ATTORNEY: Columbus City Attorney Zach Klein's Prosecutor Diversion Program focuses on addressing social determinants of health barriers. Candidates' needs are assessed and then they are linked to services, including substance use disorder and/or mental illness treatment, food pantries, government benefits, and employment or education services. Upon successful completion of the program, the prosecutors ask the court to dismiss the criminal case and agree to have the record sealed.

SAFE POINT: Safe Point is a comprehensive harm reduction program at Equitas Health to reduce the negative consequences of drug use, reduce the overall level of drug consumption, and help prevent new HIV and other blood-borne infections. The program offers syringe exchange; naloxone training; HIV, hepatitis C and STI testing and care; and linkage to intervention (treatment and counseling).

HOPE TASK FORCE: The Heroin Overdose Prevention and Education (HOPE) Task Force combats the addiction epidemic through enforcement, education and prevention. Experienced narcotics and homicide detectives treat opiate overdose scenes as crime scenes and investigate the source of the supply that caused the overdose. The HOPE Task Force also collaborates with community providers and organizations to refer those with substance use disorders to treatment.

RREACT: The Rapid Response Emergency Addiction and Crisis Team (RREACT) of the Columbus Department of Public Safety is a multi-disciplined team housed under the Columbus Division of Fire. Firefighters/paramedics, Crisis Intervention Trained (CIT) police officers from the Columbus Division of Police, and social workers from community agencies provide linkage to treatment and conduct follow-up community outreach with victims of drug overdose.



ACCOMPLISHMENTS

January 2017-December 2019

OVERDOSE PREVENTION

- 1,928 people received overdose prevention education
- 1,695 naloxone kits distributed via partnership with Columbus and Franklin County Public Health, and the Franklin County Alcohol, Drug and Mental Health Board for Project DAWN (Deaths Avoided with Naloxone)
- 374 lives saved from opiate overdoses due to naloxone administration
- 6 community overdose prevention trainings provided

SYRINGE AND SUPPORT SERVICES AT SAFE POINT

- 2,357 participants received support services
- 5,896 clinic visits during 108 program days
- 770,668 new syringes provided
- 280,219 syringes returned for safe disposal
- 7,426 sharps containers distributed
- 1,795 people referred to substance use treatment services

TREATMENT

- Opening of Maryhaven Addiction Stabilization Center, resulting in 7 additional beds for triage, 20 beds for detoxification and 30 beds for residential treatment

CRIMINAL JUSTICE

- Implemented a Medication Assisted Treatment program in the Franklin County Municipal Court
- 637 people transported to referral partners through Safe Station



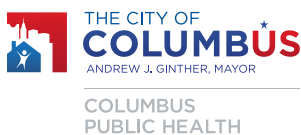
FREQUENTLY USED TERMS

Naloxone (Narcan): A medication that can be used to reverse narcotic overdose.

Medication-Assisted Treatment (MAT): A medication that prevents relapses into alcohol or drug abuse.

Deterra bag: A system to safely deactivate unused drugs for safe disposal.

Substance use disorder: A disease that affects a person's brain and behavior and leads to an inability to control the use of a legal or illegal drug or medication.



The Columbus and Franklin County Addiction Plan is a collaborative community effort led by Columbus Public Health to address the opiate crisis in central Ohio. Through targeted interventions and innovative programs, the plan works to decrease overdoses, overdose deaths and the spread of infectious diseases. Learn more at www.columbus.gov/CFCAP.