



May 2017

# ***ACTION GUIDE*** ***TO ADDRESS OPIOID ABUSE***



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[FightingOpiateAbuse.ohio.gov](http://FightingOpiateAbuse.ohio.gov)

[mha.ohio.gov/gcoat](http://mha.ohio.gov/gcoat)

[stopoverdoses.ohio.gov](http://stopoverdoses.ohio.gov)

## INTRODUCTION

Ohio's model for fighting drugs is perhaps the most comprehensive in the nation. Nearly \$1 billion is being invested each year to help communities address prevention, treatment, recovery and law enforcement.

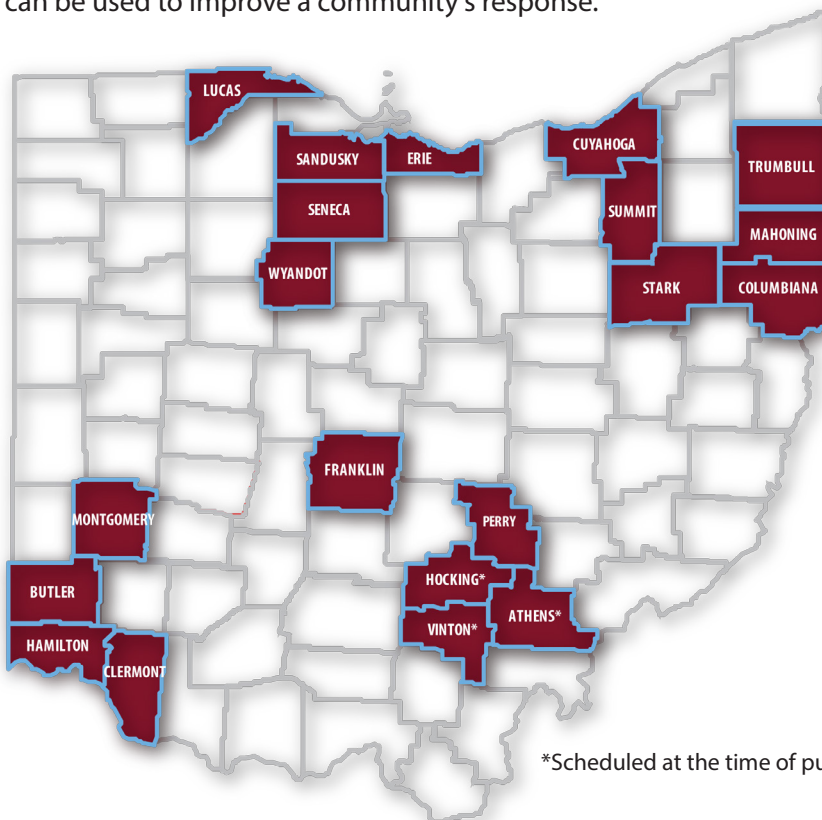
In addition to funding services and communities, Ohio leaders have invested time and energy into creating tools that can be used in battling this epidemic, which shows no sign of waning. In response to community needs, the state launched new drug prevention programs, emphasized best practices such as medication-assisted treatment, added capacity for recovery housing, and put in place innovative models of interdiction that emphasize connecting people to addiction treatment.

*"We can give communities the tools, but we're not going to defeat this just from the top down. Problems that we have in this state have to be dealt with right in the neighborhood, right in the family and right in the community."*

*Governor John R. Kasich*

However, Ohio must go further in evaluating community needs and addressing them at the local level. That is why Governor John Kasich sent officials from his office and various state entities to meet with local leaders in a number of the counties that have been hardest hit by the opioid epidemic. See map below.

Through these visits, the team identified best practices and directed communities to untapped resources. The outreach informed development of this [Action Guide to Address Opioid Abuse](#), which contains tools and contacts that can be used to improve a community's response.



\*Scheduled at the time of publication.

## Progress made to intervene on Ohio's opioid crisis

- ✓ Shut down illegal pill mills
- ✓ Extend access to treatment through Medicaid
- ✓ Establish prescriber guidelines
- ✓ Enhance prescription drug monitoring to identify potential painkiller abusers
- ✓ Increase access to naloxone for families, friends, first responders
- ✓ Enact "Good Samaritan" legislation
- ✓ Launch Start Talking! youth drug prevention program
- ✓ Divert people from jail into recovery
- ✓ Seize record amounts of illegal drugs through law enforcement
- ✓ Develop treatment for addicted mothers and their babies
- ✓ Post public resources at [stopoverdoses.ohio.gov](http://stopoverdoses.ohio.gov)
- ✓ Require schools to educate students about prescription abuse
- ✓ Consult with the Centers for Disease Control and Prevention about the fentanyl crisis

## NEXT STEPS

- Engage more communities in action-oriented responses →



**BE CREATIVE IN COMPOSING YOUR COMMUNITY TEAM****Government**

- Elected officials
- Coroner/medical examiner
- County Job and Family Services
- Children Services
- VA/county Veteran's Services

**Law Enforcement and Criminal Justice**

- Sheriff and police chief
- Prosecutor
- Common pleas and municipal court judges
- Juvenile courts
- Jail administrators
- Correctional facilities; halfway houses
- Parole and probation professionals
- Reentry coalition

**Treatment and Prevention**

- Alcohol/drug and mental health board
- Doctors, social workers and other clinicians
- Health department
- Prevention coalitions
- Local federally qualified health center, free clinic, etc.
- Area hospital system
- First responders (EMS)
- Urban Minority Alcoholism Drug Abuse Outreach Program (UMADAOP)
- Treatment Accountability for Safer Communities (TASC) Program
- Pharmacists
- Local medical societies
- Parents, family members and individuals in recovery

**Educators and Community**

- Superintendents, principals, guidance counselors
- PTO/PTA presidents
- Universities/community colleges
- Churches, synagogues, mosques
- Local NAACP
- Urban League
- Business owners or Chamber of Commerce
- Service clubs (Rotary, Kiwanis, etc.)
- Senior centers/Area Agencies on Aging

**GOAL 1: BUILD YOUR TEAM TO TAKE ACTION**

Unintentional drug overdoses caused 3,050 deaths of Ohio residents in 2015. Opioids were culpable in a significant majority of those deaths. Opioid abuse is a complex problem that requires a system-wide approach. Solutions will not be driven solely by state government action. Ohio's drug problem cannot be solved without active partnerships that engage leadership at the local level.

**Organize a broad and inclusive coalition**

This group should be representative of the community, including government leaders, law enforcement, the faith community, schools and organizations that are well-positioned to identify and engage specific at-risk groups. The coalition must provide community-wide oversight to establish accountability and ensure the effective use of resources.

- **Identify organizations** currently working in this space.
- **Enlist members willing to own the problem** and lead on behalf of the sector they are representing.
- **Establish a clear organizational structure** and a plan of succession to cultivate future members.
- **Select a leader** who can communicate effectively, organize plans into action and inspire the team.

**Focus activities for maximum impact**

With collective resources and positive leadership, a coordinated coalition can respond to issues, and influence policy and systems to effect long-term social change. Law enforcement personnel are on the front lines of the fight and can be a tremendous resource. Coalitions must:

- **Identify needs and service gaps** and develop plans to address them.
- **Deliver accurate information** regarding prevention, treatment and recovery supports that are available.
- **Construct a plan** of action for significant overdose trends or incidents.
- **Develop initiatives that can be sustained** through grassroots funding and organization.

**Be a community resource**

Citizens in your community may already understand the scope of the problem, but have an overwhelming feeling that there is nowhere to turn for help.

- **Establish a process that informs citizens** who seek services of the pathways they can follow.
- **Gather examples of your positive actions** and outcomes, and share them locally and among other sectors that could benefit.

## LOCAL RESPONSES

**Summit:** The [Summit County Opiate Task Force](#) uses local overdose rates and data from the Ohio Youth Risk Behavior Survey to inform strategic interventions. After the 2013 survey indicated one in six high-schoolers had used a prescription opioid medication without a prescription, and almost one in 20 had tried heroin, the Alcohol, Drug Addiction and Mental Health Services board invested in school-based and peer-led prevention activities. New treatment services, such as ambulatory detox, were added for youth addicted to opioids. Contact County of Summit Alcohol, Drug Addiction and Mental Health Board, (330) 762-3500 or [adm@admboard.org](mailto:adm@admboard.org).

**Wood:** Through community town hall meetings in churches and schools, a [Wood County Opiate Task Force](#) Facebook page and podcasts, family and friends of those addicted to opioids share stories, support and calls for action. To aid adults with addiction, a medication-assisted treatment program began within the courts; a new program began offering outpatient services for those waiting for residential treatment, the 211 Recovery Helpline Service was implemented, and both Bowling Green State University and Wood County Hospital hosted a lecture series for faculty and employees on the signs of addiction and the referral process for treatment. Contact Milan Karna of the Wood County Prevention Coalition at [milankarna@users.smores.com](mailto:milankarna@users.smores.com).

**Montgomery:** With more than 220 members, the Montgomery County Community Overdose Action Team is an inter-agency collaborative that represents all aspects of the community, including law enforcement, the court system, behavioral health agencies, public health, hospital systems and community organizations. It operates using the Incident Command System Structure that was designed for emergencies. Each of eight branches meets monthly to work on specific problem areas related to the drug overdose crisis. Actions and priorities are developed for a 30-day operational period. In addition, the county team performed Sequential Intercept Mapping to identify areas that need be addressed. Contact the Community Overdose Action Team through Public Health – Dayton & Montgomery County at (937) 225-5700 or visit [www.phdmc.org/coat](http://www.phdmc.org/coat).

## WHAT CAN YOU DO?

*Bring people to the table*

### CHECKLIST

- Establish local coalition or task force or join regional one
- Develop mechanism for information sharing across systems
- Work with county coroner to evaluate number of deaths due to overdose
- Work with Children Services to evaluate the number of families impacted by opioid addiction
- Tap prevention specialists for expertise
- Inventory local treatment and recovery options
- Share successes

## DATA RESOURCES ARE PLENTIFUL

State and local data on the opioid epidemic is available from:

- Ohio Department of Mental Health and Addiction Services: [mha.ohio.gov/research](http://mha.ohio.gov/research)
- Ohio Board of Pharmacy county prescribing information: [www.pharmacy.ohio.gov/countyOARRS](http://www.pharmacy.ohio.gov/countyOARRS)
- Ohio Department of Health: [www.odh.ohio.gov/health/vipp/drug/dpoison.aspx](http://www.odh.ohio.gov/health/vipp/drug/dpoison.aspx)  
[www.odh.ohio.gov/healthstats/dataandstats.aspx](http://www.odh.ohio.gov/healthstats/dataandstats.aspx)
- Ohio Department of Public Safety: [ocjs.ohio.gov/resources\\_reports.stm](http://ocjs.ohio.gov/resources_reports.stm)
- Network of Care: [state.oh.networkofcare.org/mh/](http://state.oh.networkofcare.org/mh/)





## Start Talking!

Building a Drug-Free Future

[starttalking.ohio.gov](http://starttalking.ohio.gov)

### Early education can stop problems before they start

Ohio launched Start Talking! to give parents, guardians, educators and community leaders the tools to start the conversation with Ohio's youth about the importance of living drug-free lives. A majority of substance-free adolescents credit their parents for influencing their decision not to use illegal substances. Likewise, other caring adults can have a similar impact on youth and their decision-making.

Through Start Talking!, tens of thousands of parents and teachers have already signed up to receive bi-weekly tips and many school districts have initiated or enhanced prevention efforts. Employers can also get involved by sharing information with their workforces.

Contact Start Talking! Director Sarah Smith at (614) 387-2799 or [sarah.smith@starttalking.ohio.gov](mailto:sarah.smith@starttalking.ohio.gov).

## GOAL 2: ADOPT PREVENTION PRACTICES

Ohio must educate all citizens, especially young people, so they can make healthy decisions and avoid risks associated with drugs, including prescription medicines. If individuals and families aren't aware of the powerful substances within their own medicine cabinets, misuse and addiction can occur.

### Help parents and caregivers start conversations with kids

In the effort to prevent drug use among Ohio's children, there is a simple tool that can help — conversation. Children of parents who talk to their teens about drugs are up to 50 percent less likely to abuse them. Tap into multiple free resources at [StartTalking.Ohio.gov](http://StartTalking.Ohio.gov). The Start Talking! strategies also have components for schools to use so that parent messages at home are reinforced. See the sidebar at left for more information.

- **Sign up for free tips** such as [Know!](#) for parents and [Teachable Moments](#) for educators.
- **Share state and national resources** at [Parents360Rx](#) meetings that help people understand the risks to our youth and learn simple, effective strategies to act.
- **Invite speakers** to present at schools or other events in your area. [5 Minutes for Life](#) is one example of a presentation by Ohio State Troopers, Ohio National Guard or local law enforcement.
- **Encourage youth to become [ambassadors](#)** who lead by example among their peers. As leaders in their school, they encourage students in their peer group to live a drug-free lifestyle.
- **Play public service announcements before sporting events.** Radio announcements of 15 or 30 seconds are available in the Take Action section of the Start Talking! website: <http://starttalking.ohio.gov/TakeAction/AdditionalResources.aspx>.

### Deploy prevention programming in schools

Many schools are already using evidence-based prevention programs, but more can be done. [Ohio legislation](#) requires the board of education of each local school district to select a health curriculum that includes instruction on the dangers of prescription opioid abuse. Beyond K-12 environments, colleges and universities can also promote awareness. These resources may help.

- **Generation Rx** - This partnership between the College of Pharmacy at The Ohio State University and the Cardinal Health Foundation provides open source educational materials that anyone can use to help prevent the misuse of prescription drugs. Visit [www.GenerationRx.org](http://www.GenerationRx.org).
- **Health and Opioid Abuse Prevention Education Curriculum** developed by Wright State University as a series of lessons, assessments and learning materials to develop students' functional knowledge, attitudes and necessary skills to prevent drug abuse. Email [HOPEcurriculum@wright.edu](mailto:HOPEcurriculum@wright.edu).
- **Ohio's Strategic Prevention Framework** can guide communities in developing sustainable and culturally appropriate initiatives to reduce the incidence of alcohol and drug abuse among teens and young adults. Contact [Molly Stone](#), Chief of Prevention, Ohio Department of Mental Health and Addiction Services, (614) 728-6866. Visit <http://pfs.ohio.gov>.

## Set up local prevention coalitions with a youth-led focus

Every community should have an active drug prevention coalition. A youth peer-to-peer component can show kids that if they choose to be drug-free, they are in the majority. The Columbus-based [Drug-Free Action Alliance](#) can provide technical assistance to any area of the state wishing to build a community-based prevention network. Contact Executive Director Marcie Seidel at (614) 540-9985 to learn more about the following programs:

- The **Ohio Center for Coalition Excellence** provides training and technical assistance to change community environments.
- An **Ohio Youth-Led Prevention Network** welcomes adult and youth leaders.
- The **G.A.P. Network** moves Grief to Action for Prevention as a voice for individuals and families impacted by the opioid epidemic.

## Develop culturally relevant, age-appropriate communications

Whether your community wants to reach urban youth, rural families or returning veterans, identify the population segments you need to reach and tailor messages to incorporate the audiences' beliefs and values.

- **Involve members of the population** you look to serve in developing strategies and materials.
- **Field test materials** for comprehension and cultural acceptance.
- **Translate items** into the language(s) of the population(s) served.

Collaborate with population-specific organizations, youth-serving agencies or faith-based groups to make sure your materials are culturally sensitive, respectful and age-appropriate.

## LOCAL RESPONSES

**Union:** Working with community organizations, the Marysville School District shares the Start Talking! message during sporting events, engages student leaders, and encourages parents to have conversations with their children about the importance of being drug-free. School board agendas now include an update from the safety and drug committee. District efforts earned them an Innovation in Education Award from Gov. Kasich in January 2017. Contact the district office at (937) 578-6100.

**Ross:** As many as 1,500 young people marched to the steps at the Ross County Courthouse in 2016, chanting, "We are drug free." The youth rally was part of a [Drug Free Clubs of America](#) program initiated in seven public high schools and the Pickaway-Ross Career and Technology Center. Support for the program includes donations from businesses and philanthropic organizations. Contact the Ross County Heroin Partnership Project at [heroinpartnershipproject@rosscountyohio.gov](mailto:heroinpartnershipproject@rosscountyohio.gov) or its coordinator, Teri Minney, [teresaminney@rosscountyohio.gov](mailto:teresaminney@rosscountyohio.gov).

**Hancock:** Hancock County adopted the Start Talking! program and introduced its own I AM ENOUGH campaign to promote drug prevention in school districts and at the University of Findlay. A career center video production class created a 30-second public-service announcement about prescription drug abuse, which received third place in a statewide contest. Contact Barbara Wilhelm, [bwilhelm@hancockpublichealth.com](mailto:bwilhelm@hancockpublichealth.com).

## WHAT CAN YOU DO?

*Engage school districts, parents and youth*

### CHECKLIST

- Coordinate school districts to ensure the use of evidence-based prevention programming
- Support a local drug prevention coalition
- Work with Children Services to evaluate the number of families that are impacted by opioid addiction
- Engage service organizations (Rotary, Kiwanis, etc.)
- Develop culturally relevant materials about drug abuse prevention

*One in 10 Ohio teens has used prescription painkillers such as Vicodin®, Percocet®, OxyContin® or codeine without a doctor's prescription.*

*Source: 2013 Ohio Youth Risk Behavior Survey*







### Pharmacy Board addresses misuse, diversion of drugs

The State of Ohio Board of Pharmacy created the Ohio Automated Rx Reporting System (OARRS) to collect information on outpatient prescriptions for controlled substances dispensed by Ohio-licensed pharmacies and personally furnished by licensed prescribers in Ohio.

This statewide database is a tool that can be used to address prescription drug diversion and abuse. It serves multiple functions for managing patient care, drug epidemic early warning, and drug diversion and insurance fraud investigation.

OARRS helps prescribers and pharmacists avoid potentially life-threatening drug interactions and identify individuals fraudulently obtaining controlled substances from multiple health care providers, a practice referred to as “doctor shopping.” It can also be used by law enforcement in cases of controlled substance diversion.

Contact Cameron McNamee, Director of Policy and Communications, State of Ohio Board of Pharmacy, (614) 466-7322, or [cameron.mcnamee@pharmacy.ohio.gov](mailto:cameron.mcnamee@pharmacy.ohio.gov).

## GOAL 3: MONITOR PRESCRIBING, MANAGE MEDICATION AND HALT DIVERSION

An entire generation has grown up with easy access to prescription opioids and insufficient oversight, resulting in addiction and an escalating epidemic. We can turn this trend around with deliberate action to stop misuse before it starts.

### Promote best practices and continuing education

Science related to medication is always evolving. Providers can keep their knowledge current about evidence-based practices for the use of opioid analgesics to manage pain, as well as specific steps to prevent and manage opioid overdose, through free federally funded Continuing Medical Education.

- **Boston University** School of Medicine's [OpioidPrescribing.com](http://OpioidPrescribing.com).
- **Medscape** at [www.medscape.com](http://www.medscape.com).

### Monitor county progress toward responsible prescribing

County-level statistics on opioid dispensing is available through Ohio's Prescription Drug Monitoring Program known as the [Ohio Automated Rx Reporting System](#) (See sidebar on OARRS). This statewide database helps prescribers and pharmacists avoid potentially life-threatening drug interactions or identify individuals fraudulently obtaining controlled substances from multiple health care providers, a practice commonly referred to as “doctor shopping.” The information also is available to law enforcement officers and health care regulatory boards during active investigations.

- **Access county data** reports and maps that reflect doses dispensed to Ohio patients. [www.pharmacy.ohio.gov/countyOARRS](http://www.pharmacy.ohio.gov/countyOARRS)
- **Educate prescribers and pharmacists** on when they are required to check OARRS before prescribing or dispensing. [www.pharmacy.ohio.gov/check](http://www.pharmacy.ohio.gov/check)
- **Educate law enforcement** on using OARRS for investigations. [www.pharmacy.ohio.gov/LawEnforcementTraining](http://www.pharmacy.ohio.gov/LawEnforcementTraining)

### Promote integration of OARRS with medical records

Ohio is integrating OARRS directly into electronic medical records and pharmacy dispensing systems across the state, allowing instant access for prescribers and pharmacists. As a result, daily patient data requests by prescribers and pharmacists continue to reach record numbers.

- **Encourage local prescribers and pharmacies to** integrate their electronic health records and dispensing systems. For more information, visit: [www.pharmacy.ohio.gov/integration](http://www.pharmacy.ohio.gov/integration).

### Stay informed about prescribing guidelines

Ohio implemented processes to avoid contributing to opioid addiction by adjusting formularies for pain management used in prisons and by the Bureau of Workers' Compensation. To assist all prescribers in improving patient care, Ohio developed Opioid Prescribing Guidelines and continues to add standards for all prescribers, including limits on the amounts that can be prescribed. For the most current information, visit [www.OpioidPrescribing.ohio.gov](http://www.OpioidPrescribing.ohio.gov).



## Educate individuals about proper medication use, disposal

To prevent the diversion of opioid pain medications, proper storage and disposal of unwanted or expired prescription medications is essential. It is not environmentally safe to flush unused medication into wastewater systems. Certain law enforcement agencies and pharmacies in Ohio offer drug disposal boxes to collect and dispose of unwanted or expired prescription medications from the general public.

- **Set up drug collection sites** and promote current locations. To locate your closest drug disposal box, visit: [www.pharmacy.ohio.gov/disposal](http://www.pharmacy.ohio.gov/disposal).
- **Hold drug take-back events** to raise awareness among citizens.
- **Share information on proper disposal methods in the home**, such as mixing the drugs with coffee grounds or kitty litter. Guidance is available at [www.deadiversion.usdoj.gov/drug\\_disposal/](http://www.deadiversion.usdoj.gov/drug_disposal/).

## LOCAL RESPONSES

**Clermont:** The Clermont County General Health District convenes a community coalition – the [Coalition for a Drug Free Clermont County](#) – that works on several aspects of the opioid epidemic, including: increasing the use of prescription drug monitoring through the Ohio Board of Pharmacy; increasing the use of prescriber guidelines for dosing; and increasing access to naloxone. Contact Jackie Lindner, [jlindner@clermontcountyohio.gov](mailto:jlindner@clermontcountyohio.gov).

**Hamilton:** A regional effort supported four drug take-back events in the fall of 2016, bringing in over 600 lbs. of medications; implemented a patient survey (via pharmacy bags) when prescriptions are picked up; added drop boxes in private retail pharmacies; worked with real estate agents to provide personal lockboxes or locked cabinets in homes that were on the market. The [Hamilton County Heroin Coalition](#) developed a strategic plan and is also part of a tri-state initiative: <http://injecthope.com>. Contact Alex Linser, Hamilton County Board of Commissioners at [Alex.Linser@hamilton-co.org](mailto:Alex.Linser@hamilton-co.org) or (513) 946-4405.

**Montgomery:** A new drug disposal pouch undergoing review by the [Montgomery County Alcohol, Drug Addiction and Mental Health Services Board](#) (ADAMHS) renders old drugs nearly inert — useless to a user — and safe for landfill disposal. The pouches come in sizes to deactivate from 15 to 450 pills. Tap water activates carbon in the bags to neutralize the drug's main ingredients. Four hundred Drug Deactivation System bags are being distributed free at events and through Dayton pharmacies. Contact the ADAMHS Board at (937) 443-0416.

**Stark:** Local pharmacies provide opioid prevention and harm reduction resources at their Stark County stores. [Drug Free Stark County](#) created a five-point strategy card for responsible medication

practice, a card that outlines steps to safeguard medications at home, and a bag designed to help community members collect and transport unwanted medications to drop off sites. Contact Stark County Mental Health and Addiction Recovery, (330) 455-6644 or [Info@StarkMHAR.org](mailto:Info@StarkMHAR.org).

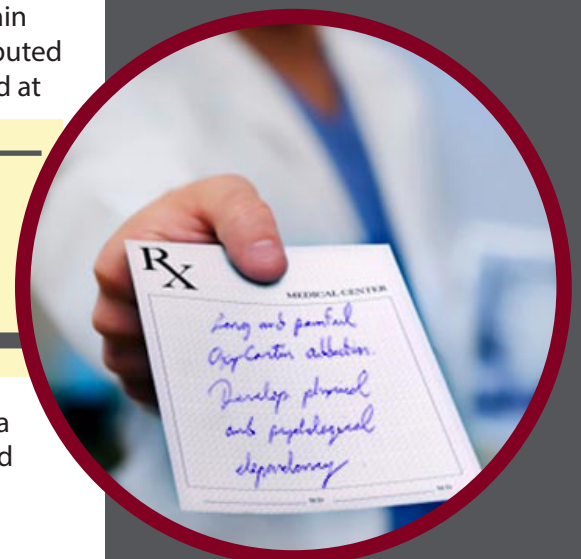
*Many people of all ages who have abused prescription opioids say they got them from a friend or relative.*

## WHAT CAN YOU DO?

*Promote responsible prescribing and avoid illegal diversion of prescription pain pills*

## CHECKLIST

- Disseminate the state's opioid prescribing guidelines
- Provide opportunities for the proper disposal of unwanted or expired medication
- Discuss the aggregate opioid prescribing data for your county
- Encourage health providers to integrate OARRS into their electronic health records
- Develop culturally relevant information and materials about prescription drug misuse and responsible medication management





### Access to opiate overdose reversal drug is critical

Communities can educate individuals about use of the drug naloxone. Ohio's [Project DAWN](#) (Deaths Avoided With Naloxone) program allows for individuals who are opioid-addicted or family members of the opioid-addicted individual to obtain a naloxone kit for free. Many local health departments are Project DAWN participants, as are law enforcement agencies and emergency medical services.

The state has incorporated Project DAWN kits into equipment for prison medical staff. This initiative has been extremely successful, with Narcan® administrations resulting in over 80 overdose reversals within a two-year period. When indicated, Project DAWN kit distribution is also incorporated into the patient discharge procedures at the six state-run regional psychiatric hospitals.

To start a Project DAWN site, contact the Ohio Department of Health at **(614) 466-2144**.

Learn more by visiting [www.odh.ohio.gov](http://www.odh.ohio.gov) and to view the [Project DAWN Toolkit](#).

## GOAL 4: PREVENT OVERDOSE

Naloxone (also known as Narcan®) is a medication that can reverse an overdose caused by an opioid drug (e.g., heroin, OxyContin®). Ohio has taken steps to increase its availability, not only for health professionals, law enforcement and emergency personnel, but to the family and friends of individuals at risk. It is the number one tool in saving a life when someone is in active overdose.

### Help first responders and families acquire and use naloxone

Naloxone must be administered by a third party because the overdose victim is unconscious or otherwise incapable of administering the medication personally. Communities can facilitate the adoption of policies to stock and distribute naloxone, and educate citizens in how to administer it. If naloxone is given to a person who is not experiencing an opioid overdose, it is harmless.

*Naloxone is a life-saving medication that, if administered during an overdose of an opioid-based drug, can potentially reverse the overdose so the individual can be connected to medical treatment.*

- **Start a Project DAWN site** or connect with one through the Ohio Department of Health. See sidebar at left for contact information.
- **Communicate about “Good Samaritan” legislation** that provides immunity from prosecution to those who seek emergency help for the victim of an overdose. <http://codes.ohio.gov/orc/2925.11>
- **Encourage pharmacies to stock naloxone**, which can be dispensed by a pharmacist without a prescription under an authorization from a physician or a local board of health. [www.pharmacy.ohio.gov/naloxone](http://www.pharmacy.ohio.gov/naloxone)
- **Educate health professionals** that they can provide nasal naloxone to any person, family member or friend of a person who is at risk of experiencing an opioid-related overdose. [www.pharmacy.ohio.gov/NaloxoneStatement](http://www.pharmacy.ohio.gov/NaloxoneStatement)
- **Encourage EMS to provide take home doses** of naloxone to patients who are treated for an overdose but refuse transport. [www.pharmacy.ohio.gov/emsnaloxone](http://www.pharmacy.ohio.gov/emsnaloxone)

### Understand who is at increased risk and target resources

Community programs aimed at reducing opioid drug overdose deaths, such as Project DAWN, target a wide range of high-risk individuals. These individuals vary from patients who may abuse medications to non-medical users of prescription opioids and heroin users. Additional indications include people with certain health conditions and those who are concurrently using central nervous system depressants (benzodiazepine, alcohol, anti-depressants).

In particular, studies indicate an increased risk of drug-related death soon after release from prison or community treatment. While not using drugs, a person's tolerance is reduced. If an offender or person in recovery attempts to use at their previous level, he or she is at extreme risk for overdose.

When a sudden upward trend in overdoses occurs in the community, quick action is needed to prevent additional overdoses or deaths. One method is to develop and implement an Overdose Response Team made up of law enforcement, other first responders and medical providers who can make home visits and supply naloxone to locations with a recent overdose.

- **Promote naloxone access throughout the community** – at schools and colleges, homeless shelters and halfway houses, courts and probation departments. [www.pharmacy.ohio.gov/service](http://www.pharmacy.ohio.gov/service)
- **Distribute naloxone kits to:**
  - individuals with medical conditions that put them at risk,
  - prison or jail inmates upon release,
  - people completing treatment, and
  - people discharged from hospital after overdose. [www.pharmacy.ohio.gov/hospitalnaloxone](http://www.pharmacy.ohio.gov/hospitalnaloxone)
- **Direct family or friends to a Project DAWN location** where they can learn more and access additional naloxone kits.
- **Develop an Overdose Response Team** to supply naloxone to people living in neighborhoods with recent overdoses and link individuals to community resources and treatment.

## LOCAL RESPONSES

**Clark:** McKinley Hall collaborates with local law enforcement to provide post-overdose response to victims, friends and families affected by overdose. The provider dispatches staff to the address of the person who overdosed, provides naloxone and the training on how to use it should another overdose occur. They also engage with the overdose victim to provide information on treatment and support services. Contact Wendy Doolittle, CEO at McKinley Hall, [wdoolittle@mckinleyhall.org](mailto:wdoolittle@mckinleyhall.org) or (937)328-5300.

**Cuyahoga:** The county has facilitated relationships between local service providers and colleges and universities to offer targeted education on substance abuse. Topics included substance abuse prevention with a focus on prescription pain medication, Mental Health First Aid training, and factors that contribute to vulnerability for mental illness and addiction. Contact Allisyn Leppla at Cuyahoga County Board of Health, [aleppla@ccbh.net](mailto:aleppla@ccbh.net).

**Franklin:** The county health department partners with Southeast, Inc., a behavioral health treatment provider where the training and provision of naloxone takes place, and the City of Columbus, which co-developed an [Opiate Community Resource Guide](#). Southeast also collaborates with the Columbus Division of Fire on a Rapid Response Emergency Addiction and Crisis Team consisting of health professionals who respond with EMS on opioid overdose and mental health crisis situations to appropriately direct intervention. Contact Shaddy Swade at Franklin County Public Health, [shaddyswade@franklincountyohio.gov](mailto:shaddyswade@franklincountyohio.gov) or (614) 525-4261.

## WHAT CAN YOU DO?

*Prepare your community to prevent further deaths.*

## CHECKLIST

- Ensure access to naloxone through Project DAWN program, first responders, emergency departments and pharmacies
- Develop culturally relevant information and materials that inform citizens about naloxone availability
- Work with county coroner or first responders to evaluate the number of overdose deaths and communicate the data to partners
- Promote the website at [stopoverdoses.ohio.gov](http://stopoverdoses.ohio.gov)







## Specialized dockets offer treatment instead of prison

Specialized docket courts focus on specific crimes, diagnoses (such as addiction), or populations. They may utilize intensive probation, community support and treatment services, or sanctions and rewards that are determined by a treatment team that includes the presiding judge, clinicians, and probation or peer-support representatives.

There are more than 220 Ohio specialized dockets, 154 of which focus on substance use disorder. Municipal Drug Courts in Akron and in Fairfield County, Common Pleas Drug Courts in Cuyahoga and Williams counties, and Family Drug Courts in Lucas and Logan counties represent an array of urban and rural court systems that are using the specialized docket approach to direct people to treatment.

Ohio also funds an [Addiction Treatment Program](#) that connects court-involved individuals to medication-assisted treatment. These specialized dockets operate in 22 counties, with the potential for expansion statewide.

Contact [Julie Spohn](#) in the Bureau of Criminal Justice at the Ohio Department of Mental Health and Addiction Services, (614) 752-8051. Or [Monica Kagey](#) at the Supreme Court of Ohio, 614-387-9427. [specdocs@sc.ohio.gov](mailto:specdocs@sc.ohio.gov)

## GOAL 5: LINK PEOPLE TO TREATMENT

The sheer size of the problem indicates that any of us could likely encounter someone at risk of addiction or overdose in our daily lives. Family members, friends and loved ones need to know where to go for assistance. The more quickly an individual can be identified and steered toward help, the better his or her chance for a successful outcome.

### Ensure rapid connection to treatment

Members of law enforcement and medical practices especially are in positions where they might observe people with addiction and steer them to treatment.

- **Implement Screening, Brief Intervention and Referral to Treatment** in primary care practices, hospitals and other health settings to open discussions with patients. Ohio offers in-person training to assist organizations of all sizes in implementing this screening tool. Visit [mha.ohio.gov/SBIRT](http://mha.ohio.gov/SBIRT), email [SBIRTTraining@mha.ohio.gov](mailto:SBIRTTraining@mha.ohio.gov) or call Project Director Ellen Augspurger at (614) 644-8318
- **Enlist first responders in outreach** to areas where overdoses have recently occurred to offer information on accessing treatment or naloxone.
- **Offer behavioral health care in jails** through collaboration with area substance use disorder and mental health providers. Pre-release services increase the likelihood that individuals will make positive life changes. Ohio participates in the Stepping Up Initiative to connect offenders to treatment and reduce jail incarceration. [mha.ohio.gov/steppingup](http://mha.ohio.gov/steppingup)
- **Start a specialized docket in a local court** to direct non-violent offenders to addiction treatment and recovery supports. See sidebar at left for contact information. [www.supremecourt.ohio.gov/JCS/specDockets/](http://www.supremecourt.ohio.gov/JCS/specDockets/)
- **Assist pregnant women who are addicted** with prenatal care to decrease the incidences of babies born with Neonatal Abstinence Syndrome. Contact Rick Massatti, State Opioid Treatment Authority, at the Ohio Department of Mental Health and Addiction Services, [richard.massatti@mha.ohio.gov](mailto:richard.massatti@mha.ohio.gov) or (614) 752-8718. <http://momsohio.org/moms/>
- **Connect family members and loved ones with resources.** Peer staff at the Ohio Department of Mental Health and Addiction Services Toll-Free Bridge Line can direct individuals to local resources. Call 1-877-275-6364 or email [askMHAS@mha.ohio.gov](mailto:askMHAS@mha.ohio.gov). The agency website includes a directory of state-regulated providers. [mha.ohio.gov/providersbycounty](http://mha.ohio.gov/providersbycounty)

### Ensure eligible individuals have health coverage

People with addiction disorders may not know that they are eligible for Medicaid behavioral health benefits or how to apply. You can learn about Ohio Medicaid-covered services for alcohol and drug addiction at <http://medicaid.ohio.gov/FOROHIOANS/CoveredServices.aspx>

- **Encourage individuals to visit the county Job and Family Services** office to check eligibility for coverage and begin enrollment, or to go online at [benefits.ohio.gov](http://benefits.ohio.gov)
- **Direct those leaving incarceration from a jail or prison** who have a substance use disorder to apply for benefits.

## Encourage the use of medication-assisted treatment

Treatment that includes medication, along with counseling and other supports, is often the best choice for a person with opioid addiction. Medication allows the individual to regain a normal state of mind, free of constant cravings for the drug. It reduces problems of withdrawal and helps people manage their addiction so that the benefits of recovery can be maintained. There are three main choices for medication to treat opioid addiction: methadone, buprenorphine and naltrexone. People can safely take these medications as long as needed – a few months, one to five years, or for life.

- **Promote learning tools for clinicians in various settings.** Free resources are available for physicians and other medical professionals through a federally sponsored program called Providers' Clinical Support System for Medication Assisted Treatment. Sign up for the bimonthly online training at <http://pcssmat.org/>.
- **Support operation of licensed opioid treatment facilities** that provide the largest array of medication-assisted treatment options and must adhere to a strict set of [guidelines](#) that cover patient care. As of 2017, Ohio has 26 such facilities (three within Veteran's Administration facilities). An application must be submitted to the Ohio Department of Mental Health and Addiction Services by organizations that are looking to establish new facilities for medication-assisted treatment across the state.

## LOCAL RESPONSES

**Richland:** Using a state grant, the county jail engaged more than 40 incarcerated individuals in a medication-assisted treatment program from January through June 2016. More than 83 percent of participants continued in treatment upon release and 66 percent were still engaged after 30 days. A stronger relationship between correction and behavioral health systems has increased knowledge of what services are available when someone leaves incarceration. Statewide, similar grant projects served more than 6,600 people in 2016 and 74 percent had no new arrests. Contact Chris Nicastro at [christopher.nicastro@mha.ohio.gov](mailto:christopher.nicastro@mha.ohio.gov) or (614) 466-9969.

**Lucas:** After a first responder has used naloxone to reverse the effects of opioid overdose for someone, the Lucas County Sheriff assists in identifying suppliers of the drug and follows up to help the person who overdosed enter treatment promptly. People who have survived overdoses are identified as "priority patients" and some enter treatment for addiction the day they are released from the hospital. Treatment resources have been increased through Medicaid expansion and levy funding to expand capacity in collaboration with providers. Contact the [Drug Abuse Response Team](#) in the Lucas County Sheriff's Office at (419) 213-6582.

**Athens:** Access to treatment for pregnant women with addiction can be difficult in rural areas. The county took a collaborative approach in addressing this issue after an OhioHealth medical practice noticed an increase in the number of pregnant women coming in with addiction issues. The practice reached out to nearby Health Recovery Services to connect the mothers to treatment. After that was successful, they identified other problems and resources in the community. Soon they were offering housing, childcare and other services for the family. Contact Health Recovery Services Executive Director Joe Gay at [jgay@hrs.org](mailto:jgay@hrs.org) or (740) 592-6724.

## WHAT CAN YOU DO?

*Work to ensure a full continuum of treatment is available to all citizens*

## CHECKLIST

- Identify access gaps and strategies to fill them
- Enlist first responders and health providers in linking at-risk people to treatment
- Embrace locally the use of medication-assisted treatment
- Establish a specialty docket drug court program
- Develop/share culturally relevant information about addiction treatment options

*Taking medication for opioid addiction is like taking medication to control heart disease or diabetes. Used properly, the medication does NOT create a new addiction.*



### Urban minority programs build positive foundations

The state funds 12 [Urban Minority Alcoholism and Drug Abuse Outreach Programs](#) (UMADAOP) that are vital in meeting the substance abuse education, prevention and treatment needs of African-American and Hispanic/Latino Ohioans. Programs are located in Akron, Cincinnati, Cleveland, Columbus, Dayton, Lima, Lorain, Mansfield, Toledo, Warren and Youngstown.

Seven programs also provide alcohol and other drug recovery support services to reduce recidivism of African-American males due to alcohol- or drug-related offenses. These services are provided in Hamilton, Cuyahoga, Lorain, Lucas, Montgomery, Richland and Trumbull counties.

The [Mansfield UMADAOP](#) received grant funds from the Ohio Department of Mental Health and Addiction Services to implement programming for children of incarcerated parents. It is also a location where individuals can access medication-assisted treatment with an on-site physician. Contact Executive Director Dennis Baker at [\(419\) 525-3525](tel:419-525-3525).

## GOAL 6: HELP SUSTAIN RECOVERY

Often people confuse detoxification (detox) with treatment and recovery. Detox is only one step of several in an ongoing recovery process. Individuals with substance use disorders need additional supports to sustain sobriety and manage their illness.

### Know the benefits of community housing and job supports

Ohioans seeking a fresh start in recovery from addiction need a safe place to live and a way to support themselves so they can focus on positive growth and avoid relapse. Ohio has expanded housing options in response to a need clearly identified in communities, and established public-private partnerships to develop strong local drug-free workforces.

- **Support recovery housing**, environments that provide peer support and case management to enhance traditional clinical treatment. [www.ohiorecoveryhousing.org](http://www.ohiorecoveryhousing.org)
- **Engage employers in helping individuals obtain and maintain jobs**, and necessary benefits, that can keep them well and more independent. [www.workingpartners.com](http://www.workingpartners.com)

### Leverage peer support networks

During recovery, it helps if a person can connect with someone who knows what they've been through. Peer services are provided by individuals in recovery from mental illness and/or addiction who use their own experiences as a tool to assist others. They can be a comforting presence with a unique perspective when someone is going through the roughest day of their life, like an overdose. Peer supporters can help individuals as they wait for a detox bed to open up, after they get out of a treatment facility or leave prison, or at other points of transition. The relationship is casual, not clinical, and built on shared experiences between two equals. [mha.ohio.gov/peersupport](http://mha.ohio.gov/peersupport)

- **Gain insight from certified peer supporters** who can help communities and systems relate to the people they want to help.
- **Tap into peer-run organizations**, such as the 78 consumer operated services throughout Ohio. These groups provide peer support, social opportunities, and health and wellness groups.

Peer staff at the Ohio Department of Mental Health and Addiction Services Toll-Free Bridge Line can direct you to local resources. Call [1-877-275-6364](tel:1-877-275-6364) or email [askMHAS@mha.ohio.gov](mailto:askMHAS@mha.ohio.gov).

*"By collecting data and bringing to light the substance abuse issues we face in our community, sharing best practices and working collaboratively, we have the opportunity to tackle this issue in a focused way and have a true impact."*

Dale Foerster, Starr Manufacturing, is part of the Working Partners® Drug-Free Workforce Community Initiative in Trumbull and Mahoning counties.



## Address first responder fatigue

A survey of Ohio's EMS personnel found that nearly a quarter of respondents reported secondary trauma, as a result of frequently engaging with overdose patients and victims. An additional eight percent experienced distress at a level similar to post traumatic stress disorder. Given this important issue, Ohio is developing outreach and training related to trauma experiences of first responders. Ohio's six Trauma-Informed Care Regional Collaboratives will establish learning communities on the topic.

The Ohio Peace Officer Training Academy in Columbus developed a course on Trauma-Informed Policing that all sworn and commissioned law enforcement officers must take. It examines trauma-informed approaches in policing, the prevalence of trauma histories among the people served, and how trauma experiences may impact law enforcement personnel on and off the job. To learn more, contact Kim Kehl at the Ohio Department of Mental Health and Addiction Services, [kim.kehl@mha.ohio.gov](mailto:kim.kehl@mha.ohio.gov) or (614) 644-8442.

## LOCAL RESPONSES

**Fairfield:** On its Lancaster campus, the Recovery Center developed Pearl House, a family-centered treatment program that allows a woman to enter treatment with her life partner as a family unit so all can participate in services. Women and families can receive housing supports if necessary, while receiving outpatient services and/or medication-assisted treatment. The children's developmental needs are also addressed. Contact Recovery Center CEO Trish Farrer, (740) 687-4500.

**Athens:** The John W. Clem Recovery House is a transitional residential facility where men committed to sobriety can gain the mental and emotional skills to become productive members of the community. It operates as a nonprofit, with oversight by a volunteer board of directors. The home provides a structured, safe environment and an introduction to the 12-Step way of life. The goal is for the resident to find employment and living arrangements, and reconnect with family upon discharge after several weeks. Contact Executive Ron Luce at [director@clemhouse.org](mailto:director@clemhouse.org) or (740) 593-3797.

**Putnam:** The Mental Health, Alcohol & Drug Addiction Recovery Board of Putnam County partnered with local leaders and employers to launch the Working Partners® Drug-Free Workforce Community Initiative. The objectives are to increase workforce readiness and employability; build healthier, more productive workplaces; and to create systems to educate employees – who are parents or have influence over young people – to prevent drug use among that population. Similar community initiatives are occurring in 18 other counties. Contact Working Partners® CEO Dee Mason at [mail@workingpartners.com](mailto:mail@workingpartners.com) or (614) 337-8200.

**Montgomery:** The Bennett Cooper Day Reporting Program assists offenders in successful re-entry by providing needed social services and increases public safety by holding offenders accountable through intensive community supervision. Its on-site cognitive restructuring therapy is designed to change an individual's adverse thinking patterns. The program connects the person to substance abuse/mental health services through various agencies and provides education/job training to enable long-term employment. [www.montcourt.oh.gov/department/secure\\_transitional\\_offender\\_program](http://www.montcourt.oh.gov/department/secure_transitional_offender_program)

## WHAT CAN YOU DO?

*Combat the stigma of addiction and welcome recovery supports*

### CHECKLIST

- Discuss the need for supports such as sober housing to promote sustained recovery
- Engage peers who are in recovery who can speak from experience
- Inform employers of ways to help employees maintain recovery
- Develop culturally relevant information and materials about recovery from addiction



## How to set up an Overdose Response Team

Many communities have cross-system collaboration among first responders and social service providers to address the opioid epidemic with a proactive, not punitive, response. The primary focus of an Overdose Response Team is to intervene post overdose to connect the victim and others at the scene to appropriate services.

To establish a team in your community, include local law enforcement, firefighters/EMTs and health care personnel, such as an addiction counselor or nurse, who can help the patient process the overdose physically and emotionally.

The team can also assist friends or family who were present during the overdose with linkage to support services or naloxone kits for prevention of a future overdose. The hospital emergency department should also be part of the team, so that after the patient is medically stable, he or she is encouraged to enter treatment with a warm hand-off that can contribute to a successful intervention.

The response team serves not only the overdose victim but the entire the community by addressing the stigma that often occurs in substance use disorder, and providing prevention education to schools, youth clubs and adult care facilities.

Contact **Andrea Boxill**, Deputy Director of the Governor's Cabinet Opiate Action Team, Ohio Department of Mental Health and Addiction Services, [Andrea.Boxill@mha.ohio.gov](mailto:Andrea.Boxill@mha.ohio.gov).

## GOAL 7: SUPPORT LAW ENFORCEMENT

Ohio is located in the geographic crossroads of America. There are numerous interstate highways and roadways that lead in and out of our state to major metropolitan areas. Ohio is also host to an international boundary with Canada. Because of Ohio's location, drugs flow into the state destined for other areas and for our communities. One way to stem the supply of drugs from entering our communities is to disrupt it before they reach their destination.

### Educate the public on how to report drug and illegal activity

Encouraging the public to report drug and illegal activity will ultimately reduce the demand for drugs.

- **Call #677 or download the "Safer Ohio" app** to your phone to report drug and illegal activity to the Ohio Highway Patrol.
- **Call your local police department or county Sheriff's Office** to report drug and illegal activity.
- **Participate in Community Shield**, which provides members of the general public with training on how to identify possible criminal behavior on Ohio's roadways, to help the Ohio Highway Patrol deploy troopers and resources to the area. [www.statepatrol.ohio.gov/commshield.stm](http://www.statepatrol.ohio.gov/commshield.stm)

### Foster broad inter-agency partnerships

Since 2011, Ohio Highway Patrol troopers have intercepted over 200 million in drugs destined for our communities. The modern face of dynamic, multi-jurisdictional law enforcement operations is the SHIELD Detail.

- **Engage a SHIELD Detail** that combines the personnel, resources and intelligence efforts of federal, state and local law enforcement agencies to conduct multi-day, saturation enforcement operations in communities plagued by crime. [www.statepatrol.ohio.gov/shielddetail.stm](http://www.statepatrol.ohio.gov/shielddetail.stm)
- **Connect with Ohio High Intensity Drug Trafficking Area**, which provides funding to 20 drug task forces throughout Ohio. They also provide free training for law enforcement officers on narcotics and fraud investigations. <https://ohiohidta.net/>
- **Share intelligence among patrol officers and task forces.** Uniformed officers can supply extra eyes in areas that drug task force officers are operating. Whether working traffic enforcement or patrolling a beat, they know their areas well and have established contacts with business owners and residents. Locals may be more willing to talk with a known officer, rather than an undercover officer they don't know. Drug task force officers should share intelligence with uniformed officers for safety and assistance. Uniformed personnel can hand off a criminal suspect to a task force officer, who can conduct forensic interviews to determine whether the person has information that will implicate additional suspects.
- **Form teams that address both enforcement and treatment.** Working with health providers during arrests and investigations will allow law enforcement personnel to link individuals with drug addiction to appropriate treatment. The emphasis on treating a disease over criminalization will not only provide life-saving services but also encourage cooperation in future investigations and prosecutions. Ohio Troopers carry pocket cards that list local treatment contacts and hotlines so they can easily disseminate that resource to a person who may benefit.

## Invite speakers to engage youth

Since 2013, more than 100,000 Ohio students have heard the 5 Minutes for Life prevention message through nearly 900 presentations. More than 2,000 students have taken the next step to serve as ambassadors in their peer group.

- **5 Minutes for Life** centers on Ohio State Highway Patrol troopers, Ohio National Guard members and local law enforcement talking for five minutes with student-athletes, before or after a practice, about responsible decision-making, leadership and encouraging those in their peer group to live a drug-free lifestyle. <http://starttalking.ohio.gov/Prevention/5MinutesforLife.aspx>

## LOCAL RESPONSES

**Hamilton:** The coordination between Hamilton County law enforcement agencies and State Highway Patrol has resulted in extended collaboration and connections being made with Kentucky and Indiana State Police, and record numbers of drug seizures. The [Hamilton County Heroin Coalition](#) is part of a tri-state initiative: <http://injecthope.com>. Contact Alex Linser, Hamilton County Board of Commissioners at [Alex.Linser@hamilton-co.org](mailto:Alex.Linser@hamilton-co.org) or (513) 946-4405.

**Ross:** In 2015, Ross County was awarded \$100,000 by the Ohio Department of Public Safety's Office of Criminal Justice Services to implement a comprehensive approach to combating the heroin overdose epidemic. The [Heroin Partnership Project](#) aims to increase public safety in communities throughout Ohio by developing effective community-based strategies that reduce the demand and supply for heroin and other opioid drugs. The cross-system collaboration involves law enforcement, treatment providers and prevention specialists. Contact the Ross County Heroin Partnership Project at [heroinpartnershipproject@rosscountyohio.gov](mailto:heroinpartnershipproject@rosscountyohio.gov) or its coordinator, Teri Minney, [teresaminney@rosscountyohio.gov](mailto:teresaminney@rosscountyohio.gov).

**Trumbull:** Heroin and opioids were the focus of two of the largest SHIELD details, which combine federal, state and local resources to fight crime and strengthen communities. In Trumbull County, more than 100 officers united and made multiple arrests for drug possession. Those arrested for drug offenses were offered treatment options on the spot. Even motorists stopped for minor traffic violations received a brochure on how to fight addiction.

**Franklin:** A [Heroin Overdose Prevention and Education Task Force](#) coordinates law enforcement efforts to seize drugs tied to overdoses with the proactive linkage of overdose victims and their families to comprehensive preventive, treatment and recovery support services. During one of the largest SHIELD Details, 26,000 doses of heroin were seized. Contact Deputy Sheriff Rick Miner, [rddminer@franklincountyohio.gov](mailto:rddminer@franklincountyohio.gov) or (614) 525-3318.

**Warren:** The [Greater Warren County Drug Task Force](#) is an initiative of the Ohio High Intensity Drug Trafficking Area (HIDTA) program, which provides assistance to local, state and federal law enforcement agencies operating in areas determined to be critical drug trafficking regions of the nation. Their jurisdiction in southwest Ohio is between Cincinnati, Dayton and Columbus, and bordered by Interstates 71 and 75. These major interstate highways offer drug traffickers easy access to the area. Through HIDTA funding, Warren County can better coordinate drug and money laundering investigations in the region.

## WHAT CAN YOU DO?

*Report drug and illegal activity to the Patrol by calling #677 or using the Safer Ohio phone app*

## CHECKLIST

- Help with Drug Take Back days for proper prescription drug disposal
- Work with specialty-docket drug court
- Employ community-based supervision options to decrease re-arrests
- Engage state resources for investigations through the Ohio Department of Public Safety or the Ohio Attorney General's Office
- Ensure law enforcement agencies are members of a local drug task force
- Plan a SHIELD Detail
- Help professionals in law enforcement and social services join forces to link people to services







# Fighting the

**JAN. '11** — Gov. Kasich announces establishment of Governor's Cabinet Opiate Action Team dedicated to fighting opiate addiction on all fronts.

**MAY '11** — Gov. Kasich signs Ohio's "Pill Mill" Bill into law, cracking down on illegal pain clinics fueling the opiate crisis.

**MAY '13** — Prescriber guidelines for management of chronic, non-terminal pain introduced.

Ohio establishes Southern Ohio Treatment Center to address treatment needs of residents in Appalachian communities.

**JAN. '14** — Medicaid Expansion begins — 492,000 Ohioans now have access to treatment services.

Start Talking! statewide youth drug prevention initiative launches.

**Start Talking!**  
Building a Drug-Free Future

**FEB. '11** — Gov. Kasich issues Executive Order authorizing the expansion of Medication-Assisted Treatment (buprenorphine, naltrexone and methadone).

**SPRING/SUMMER '11** — Task Force establishes statewide GAP Network to promote family engagement efforts to combat opiate addiction.  
Project DAWN (Deaths Avoided with Naloxone) expanded.



**MAY '12** — Gov. Kasich announces prescriber guidelines for emergency room and acute care facilities.

Ohio hosts first statewide Opiate Summit, drawing more than 1,000 addiction, criminal justice, policy and medical professionals.

Ohio Medicaid provides coverage of Medication-Assisted Treatment.



**JULY '13** — Gov. Kasich signs legislation establishing a naloxone pilot project.

**AUG. '13** — Ohio receives \$10M federal grant to implement Screening, Brief Intervention and Referral to Treatment.



**MAR./APR. '14** — Four Maternal Opiate Medical Support (MOMS) pilot programs established to develop best practices for treating addicted mothers and addressing Neonatal Abstinence Syndrome.

Addiction Treatment Program piloted in six county drug courts to focus on non-violent offenders.

Gov. Kasich signs legislation making lifesaving overdose antidote naloxone more widely available.

**2011**

**2012**

**2013**

**2014**

# Opiate Crisis in Ohio | 2011-2017

**JULY '14** — Investments target funding for prevention (\$6.5M), recovery housing (\$10M) and drug courts (\$4.4M).

**FEB. '15** — State budget includes \$1M investment for naloxone (resulting in 2,300 lives saved in SFY 2016); creates partnership to expand the availability of treatment within state prisons and upon release and authorizes additional \$5M to expand Addiction Treatment Program to additional county drug courts.

**SEPT. '15** — Ohio is one of 16 states to receive approx. \$4M from the Centers for Disease Control to combat prescription drug overdoses.

**JAN. '16** — Governor's Cabinet Opiate Action Team, in partnership with Ohio's medical community, releases opiate prescribing guidelines for treating acute pain.

**2016** — Ohio Department of Public Safety provides more than \$5.5M to support 40 local drug task forces throughout Ohio.

**MAY '16** — Ohio Departments of Health and Mental Health and Addiction Services partner to launch multi-media naloxone/fentanyl awareness campaign.

**MAR. '17** — Announcement of new rules limiting the amount of opiates that can be prescribed for acute pain to seven days for adults and five days for minors.

**DEC. '14** — Gov. Kasich signs bill into law requiring school districts to provide education on Rx medication and other opiate abuse.

Highway Patrol reports that it has seized more than 38,000 prescription pills (1,086 cases) and 14,150 grams of heroin (806 cases) for calendar year 2014.

Ohio EMS personnel administer naloxone 16,121 times for calendar year 2014.



**JULY '15** — Gov. Kasich signs legislation that further expands availability of naloxone by permitting physicians to issue a standing order.

Governor's Cabinet Opiate Action Team publishes community *Health Resource Toolkit for Addressing Opioid Abuse*.

**OCT. '15** — Gov. Kasich announces \$1.5M investment to integrate Ohio's prescription drug monitoring program into electronic medical records and pharmacy systems across the state.



**MAR. '16** — A Centers for Disease Control and Prevention report recognizes Ohio's "comprehensive response to the increase in fentanyl-related deaths" and "a wide range of activities across Ohio state government in response to the opiate crisis in Ohio."

**JUNE '16** — Gov. Kasich signs "Good Samaritan" legislation that provides immunity from prosecution to those who seek emergency help for the victim of an overdose.

**2016** — More than 53,000 Ohio students participate in "5 Minutes for Life" drug abuse prevention presentations during the school year, and nearly 60,000 parents and teachers receive bi-weekly Know! parent tips and TEACHable Moments.

**JAN. '17** — Gov. Kasich signs legislation strengthening prescription drug oversight, encouraging responsible treatment and supporting overdose prevention. Provisions include registration of all pharmacy technicians; expanded access to naloxone (including schools, homeless shelters and halfway houses); limitations on high volume prescriptions; and streamlined regulations for methadone providers.



**2015**

**2016**

**2017**



**John R. Kasich**, *Governor*  
**Tracy J. Plouck**, *Director*,  
*Ohio Department of Mental Health and Addiction Services*