#8

Addressing Opioid Crisis - Expanding Education and Outreach Programs

Muskogee County

Project Objective

- Expand reach of existing education and outreach programs through collaboration and partnerships.
- Partners: Muskogee County, Muskogee County EMS, Green Country Behavioral Health, Neighbors Building Neighborhoods and St. Francis Hospital

Muskogee County Overdose Data 2017-2021

Overdose Statistics: Muskogee County ranked highest in non-fatal overdose rates and 13th for overall overdose rates in the state.

Age Group Trends: Adults aged 55-64 had the highest death rates, while ages 15-24 had the highest rates of hospitalization.

Hospitalization Causes: 53% of hospitalizations were unintentional, and 43% were due to self-harm.

Location of Deaths: 39% of overdose deaths occurred at home.

Vulnerability of Rural Communities: Rural areas are statistically more vulnerable to the impact of opioid use and abuse.

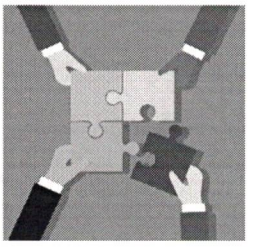
Positive Trends and Data 2017-2021

Decreased Rates: Deaths deceased by 16% and hospitalizations by 13% during the specified period.

Underlying Factors: However, data reveals that one in four people who have died had a history of mental health issues, and two out of three had a history of substance abuse.

Call to Action: Continued efforts are crucial to reaching individuals with mental health and substance abuse issues, focusing on providing information and access to resources.

Partnerships and Collaboration



- Key partnerships promotes greater access to resources, expertise and broader community engagement.

Program Overview

Collaborative Approach: Partnership with key stakeholders and the county.

Objectives: Expand reach, enhance training and provide support for mental health services.

Focus Areas: Education, Outreach and support for first responders.

Program Overview - Impact

Significant Impact: Rural Communities are disproportionately affected by the opioid crisis.

Project Inclusion: Aim to involve organizations in smaller communities for awareness and harm reduction efforts.

Initiatives: Distribution of Narcan Kits, Medication Disposal Systems and Safe Disposal Containers. Assist first responders with reimbursements for opioid related expenses as prescribed in the regulations. Increase access to mental health resources.

Alignment with Grant Purpose: All efforts are evidenced based strategies that align with approved grant purposes as defined by the State of Oklahoma.

Budget Overview

Education Materials: $25,000.00 cost share for production in coordination with NBN to be distributed with harm reduction supplies.

Harm Reduction Supplies: $62,000.00 including Narcan, medication disposal systems, OPVEE or equivalent.

Reimbursement for First Responders: $60,000.00 for related calls and mental health access, services and training.

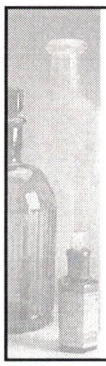
Indirect Costs: $3000.00 for administrative expenses such as supplies and auxiliary items.

Program Benefits

Evidence Based Practices: Program derived from CDC and Substance and Mental Health Association's evidence based practices.

Utilization of Existing Resources: Leveraging existing relationships, programs and staff within agencies for program administration.

Maximized Impact: Dollars utilized to serve and benefit citizens with Muskogee County to the fullest extent.

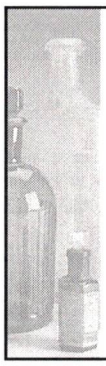


Conclusion

Addressing Urgent Needs: Targeted efforts to get more supplies into the homes in rural communities and promoting community well-being. Empowering first responders with resources.

Transparent Budget Allocation: Clear breakdown of budget ensures efficient and effective use of resources.

Commitment to Evidence Based Practices: The program is grounded in proven strategies for maximum impact. This is what the review board is seeking for these grant funds.



Next Steps

Implementation and Timeline: This is a one year grant. Quarterly reporting is required to articulate the success of all program efforts.

Evaluation and Monitoring: The committee will identify a minimum of ten rural communities and organizations that can assist with the distribution of materials with a goal of 500 households. Short surveys will be administered to determine positive impact of education and awareness campaigns.

Oklahoma Opioid Abatment Grants Act Budget Template

Proposed Budget - Opioid Grant Awards

Political Subdivision:

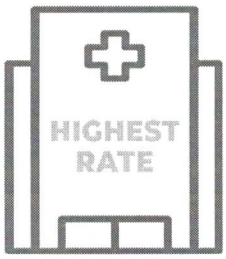
FY:

Expense	Description (Activity/Strategy)	Approved Purpose-Reference Section(s) of Act Addressed	Target Audience	Cost	One-time Cost(s)	On-going/ Annual Cost(s)	Quantity	Total Cost
Education Awareness Materials	Targeted Campaign with firm-mailers, brochures, billboards	Approved Uses - Prevention	Prevention	$ 25,000.00	x			$ 25,000.00
Medication Disposal System	Education, Awareness, Prevention	Approved Uses - Prevention	Harm Reduction	$ 20.00			1000	$ 20,000.00
Naxolone Medication	Education, Awareness, Prevention	Approved Uses - Treatment	Harm Reduction	$ 25.00			700	$ 17,500.00
OPVEE Medication	MCEMS Medication Treatment	Approved Uses - Treatment	Harm Reduction	$ 120.00			100	$ 12,000.00
First Responder Reimbursement	Reimbursement First Responder	Approved Uses - Prevention	Linkage to Care	$ 5,000.00			12	$ 60,000.00
Medication Safe Storage	Education, Awareness,Prevention	Approved Uses - Prevention	Harm Reduction	$ 25.00			500	$ 12,500.00
	Indirect Costs			$ 3,000.00				$ 3,000.00
								$ -
								$ -
								$ -
							Total	**$ 150,000.00**

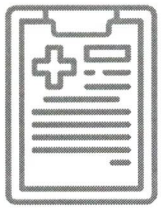
MUSKOGEE COUNTY

DRUG OVERDOSE HOSPITALIZATIONS† (2019-2021)

Muskogee County had the highest nonfatal drug overdose hospitalization rate in the state.



TEENS AND ADULTS AGED **15-24** had the highest hospitalization rate.



There were **329 Muskogee County Residents** hospitalized for a nonfatal drug overdose from 2019-2021.

- **53%** of hospitalizations were unintentional and **43%** due to self harm.
- Females were **32% more likely** to be hospitalized than males.
- Drug overdose **hospitalization rates decreased 13%** from 186.9 per 100,000 (2016-2018) to 163 per 100,000 (2019-2021).
- Non-Hispanic White Muskogee County residents had the **highest rate** of hospitalizations.

The most common substances involved in hospitalizations were:

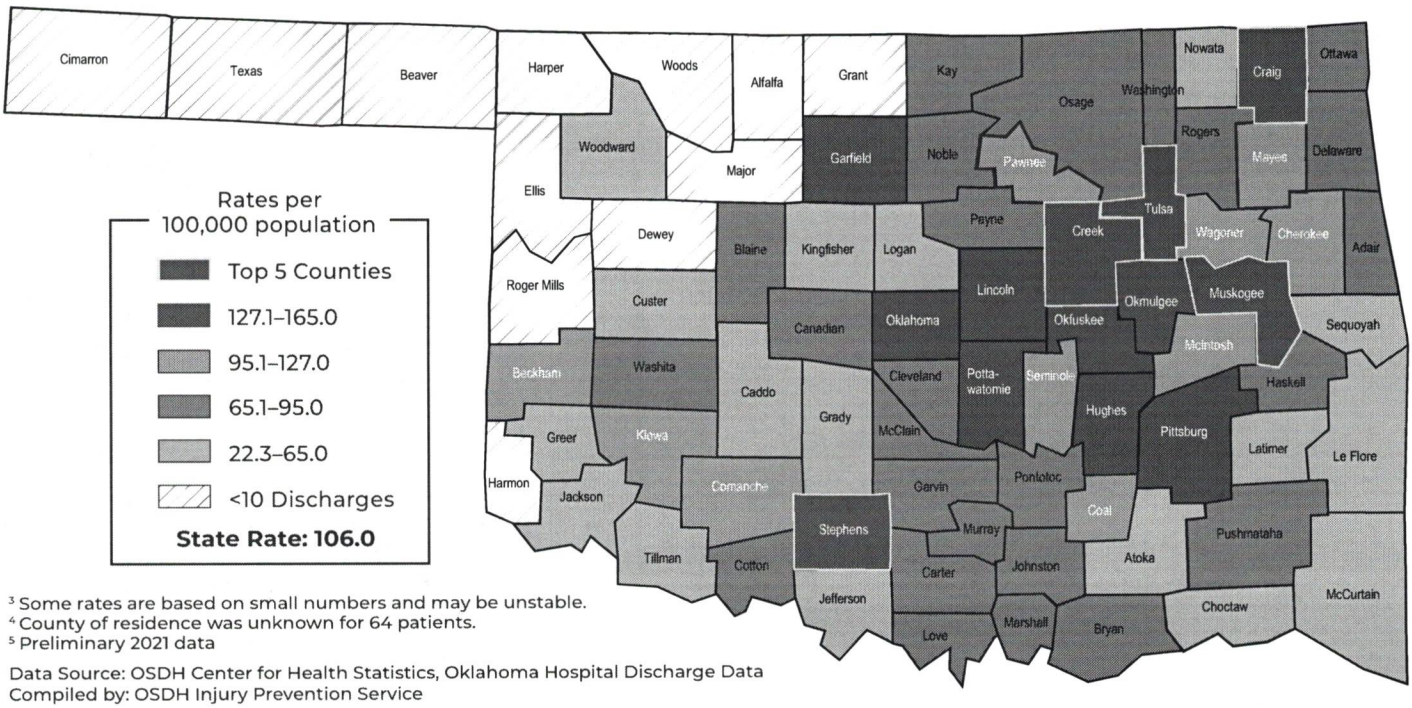
- Opioids
- Stimulants
- Benzodiazepines
- Non-opioid pain medications
- Antidepressants

† Includes all intents of nonfatal drug overdose – unintentional, self harm, undetermined, and assault

NONFATAL DRUG OVERDOSE HOSPITALIZATION RATES[3]

BY COUNTY OF RESIDENCE[4]

▶OKLAHOMA, 2019-2021[5]



[3] Some rates are based on small numbers and may be unstable.
[4] County of residence was unknown for 64 patients.
[5] Preliminary 2021 data

Data Source: OSDH Center for Health Statistics, Oklahoma Hospital Discharge Data
Compiled by: OSDH Injury Prevention Service

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MUSKOGEE COUNTY

DRUG OVERDOSE DEATHS[1] (2017-2021)

NUMBER OF UNINTENTIONAL DRUG OVERDOSE DEATHS BY TYPE OF SUBSTANCE*

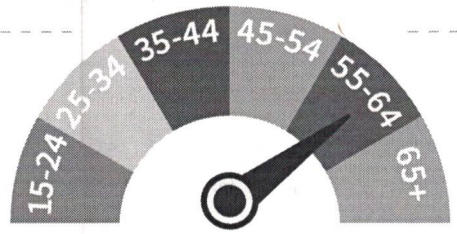
85 total number of unintentional drug overdose deaths

- **62** Methamphetamine
- **14** Other Opioids (excluding fentanyl)
- **13** Fentanyl
- **<5** Cocaine
- **6** Alcohol
- **6** Benzodiazepines

*Categories are not mutually exclusive. Deaths may involve more than one substance.

From 2017 to 2021, **Muskogee County** had the **13th highest** drug overdose death rate in the state.

Adults aged 55-64 years had the highest rate of death.



39% of deaths occurred at a home or apartment.

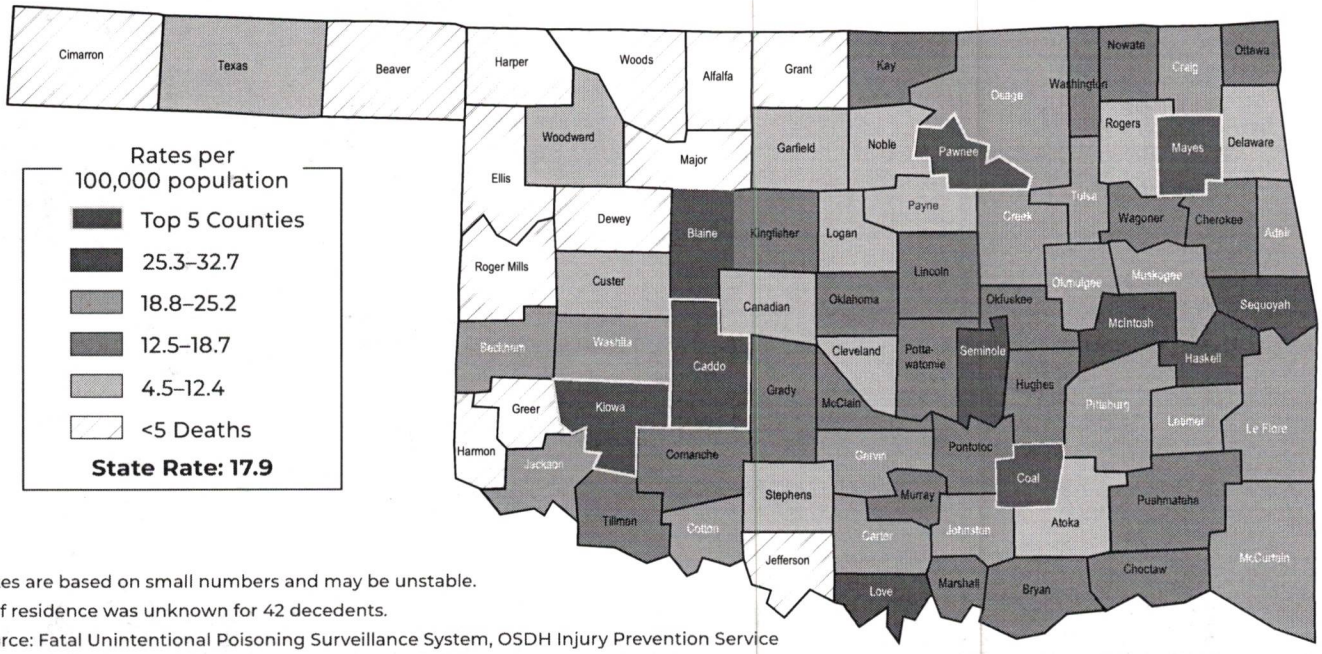
NON-HISPANIC AMERICAN INDIAN Muskogee County residents had the **highest** rate of death.

- Males were **65% more likely** to die than females.
- Drug overdose **death rates decreased 16%** from 29.8 per 100,000 (2012-2016) to 25 per 100,000 (2017-2021).
- **More than one in four (26%)** people who died had a history of mental health problems.
- **More than two out of three (68%)** people who died had a history of substance use.

UNINTENTIONAL DRUG OVERDOSE DEATH RATES[1]

BY COUNTY OF RESIDENCE[2]

▶OKLAHOMA, 2017-2021



[1] Some rates are based on small numbers and may be unstable.

[2] County of residence was unknown for 42 decedents.

Data Source: Fatal Unintentional Poisoning Surveillance System, OSDH Injury Prevention Service

Learn more: oklahoma.gov/health/overdose | 405.426.8440