OPIOID ABUSE PREVENTION AND TREATMENT IN LOS ANGELES COUNTY

Key Trends

- California had the 4th highest number of drug overdose deaths in the nation, 4,868 in 2017; the age-adjusted state mortality rate of 12.3 deaths per 100,000 people, however, was lower than the U.S. rate overall, 21.6.1
- In LA County, there were an average of 464 accidental opioid-related deaths per year from 2011-2017.2,6
- On average, individuals who died from drug overdoses died 30 years prematurely.3
- Hospitalizations and emergency department visits related to opioid diagnoses have increased 31% and 51%, respectively, between 2006-2017, with a substantial increase in costs associated with hospitalizations from opioid diagnoses.4,6
- According to the National Survey on Drug Use and Health 2012-2014, the prevalence rate of misusing/abusing prescription opioids in the past year in LA County is 4.7%, higher than the national average of 4.3%.5

Prescription Opioid Overdose/poisoning-Related Emergency Department Visits in LA County, 2005 – 2017

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1Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2017 on CDC WONDER Online Database, released December 2018. 2LA County Medical Examiner’s/Coroner. 3LA County Department of Public Health Office of Health Assessment and Epidemiology. Mortality in Los Angeles County 2013: Leading causes of death and premature death with trends for 2004-2013. 4California Office of Statewide Health Planning and Development. 5Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health. 6https://insight.livestories.com/s/v2/prescription-opioid-abuse-in-los-angeles-county-with-heroin-addendum/2a025c91-e626-482e-b5fb-c0db7fe58474/
Opioid Prevention in LA County

DPH has developed a broad, multifaceted, and coordinated opioid prevention strategy in LA County to reduce the toll of the opioid crisis on LA County residents and maximize health and well-being. Goals are to prevent opioid use, reduce deaths from overdoses, and provide easy access to treatment programs. The following intervention opportunities support these goals and build upon initiatives underway.

Public Messaging Campaigns

- DPH is currently working to develop and launch targeted, data-driven public messaging campaigns to enhance community awareness about the dangers of prescription drug abuse and the opioid epidemic. Campaigns include school-based strategies and utilize a range of platforms to reach relevant audiences (e.g., print, radio, social media, billboards, messaging on buses/trains).
- The formation of a Youth Advisory Council comprised of youth from a representative selection of communities across the County will inform campaigns and collect feedback and ideas from young people that support positive youth development.

Funding Community Coalitions

- DPH currently funds 8 community coalitions throughout LA County that promote local policies and alternative activities for high-risk youth and promote protective factors such as school-connectedness/academic competence, family cohesion, self-control, anti-drug use policies, and strong neighborhood attachment.
- The Help for Addiction Recovery and Treatment (HEART) Collaborative is a countywide, cross-sector collaborative, formed to comprehensively address the opioid crisis in Los Angeles County. All opioid-related initiatives across the County are coordinated under the HEART Collaborative within a unified strategy; this includes Safe Med LA (www.SafeMedLA.org) and the Los Angeles County Community Collaborative (LAC3). The HEART Collaborative includes representatives from the Chief Executive Office, Health Agency, DPH, Department of Health Services (DHS), Department of Mental Health (DMH), Safe Med LA, Los Angeles Sheriff’s Department, LA County Fire Department, Office of Diversion and Reentry, Emergency Medical Services Agency, Medical Examiner-Coroner's Office, the District Attorney's Office, Whole Person Care (WPC-LA), and Correctional Health Services (DHS-CHS).

Optimizing Utilization of CURES, California’s Prescription Drug Monitoring Program

- DPH is engaged in efforts to increase the number of prescribers and dispensers who utilize CURES, the State’s prescription drug monitoring program, and ensure that local jurisdictions can more meaningfully use the data from CURES to track and provide outreach to those providers whose prescribing practices fall outside of the norm.
Expanding Access to Naloxone

- First responders and family members of an individual with an opioid use disorder or receiving high doses of opioid pain medications should have access to naloxone and know how to administer it in case of an overdose. Expanding education, training, and distribution of naloxone would support this need. DPH received and distributed an allocation of intranasal naloxone (total value of about $400,000) from the California Department of Public Health, and is committed to expanding harm reduction efforts.
- DPH is engaging hospital providers to discuss strategies for ensuring that patients seen in an emergency department for an opioid-related overdose receive naloxone and naloxone training prior to discharge.

Family Resource Centers

- Establish Family Resource Centers that offer individuals with substance use disorder and their family members access to culturally and linguistically appropriate prevention and treatment information, naloxone training, and referrals to housing and community resources (e.g., job training, social and legal services, peer-to-peer coaching, and transportation vouchers). This project aims to increase opportunities for youth, adults, and family/friends across Los Angeles County to better understand SUDs and connect to needed prevention and treatment services. The centers will serve as welcoming environments to address questions about SUD conditions and services including risk reduction (e.g., fentanyl test strips), prevention (e.g., brief intervention, youth development), and treatment (e.g., outpatient, residential, medications for addiction treatment [MAT]).

Opioid Treatment in LA County

Implementation of Expanded Substance Use Disorder (SUD) Benefits

The County began implementing the Drug Medi-Cal Organized Delivery System (DMC-ODS) Waiver in July 2017, as a component of the State’s 1115 Medicaid Waiver. DMC-ODS provides an unprecedented opportunity to expand SUD treatment services to eligible beneficiaries to include withdrawal management, short-term residential treatment, case management, and recovery support services for LA County beneficiaries, including single, childless, and homeless adults.

LA County has increased access to SUD services through multiple entryways:

- 24/7 Substance Abuse Service Helpline (SASH); clients interested in seeking SUD treatment can call toll-free to receive a brief screening and referral to treatment providers.
- Service and Bed Availability Tool (SBAT), a web-based tool that provides a dashboard of available SUD services throughout LA County. This tool is available to both providers and the general public to assist in real-time identification of available treatment services and beds.
- LA County has improved access to face-to-face screening and service linkage through Client Engagement and Navigation Services (CENS). Eight CENS area offices and 67 co-located sites across the County (e.g., courts, probation, Sheriff’s Department, homeless encampments, health facilities, Permanent Supportive Housing, Health Agency sites) provide assessment and linkage services to county residents.
LA County Department of Public Health
To protect health, prevent disease and injury, and promote health and well-being for everyone in Los Angeles County

- **35,799** residents have been treated through the expanded DMC-ODS program across the County in FY 17-18
- **Approximately 40,000** additional residents are anticipated to be enrolled in SUD Services in the system during FY 18-19

**Interventions ensuring necessary treatment for opioid use disorders that would build upon the continuum of care in the DMC-ODS system include:**

**Recovery High Schools**
- *Recovery High Schools* offer youth receiving SUD treatment an opportunity to complete their education in a sober environment that helps to facilitate their recovery. Locating these programs within an existing school would allow the County to dedicate funding for recovery-based support services while leveraging Department of Education-supported educational components.

**College Campuses**
- Collaborations with community colleges and universities are critically important in expanding opportunities to prevent and address risky behaviors and addictions among college students. Programs and policies on campuses can reduce opioid misuse, binge drinking, driving under the influence, and illicit drug use.

**Perinatal Services**
- DPH is implementing an initiative to link perinatal nurses and social services workers with patients in SAPC’s contracted network provider perinatal SUD program.

**Recovery Bridge Housing (RBH) Housing Network**
- RBH provides safe, culturally appropriate, and monitored transitional housing options for adults completing SUD treatment.

**Federal Funding for State and Local Action to Prevent Opioid Abuse**
- H.R. 6, the Substance Use Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act, among other things, reauthorizes $500 million annually, from 2019-2021, in opioid grant funding created by the 21st Century Cures Act to support state responses to the opioid epidemic. An additional $496 million annually from 2019-2023 will go towards the Centers for Disease Control and Prevention (CDC) data collection and analysis related to overdoses of controlled substances, and to assist states and localities through grants, training, and technical assistance.
- Recent Congressional action in the Consolidated Appropriations Act of 2018 (H.R. 1625; Pub.L. 115–141) increased investment in the nation’s and state and local response to the opioid epidemic. H.R. 1625 provides $1 billion in new funding through SAMHSA for grants to States to address the opioid crisis, with a 15 percent set-aside for states with the highest mortality rate related to opioid use disorders.
• H.R. 1625 also provides $475,579,000, for the CDC’s Opioid Prescription Drug Overdose Prevention (PDOP) Activity for expansion of state prevention activities such surveillance and data collection, better monitoring of prescribing and dispensing practices, Prescription Drug Monitoring Programs (PDMPs), and improved timeliness and quality of data.

**Strategies to Support LA County’s Opioid Prevention and Treatment Initiatives**

• Direct funding for large local health departments to address both prevention efforts and reduce the overall numbers of opioid-related deaths.

• Expansion of naloxone education, training, and distribution and other harm reduction measures to prevent overdose.

• Support for innovative local prevention and treatment strategies including school-based prevention and treatment initiatives, community policy change efforts that reduce underage access to illicit drugs and alcohol, targeted media campaigns, improved safe prescribing practices, prescription drug monitoring program improvements, establishing family support and recovery centers, and Recovery Bridge Housing networks.