

# INGHAM OPIOID ABUSE PREVENTION INITIATIVE STRATEGIC PLAN

PREPARED BY:  
INGHAM COUNTY  
HEALTH  
DEPARTMENT

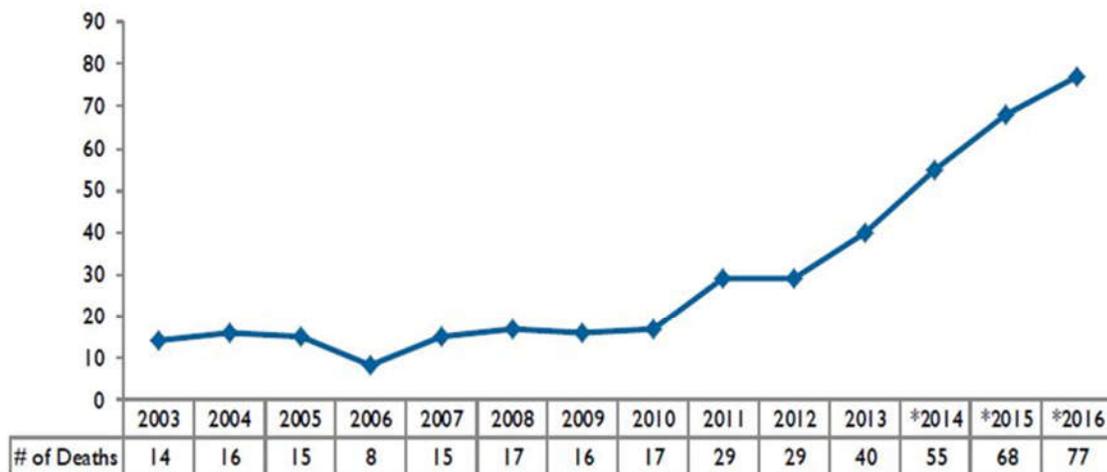
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**INTRODUCTION & BACKGROUND**

In just ten years, opioid-related deaths in Ingham County have increased at an astounding rate, increasing more than eight-fold from 2006 to 2016 (Figure 1). Ingham County is not unique in opioid addiction and overdose deaths. There is a nationwide epidemic. Opioid-related deaths have quadrupled in the United States since 1999, however, the severity and rate of escalation in overdose deaths in Ingham County is both significant and alarming as shown in Figure 1.

Figure 1. Opioid-related overdose deaths in Ingham County, Michigan.



Source: Michigan Resident Death Files

\*Source: Ingham County Medical Examiner Records 2014 - 2016

It was a sudden spike in deaths in Greater Lansing that prompted the formation of what was to become the Ingham Opioid Abuse Prevention Initiative (IOAPI). The first meeting was held in early 2015 after ten people died from a heroin overdose in just a few weeks. From the first meeting, it was clear that the opioid epidemic that had been ravaging the east coast of the U.S. had arrived in mid-Michigan. A critical step in the formation of this initiative was the engagement of key stakeholders and community partners. This group initially was asked to share their experiences, priorities and expected outcomes in partnering for this initiative. The committees and impact areas were developed with input and expertise of the initiative partners which continues to strengthen this initiative.

Since its inception, IOAPI has been a cross-sector group that includes health officials, law enforcement, emergency medical services, local hospitals and providers, treatment facilities and community groups. While each partner was aware of the local opioid addiction problem when the group first convened, none knew the full size and scope. Additionally, without a health equity infrastructure in place, there are no assurances that those primary impacted by the epidemic, former addicts and those having passed through the criminal justice system, there is no guarantee that interventions will be developed with the input of those they are intended to serve. We developed a surveillance system so that the entire group could base response on a more holistic, and equitable picture of the

opioid crisis in Ingham County. Specific information about the Ingham County Opioid Surveillance System is available upon request by contacting [squrashi@ingham.org](mailto:squrashi@ingham.org) or [clarrieux@ingham.org](mailto:clarrieux@ingham.org).

From the opioid surveillance system, we learned that:

- There is, on average, at least one opioid-related death in the community every week.
- Local EMS and area hospitals are giving hundreds of doses of naloxone, a life-saving medication that prevents overdose deaths, each year.
- Heroin laced with fentanyl or fentanyl analogues is contributing to local overdose deaths; and
- The high potency of these drugs often necessitates the administration of multiple doses of naloxone to people during an overdose.

Armed with this new information, we decided to draw public attention to the opioid addiction problem in Ingham County. We held a press conference on January 7, 2016 and launched an awareness campaign. In the months that followed, we worked towards broadening our scope of work beyond surveillance and public education. Working closely with other groups and partners, we identified areas where we could work collaboratively and have an impact without duplication of services. This strategic plan marks the next phase of our response to the local opioid crisis.

This strategic plan will focus on the impact areas listed below:

- Prescription drug disposal
- Education and awareness
- De-stigmatization
- Police Assisted Addiction and Recovery Initiative (PAARI) and other law enforcement approaches
- Drug treatment courts
- Opioid surveillance system
- Prescribing habits
- Prescription drug monitoring
- Harm reduction
- Medication-Assisted Treatment (MAT)
- Access to treatment

This multi-faceted approach will be carried out by five committees and will address opioid addiction at all levels. It is our aim to see, not only a reduction in opioid-related overdose deaths, but also to see reductions in opioid-related overdoses and the misuse of prescription opioids.

In addition to local data and local stakeholder input, IOAPI recognized the need to also align itself with national efforts and priorities. The United States Department of Health and Human Services (HHS) has identified the opioid abuse problem as a high priority and have also identified two broad goals in addressing the issue:

- 1) Decreasing opioid overdoses and overall overdose mortality
- 2) Decreasing the prevalence of opioid use disorder.

In addition to these goals, the HHS Secretary has also identified priority areas for action which are included in the goals and objectives of IOAPI. The Secretary's initiative targets three priority areas to combat opioid abuse:

- Opioid prescribing practices to reduce opioid use disorders and overdose

- Expanded use and distribution of naloxone
- Expansion of Medication-Assisted Treatment (MAT) to reduce opioid use disorders and overdose

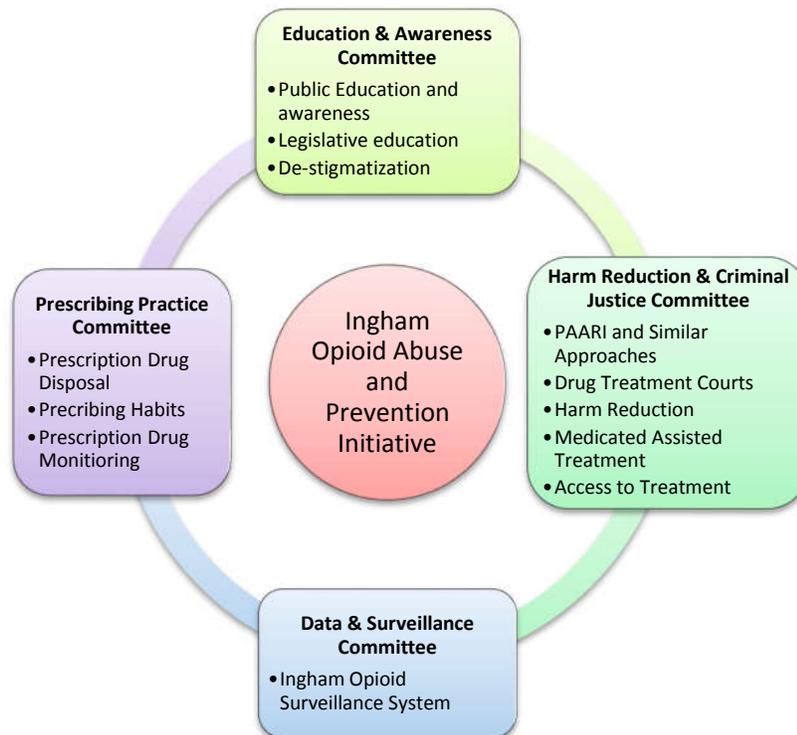
## MISSION

The Ingham Opioid Abuse Prevention Initiative is an action-oriented, community collaborative established to develop and implement strategies that prevent and reduce opioid addiction in Ingham County.

## STRUCTURE

The Ingham Opioid Abuse Prevention Initiative is a multi-sector collaborative of community members, and local public and private sector organizations working together to prevent and reduce opioid addiction, overdose, and related harm. Members attend bimonthly initiative meetings and are asked to participate in at least one of the five committees: **Education & Awareness, HARM Reduction & Criminal Justice, Data & Surveillance, and Prescribing Practice**. These five committees are tasked to work on interventions related to the aforementioned Impact areas. These committees all report to the full initiative and are charged with providing feedback, guidance, and interventions that support critical thinking through a health equity lens.

Figure 2 IOAP Initiative Structure



Members are not obligated to monetary contributions, but contribute staff time and in-kind resources. Meetings are open to visitors and the general public. Active members have signed a memorandum of understanding agreeing to these membership guidelines. Group members are encouraged to bring awareness to the issue of

opioid addiction and engage in public education. This may include use of social media, public education forums and demonstrations, and engagement with traditional media. Members speak as representatives of their organizations rather than for the initiative as a whole. IOAPI data is available to the general public on the Ingham County Health Department’s webpage. Actions of the Initiative are decided primarily via consensus.

## MODEL & FRAMEWORK FOR ACHIEVING SUCCESS

IOAPI seeks to apply evidence based practices in order to effectively plan and guide strategies to successfully address the opioid issue in Ingham County. To that end we have folded one model and one framework into our intervention efforts: the Sequential Intercept Model (SIM) and Strategic Prevention Framework (SPF) . Both of these models are recommended by the Substance Abuse and Mental Health Association (SAMHSA) to facilitate comprehensive approaches that yield positive outcomes.

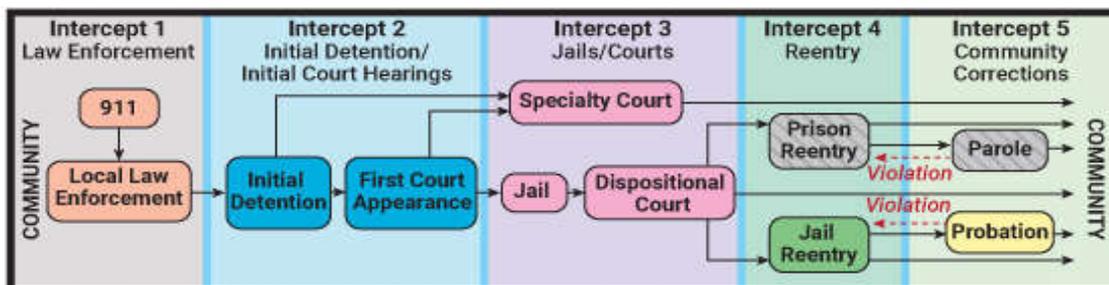
### SEQUENTIAL INTERCEPT MODEL

Approximately one-third of persons with opioid abuse disorder enter treatment through the criminal justice system. Consequently, special emphasis is placed on the criminal justice system in this plan. A popular framework for substance use disorder is the sequential intercept model (SIM). The SIM identifies five key points for “intercepting” individuals with behavioral health issues and linking them to services (Figure 3). This model builds on collaboration between the criminal justice and behavioral health systems; highlights where to intercept individuals as they move through the criminal justice system; identifies critical decision-makers who can authorize movement away from the justice system and into treatment; and delineates essential partnerships among mental health, substance abuse, law enforcement, pre-trial services, courts, judges, jails, community corrections, social services, and others. The SIM provides a practical navigation process to:

- Bring about strategic linkages with community-based behavioral health providers, the criminal justice system and community correctional health;
- Promote effective diversion and reentry programs; and
- Foster policy development at the intersection of behavioral health and justice issues.

The five key points of intercept are: 1. Law enforcement and emergency services; 2. Initial detention and initial hearings; 3. Jail, courts, forensic evaluations, and forensic commitments; 4. Reentry from jails, state prisons, and forensic hospitalization; and 5. Community corrections and community support services. These intercept points are opportunities for an intervention to prevent individuals with mental illness from entering or penetrating deeper into the criminal justice system.

Figure 3. Sequential Intercept Model



SAMHSA’s GAINS Center. (2013). *Developing a comprehensive plan for behavioral health and criminal justice collaboration: The Sequential Intercept Model* (3rd ed.). Delmar, NY: Policy Research Associates, Inc.

## STRATEGIC PREVENTION FRAMEWORK

Strategic Prevention Framework (SPF) is a comprehensive guide to plan, implement, and evaluate substance use and misuse. The five steps and two guiding principles of the SPF offer a comprehensive process for addressing the substance misuse and related behavioral health problems that our communities are facing. The effectiveness of the SPF begins with a clear understanding of community needs and involves community members in all stages of the planning process. Concepts of SPF include:

- 1) **Data driven:** Good decisions require data. The SPF is designed to help practitioners gather and use data to guide all prevention decisions.
- 2) **Dynamic:** Assessment is necessary as prevention needs in communities change, and as community capacity to address these needs evolves.
- 3) **Focused on population-level change:** Effective prevention means implementing multiple strategies that address the collection of risk and protective factors associated with substance misuse.
- 4) **Intended to guide prevention efforts for people of all ages:** The SPF challenges prevention professionals to look at substance misuse across the life course in order to reduce the risk of overlooking among ages that are often overlooked but carry significant risk, such as young adults ages 18 to 25 and adults age 65 and older.
- 5) **Reliant on a team approach:** Each step of the SPF requires the participation of diverse community partners.

Overarching these five steps are two guiding principles:

- 1) Cultural competence, and
- 2) Sustainability

## GOALS & OBJECTIVES

The initiative goals and objectives are described in the table below.

Table 1. Goals, objectives, and strategies

<b>Goals</b>	<b>1) End the opioid epidemic in Ingham County; and 2) Reorient the perception and response to addiction towards a chronic disease model.</b>	
<b>Impact Area</b>	<b>Prescription Drug Disposal</b>	
Objective 1	Expand the Take Back Meds program to include four more sites.	
Objective 2	Expand the Take Back Meds program to include four more sites and <b>associated</b> increase the number of pounds of medication taken in the Take Back Meds by 10%.	
Strategies	Include information related to the Take Back Meds Program in local opioid trainings Provide outreach and awareness throughout Ingham County Encourage non-traditional sites to securely accept unused prescription drugs	<u>Strategic Partners:</u> Ingham County Sherriff Office Capital Area Take Back Meds Mason Prescription Task Force Local pharmacies
<b>Impact Area</b>	<b>Education and Awareness</b>	
Objective 3	By September 30, 2018, provide 85% of the Ingham County Jail staff and inmates who use opioids with education focused on 1) inmate health rights, 2) opioid use, 3) opioid overdose, or 4) Naloxone.	

Strategies	Identify or create video educational content	<u>Strategic Partners:</u> Ingham County Health Department Ingham County Sherriff's Department
	Offer content via inmate kiosk at Ingham County Jail facilities	
Objective 4	Develop a comprehensive media campaign, to be launched in 2019, on safe disposal, safe use, and accessing treatment.	
Objective 5	Develop a comprehensive digital guide on safe disposal, safe use, and accessing treatment will be published by 2019.	
Strategies	Identify all available treatment options in the local area	<u>Strategic Partners:</u> Ingham County Health Department Ingham County Prosecutor's Office Ingham Health Plan Corporation Ingham Substance Abuse Prevention Coalition Mason-Capital Area Prescription Drug Task Force McLaren Greater Lansing Michigan Prevention Network Mid-Michigan Recovery Services Sparrow Health System CMH-CEI Wellness InX
	Develop print and digital guide for distribution	
	Develop media campaign for Capital Counties Commit	
<b>Impact Area</b>	<b>De-stigmatization of Substance Use Disorders</b>	
Objective 6	Develop a media campaign and related print material that focuses on altering the perception of opioid addiction.	
Strategies	Develop local media content that reframes the opioid crisis	<u>Strategic Partners:</u> Ingham County Health Department Local media outlets Capital Area District Library Families Against Narcotics (FAN)
	Develop guidance document(s) geared toward various audiences that reframes the opioid crisis	
Objective 7	Establish a social justice/health equity workgroup that would advise committees on mental health, SUD, and the judicial and law enforcement system	
Strategies	Develop comprehensive plan to address inequities related to SUD/Mental Health and criminal convictions	<u>Strategic Partners:</u> Local Law Enforcement Local Court Systems Community Mental Health
<b>Impact Area</b>	<b>PAARI and Similar Approaches</b>	
Objective 8	Support local law enforcement agencies the development and/or implementation of their PAARI program	
Strategies	Identify which law enforcement agencies have an existing PAARI program	<u>Strategic Partners:</u> Michigan State Police Lansing Police Department Families Against Narcotics (FAN)
<b>Impact Area</b>	<b>Specialty/Sobriety Drug Treatment Courts</b>	
Objective 9	Increase the number of people diverted to specialty courts by 5%.	
Strategies	Identify barriers to increasing capacity	<u>Strategic Partners:</u> Ingham County Sherriff's Office

	Identify alternate sources of funding to increase capacity	Ingham County Prosecutor's Office
<b>Impact Area</b>	<b>Treatment &amp; Harm Reduction</b>	
<b>Objective 10</b>	Develop a plan to implement Medically Assisted Treatment (MAT) at the Ingham County Jail by January 1, 2019.	
<b>Strategies</b>	Conduct a feasibility study of providing Medically Assisted Treatment (MAT) to inmates who use opioids at the Ingham County Jail.	<u>Strategic Partners:</u> Ingham County Sherriff's Office Ingham County Prosecutor's Office Ingham Community Health Center-Jail Medical
	Develop a strategic plan for providing Medically Assisted Treatment (MAT) to inmates who use opioids at the Ingham County Jail.	
	Work with the judicial system to develop alternative sentencing pathways that would allow for reduced incarceration coinciding with increased treatment	
<b>Objective 11</b>	By June 30, 2019, provide 85% of the Ingham County Jail inmates who use opioids support during incarceration and for up to 6 months post release.	
<b>Strategies</b>	Work with jail staff on developing and administering a Plan of Care (POC) for inmates with a substance use disorder involving opioids.	<u>Strategic Partners:</u> Ingham County Sherriff's Office Ingham County Health Department – Health Promotion & Prevention section Ingham Community Health Center-Jail Medical
	CHW and jail staff will develop and administer a re-entry plan for inmates with opioid-related SUD prior to release. The reentry plan may include such things as housing, medical insurance enrollment, follow-up with a health care provider, referral to support groups, and psychiatric referrals.	
	Work with jail staff on developing a protocol to distributing naloxone to the inmates who use opioids at discharge.	
	After release from jail, the CHW will provide support, guidance, and coaching for up to six months post release through home visits or phone contacts.	
<b>Impact Area</b>	<b>Prescription Drug Monitoring Program (PDMP)</b>	
<b>Objective 12</b>	Expand access to MAPS AwarxE by offering providers and third-party payers quarterly trainings.	
<b>Strategies</b>	Identify or develop content for training.	<u>Strategic Partners:</u> Ingham County Health Department Sparrow Health System McLaren Greater Lansing
	Identify resources for training logistics.	
	Promote free training and continued education training credits to providers.	
<b>Impact Area</b>	<b>Pain Management Practice Guidelines (Prescribing Habits)</b>	
<b>Objective 13</b>	Improve provider prescribing practices through quarterly educational trainings.	
<b>Strategies</b>	Identify or develop content for training.	<u>Strategic Partners:</u> Ingham County Health Department Sparrow Health System McLaren Greater Lansing
	Promote free training and continued education training credits to providers.	
<b>Impact Area</b>	<b>Opioid Surveillance</b>	
<b>Objective 14</b>	By June 30, 2018, define the scope of opioid use among the inmate population of the Ingham County Jail.	
<b>Strategies</b>	Gauge the various processes of identifying opioid users.	<u>Strategic Partners:</u> Ingham County Sherriff's Office
	Determine which, if any, processes need to be adjusted or augmented.	

	Test the accuracy of revised process(es)	Ingham County Health Centers - Jail Medical CMHA-CEI – Correctional Assessment & Treatment Services (CATS)
Objective 15	By December 31, 2018, incorporate information about opioid-related deaths and the deceased's incarceration history at the Ingham County jail into surveillance system.	
Strategies	Identify sources of incarceration history	<u>Strategic Partners:</u> Ingham County Sherriff's Office Ingham County Health Department Sparrow Forensic Pathology/ Office of the Medical Examiner
	Determine process for data sharing	
	Link data sources within surveillance system	
	Report de-identified aggregate statistics	

**INGHAM OPIOID ABUSE PREVENTION INITIATIVE MEMBERSHIP**

- 55th Judicial District Court-Sobriety Court (Judge Donald L. Allen, Jr.)
- Central Pharmacy
- City of Lansing
- Community Mental Health Authority of Clinton, Eaton, and Ingham Counties
- East Lansing Police Department
- Families against Narcotics
- Ingham County Board of Health
- Ingham County Health Department (Health Officer Linda S. Vail)
- Ingham County Medical Examiner
- Ingham County Prosecutor's Office (Ingham County Prosecutor Carol Siemon)
- Ingham County Sheriff's Office (Ingham County Sheriff Scott Wriggelsworth)
- Ingham Health Plan Corporation
- Ingham Substance Abuse Prevention Coalition
- Lansing Fire and EMS
- Lansing Police Department (Police Chief Mike Yankowski)
- Lansing Urgent Care
- Mason-Capital Area Prescription Drug Task Force
- Mason Police Department (Police Chief John Stressman)
- McLaren Greater Lansing

Michigan Pharmacists Association

Michigan Prevention Network

Michigan State Police

Michigan State University Police Department

Mid-Michigan Recovery Services

Sparrow Health System

Sparrow Pharmacy

Volunteers of America

Wellness Inx