Executive summary

The United States is experiencing an epidemic of drug overdose deaths. From 2000 to 2014, the rate of deaths from drug overdoses increased 137 percent, driven in large part by a 200 percent increase in the rate of overdose deaths involving opioids, which includes opioid pain relievers and heroin. In fact, drug overdoses now outnumber motor vehicle accidents as a cause of death, with 202 overdose deaths in 2016 compared with 73 motor vehicle deaths. In Hennepin County, opioid overdoses have killed roughly 700 people since 2012.

Surrounding the increasing number of opioid-involved deaths is the substantial burden experienced by first responders, hospitals, treatment providers and human services, and the anguish suffered by individuals, families and communities. The opioid epidemic is a complex public health, human services and public safety crisis and will require a multi-faceted response.

To confront this crisis, Hennepin County’s Public Health Department convened an opioid prevention strategic planning workgroup with representatives from all impacted departments. The workgroup was charged with developing both short- and long-term strategies to prevent opioid misuse and overdoses; increase rescue and harm reduction; and improve access to treatment and recovery services for people experiencing opioid use disorder.

The Opioid Prevention Strategic Planning workgroup consisted of representatives from: Communications, Department of Community Corrections and Rehabilitation, Community Works, Criminal Justice Coordinating Committee, Fourth Judicial District Court, Environment and Energy, Hennepin County Attorney’s Office, Hennepin County Library, Hennepin County Medical Center, Hennepin County Sheriff’s Office, Hennepin Health, Human Services, Facility Services, Intergovernmental Relations, NorthPoint Health and Wellness Center, Medical Examiner’s Office, Hennepin County Public Defender, Public Health, and Public Safety.

The workgroup met four times from November 2017 through January 2018. The first meeting introduced a strategic framework based on best practices from across the nation and outlined current prevention activities. The group recognized that a significant amount of work is already happening across the county and that increased coordination is needed. The second and third meetings focused on identifying proposed strategies and action items to fill the gaps in each of the agreed-upon priority areas. At the fourth meeting the workgroup finalized the strategies and action items, agreed upon an overall coordination structure, and reached consensus on the overall plan.

The aim is to save lives. The opioid epidemic has impacted all ages and races, and nearly every department in Hennepin County is responding. The causes of the epidemic are complex and combating it hinges on health care providers, law enforcement, community agencies, individual residents and the state and federal government taking wide-spread action. Sadly, many experts predict the epidemic will get worse before it gets better. Synthetic opioids, such as fentanyl, are much more lethal than heroin and responsible for a growing number of deaths. At the current rate, the opioid epidemic will claim the lives of more than 230 Hennepin County residents in 2020. We must take action to stop the exponential growth.
Hennepin County’s health and safety approach to opioid misuse and overdose is a call to action that brings all impacted departments together. This report outlines the strategic framework including what we need to do to address the crisis, who needs to be involved from various Hennepin County departments, and why we need to do it. The next steps – how to stop the crisis – will require collaboration among all levels of government, health care providers, community-organizations and other stakeholders, such as schools, local law enforcement, individuals, families and communities.

To combat the opioid epidemic will require additional resources. Convening all affected Hennepin County departments is a first step. Significant progress has been made developing strategies and action items across multiple departments. A crucial next step is meaningful collaboration and engagement with the community. It will require everyone working together to implement the action items and to save lives.

Summary of the opioid prevention workgroup recommendations

Primary prevention activities are needed to monitor the epidemic and curb the supply of opioids. First responders and other designated personnel need access to life saving medication. Opioid use disorder is a treatable disease and recovery is possible. It should be treated like any other health condition – by providing access to the right level of service at the right time and in the right setting.

Recommendations include the three (3) pillars and nine (9) priority areas listed below. In addition, the priority areas contain strategies and action items (32 total) to address the crisis and reduce opioid misuse and overdose deaths.

Primary prevention – Prevent further spread of the opioid crisis

- **Monitoring and communication**: Develop a system for tracking, analyzing and sharing timely comprehensive data to support the opioid prevention framework and develop new strategies.
- **Public education and stigma reduction**: Increase and coordinate education and stigma reduction messaging to key audiences with the goal of raising awareness and knowledge of the possible adverse effects of opioid use, including overdose and opioid use disorder.
- **Managing access**: Support and obligate providers to use best practice prescribing guidelines.
- **Safe storage and environmentally-sound disposal**: Promote safe storage and environmentally-sound disposal of medications.
- **Public safety interventions**: Reduce illegal distribution and use of opioids.

Response – Avert overdose deaths

- **Rescue**: Ensure all first responders, necessary county employees, and targeted stakeholders have access to and are trained to administer naloxone.
- **Harm reduction**: Coordinate county safe syringe services and naloxone distribution.

Treatment and recovery – Provide evidence-based treatment and recovery services

- **Access to treatment and recovery services**: Design and implement culturally- and evidence-based interventions by engaging communities disproportionately impacted by the opioid epidemic; and transform the substance use disorder treatment system from acute, episodic care to a longitudinal model of care.
- **Justice-involved supports**: Increase treatment options and transition planning in correctional settings.