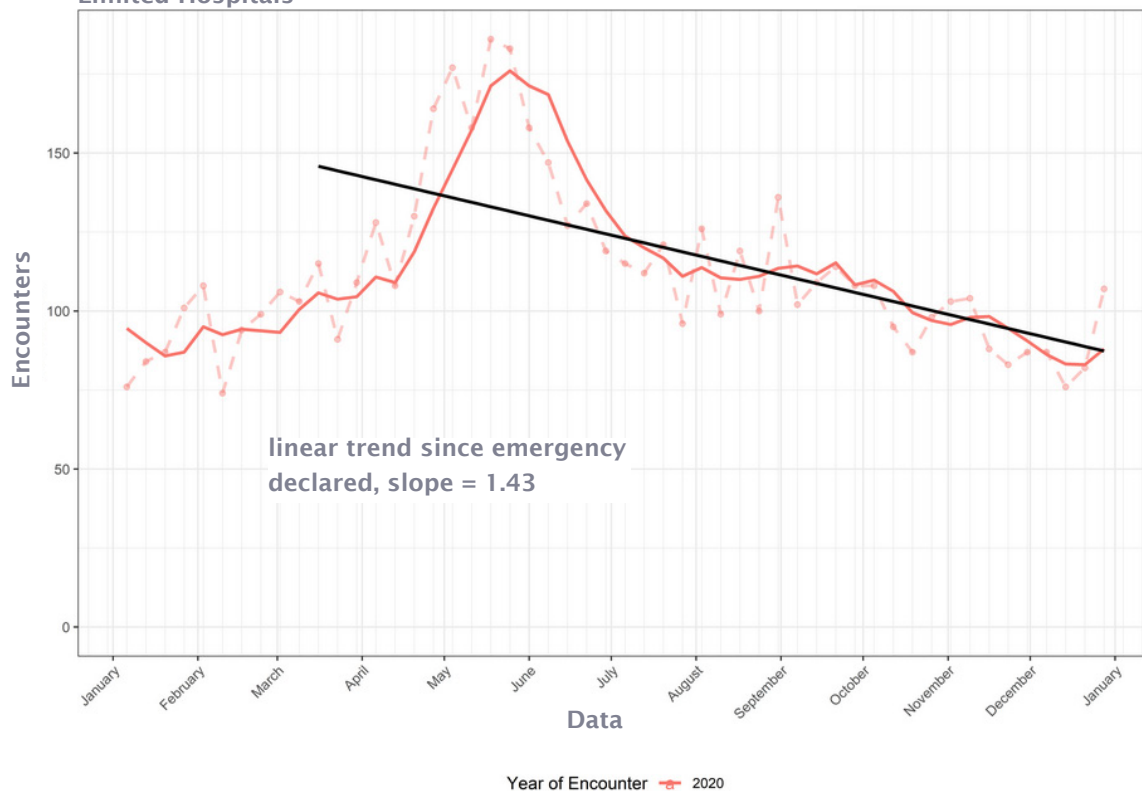


STATEWIDE OPIOID OVERDOSES TREATED IN EMERGENCY DEPARTMENTS TRENDING DOWNWARD

SyS Opioid Overdose-Related Encounters, Aggregated by Week, Limited Hospitals*



Solid lines represent 4-week rolling average of Opioid Overdose SyS Encounters. Points and dashed lines represent raw counts of records.

*Hospitals limited to those facilities connected in January 2020; new facilities onboarding influence counts.

After an initial spike soon after the start of the COVID-19 pandemic shutdown in Kentucky, statewide opioid overdoses have been trending downward consistently and are nearly back to pre-pandemic levels. This trend should be interpreted with care since the syndromic (SyS) data feed lacked full statewide coverage. Additionally, conditions at the local level may be masked in the state-level data aggregation.

Even with the return to pre-pan-

dem levels, the average daily count of opioid overdoses in 2020 is still higher than in previous years.

Reports on trends at the community level are available, subject to data suppression for small counts, by making a request to kiprc_data_request@l.uky.edu.

To learn more about drug overdose deaths in 2020, check out the [Kentucky Data 2 Action Community Summit](#) described in the Upcoming Events section of this newsletter.

Produced by the OD2A program at the Kentucky Injury Prevention and Research Center (KIPRC), as bona fide agent for the Kentucky Department for Public Health, April 2021. This report was supported by Cooperative Agreement Number NU17CE924971-02-01, funded by the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention or the Department of Health and Human Services.

FRANKLIN COUNTY ASKS ITS KIDS TO JUST SAY YES

By Jonathan Greene
Content Manager, KIPRC

As states continue to grapple with drug overdoses, communities are turning to creative initiatives to curb substance use.

With help from an Overdose Data to Action mini-grant from the Kentucky Injury Prevention and Research Center, the Franklin County Health Department (FCHD) recently launched the Just Say Yes initiative, inspired by the Icelandic Prevention Model (IPM) that looks for effective programs to prevent substance misuse.

“The evidence base behind the Icelandic Prevention Model was the strongest we’d seen, and the focus on healthy activities for youth really resonated in our community, where there has long been a concern about inadequate activity opportunities for kids,” said Amelia Berry, Just Say Yes Coordinator for the FCHD.

The goal of the initiative is to keep kids engaged in healthy activities when school is out to prevent substance use and other risky behaviors, which tend to take hold during adolescents’ unsupervised time.

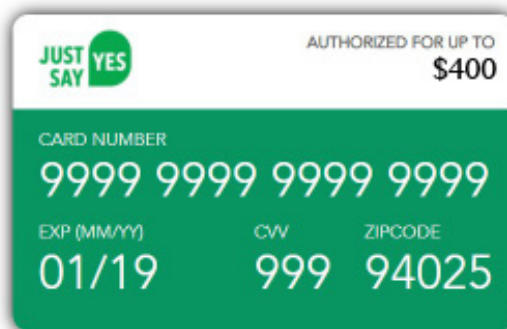
FCHD and its partners created the “Yes Card,” a \$400 electronic debit card that can be used to pay for after-school and other out-of-school activities from a list of approved program providers. The Yes Card can be used at a variety of locations, including Kentucky Dance Academy, Yes Arts, Josephine Sculpture Park, Broadway Clay, Kentucky Gem Cats, My Old Kentucky Om Yoga Studio, Canoe Kentucky, Frankfort Martial Arts, and New Day Ministries, an equine-based life skills program.

A pilot group of 300 students will receive three Yes Cards over the

next two and a half years.

“Despite obvious barriers posed by COVID, the launch has been very successful,” Berry said. “The response has been extremely positive, especially from parents and guardians, who overwhelmingly report that the Yes Cards have allowed their children to access programs that would’ve otherwise been out of reach financially.”

According to the FCHD, all providers attend an orientation that includes training in the Icelandic Prevention Model. Six hours of training



The Yes Card can be used to pay for after-school and out-of-school activities in and around Franklin County.

are required each year, including training in youth development, trauma-informed practices, mental health first aid, and equity, diversity, and inclusion. Providers also must submit background check information for anyone who will be working with youth and sign a contract agreeing to attend trainings, maintain proper insurance coverage, and follow applicable laws, policies, and best practices, including COVID protocols.

The Just Say Yes initiative also adapted Iceland’s youth survey for all 7th- through 10th-grade public school students in Franklin County. The survey, administered annually or biannually, assesses key risk and protective factors as drivers of substance use. The survey has been

updated to include questions about the impact of the pandemic, and Just Say Yes partners added questions aimed at understanding the impact of political unrest and racial injustice on students’ mental health.

The 74-question survey is anonymous and includes detailed questions about a wide range of risk and protective factors (“How many hours do you sleep on an average night?”, “In the last seven days, how often did you go out and return after midnight?”, and “In the last 30 days, how many days were you absent from school?”), as well as questions about substance use, mental health, and delinquency indicators. Nearly 1,700 Franklin County Students—71% percent of all public school 7th through 10th graders—filled out the survey in December. Berry expects to receive the data from the survey in February.

OD2A grant funding covers the cost of training, technical assistance, and data analysis provided through a contract with the Icelandic Center for Social Research and Analysis (ICSRA, aka “Planet Youth”), whose researchers assist communities around the world that are implementing the IPM. ICSRA will analyze the data and present key findings and recommendations to the coalition and community stakeholders, who will use the information to identify additional prevention interventions to decrease risk factors and increase protective factors. Surveys will be repeated annually to track substance use rates, detect changing trends in risk/protective factors driving use, and adjust interventions as needed. The program also receives support from the Foundation for a Healthy Kentucky.

“COVID has been a crash course in the public health impact of coordinated community planning and

action,” Berry said. “This is really the key to the Icelandic Prevention Model as well—the most important aspect of the work is strong, intentional collaboration among community stakeholders, policy-makers, and researchers. The Franklin County Health Department is incredibly fortunate to have long-standing partnerships with both of our local school systems, our city and county governments, our county’s ASAP [Agency for Substance Abuse Policy] board, our faith communities, and the community-based organizations that work with kids and families every day.”

For more information on the Planet Youth evidence-based approach to adolescent substance use prevention, please visit <https://planetyouth.org>.

KyOD2A Happenings is produced by the Kentucky Injury Prevention and Research Center, as bona fide agent for the Kentucky Department for Public Health. To comment on the content of this newsletter or to subscribe or unsubscribe, contact KIPRCinfo@uky.edu.

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Ron Clatos



Kentucky Public Health
Prevent. Promote. Protect.

FINDHELPNOW.ORG NATIONAL EXPANSION CONTINUES

While many barriers exist for accessing substance use disorder (SUD) treatment, the difficulty of finding a treatment facility that has openings and is accepting patients is one of the most significant. As a way to reduce this barrier, the Kentucky Injury Prevention and Research Center (KIPRC) created FindHelpNowKY.org, a near-real-time SUD treatment locator that has nearly real time information on available treatment openings for Kentucky facilities.

To build on the success of FindHelpNowKY.org, KIPRC is utilizing funding from the Centers for Disease Control and Prevention’s Overdose Data to Action grant to expand the treatment locator nationally. KIPRC staff are working with states or municipal jurisdictions to implement the national platform FindHelpNow.org for their citizens. Since the national launch of FindHelpNow.org in March 2020, Tennessee, three counties in Ohio, and two counties in California have decided to implement the FindHelpNow.org website platform.

The first adopter of FindHelpNow.org, the state of Tennessee, is creating its jurisdiction-specific landing page, developing marketing materials, and reaching out to the state’s SUD treatment facilities to enroll and develop their facility database.

A pilot test for the entire state of Ohio, Erie, Licking, and Clark counties initiated plans for platform adoption in September 2020. Testing began in January 2021. KIPRC is working with its software development company, APAX, to develop a way to combine three counties into one jurisdiction.

Placer and Nevada counties, California, signed an MOU and began customizing its page and database in January of 2021. Early on, KIPRC worked with these counties to share strategies on creating partnerships and onboarding facilities to help get their website off the ground.



Currently, seven other jurisdictions are considering adopting the FindHelpNow.org platform.

Under Kentucky’s OD2A program, KIPRC will provide technical assistance to any jurisdiction developing its own SUD treatment locator website. For example, Lake County, California, was tasked with creating an SUD treatment facility locator and website. As an alternative to adopting the FindHelpNow.org platform, Lake County requested technical assistance to help design and implement its own SUD treatment facility locator website. The KyOD2A team provided resources regarding the creation of an SUD treatment facility list as well as information on SUD treatment facility engagement and onboarding. The resultant Lake County website is located at www.recoverynowLC.com.

If anyone outside of the state of Kentucky has questions about or is interested in developing their own version of the FindHelpNow.org treatment locator, please contact Catherine Hines at Catherine.Hines@uky.edu.

MOBILE HARM REDUCTION DURING IMMOBILE TIMES

By Jonathan Greene
Content Manager, KIPRC

Despite interruptions from an ongoing pandemic, the Kentucky Department for Public Health and Kentucky Pharmacists Association's Mobile Harm Reduction Unit has been able to partner with local health departments to distribute naloxone kits and educational handouts during COVID-19 testing events.

Jody Jagers, Director of Pharmacy Public Health Programs for the

rupted by the pandemic, which forced the team to get creative.

"We realized that several health departments are offering drive-through COVID-19 testing events and thought perhaps that might be an opportunity for us to partner with them to provide naloxone education and distribution to interested individuals that were already coming to be tested," Jagers said.

The Mobile Harm Reduction Unit partnered with the Franklin County Health Department (FCHD)

to pilot the program.

Sally Brunner, a nurse administrator with the FCHD, said the first event—a community event held July 22 at Dolly Graham Park—came together quickly but proved to be an efficient and productive endeavor, according to Brunner.

"Providing multiple services with a 'one-stop-shop' concept was a success," Brunner said. "FCHD has performed other multiple service events and has learned that creating 'easy access' to health care

deployed for nine events in seven counties and dispensed 408 two-dose units of Narcan.

Jagers said the response so far has been positive.

"The overwhelming majority of people getting tested for COVID-19 has also received naloxone education or free doses of Narcan to take home," he said. "Many have shared stories of loved ones or friends/neighbors that have substance use struggles."

The Mobile Harm Reduction Unit paired up with events ranging from stand-alone naloxone training to opioid overdose awareness walks and COVID-19 and HIV/HCV testing. When possible, teams of two or more Harm Reduction Unit personnel engaged in street-level outreach at sites remote from the main event.

When events were suspended due to surging COVID-19 cases and the onset of less predictable weather, the team worked on developing a process to provide virtual events that are county-specific.

"We are not attempting to participate in flu vaccine events at the moment, though we might be able to tie in with COVID-19 vaccination events in the future," he added.

Jagers said the best way for people to find out about events is to follow their local health department on social media.

The Mobile Harm Reduction Unit is a partnership between the Kentucky Department for Public Health, the Cabinet for Health and Family Services (via the Kentucky Opioid Response Effort grant), the Kentucky Injury Prevention Research Center (via the Opioid Data to Action grant), and the Kentucky Pharmacists Association/Kentucky Pharmacy Education and Research Foundation.



Kentucky Pharmacy Education and Research Foundation, said the mobile unit's mission is to travel to mobile, or remote, events to make it easier for people to access naloxone. However, plans for the mobile unit were dis-

rupted by the pandemic, which forced the team to get creative. Partnering with the [Mobile Harm Reduction] Unit proved beneficial to our clients and to the community in a unique way."

From July to November, the Mobile Harm Reduction Unit was

KIPRC UNVEILS REDESIGNED WEBSITE

In January, the Kentucky Injury Prevention and Research Center—kiprc.uky.edu. The updated website features a modern design along with information on each of KIPRC’s programs.

The new website features our most recently uploaded resources as well as news and announcements regarding KIPRC’s Injury Focus Areas: Community Injury Prevention, Drug Overdose Prevention, Intentional Injuries, Motor Vehicle Injuries, Occupational Safety and Health, and Trauma. On each Injury Focus Area page, visitors will find a list of programs related to the focus area

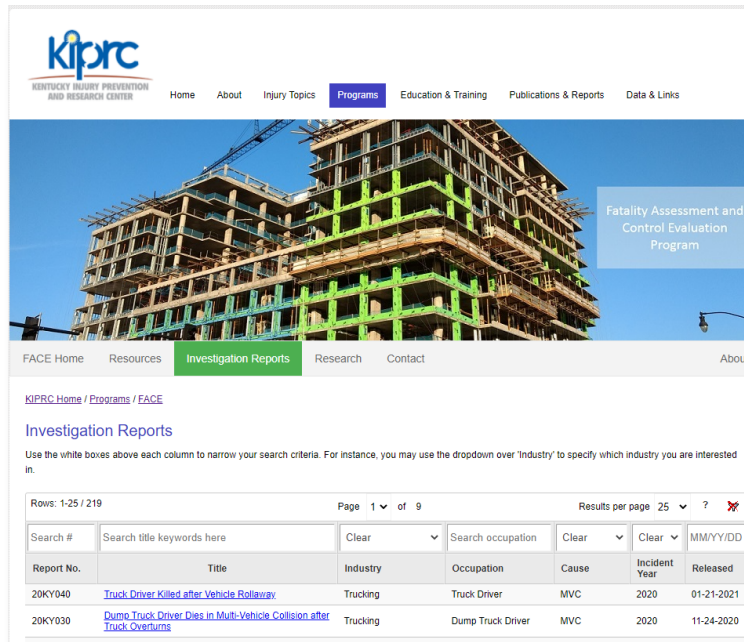
and a listing of recent reports.

The new website makes accessing data easier than ever. In addition to the link to request a data report, vis-

itors will also find dashboards detailing occupational death investigation reports and drug overdose fatalities in Kentucky, state- and county-level occupational injury reports, and other data-driven resources.

To find a complete grouping of resources (i.e., county profiles, dashboards, annual reports), visit the resource library. The most recent publications from KIPRC staff and news stories can be found under Publications and News, respectively.

Please direct any questions or comments regarding the website to KIPRCinfo@uky.edu.



DRUG OVERDOSE PREVENTION TACKLE BOX: A GUIDE FOR COMMUNITIES

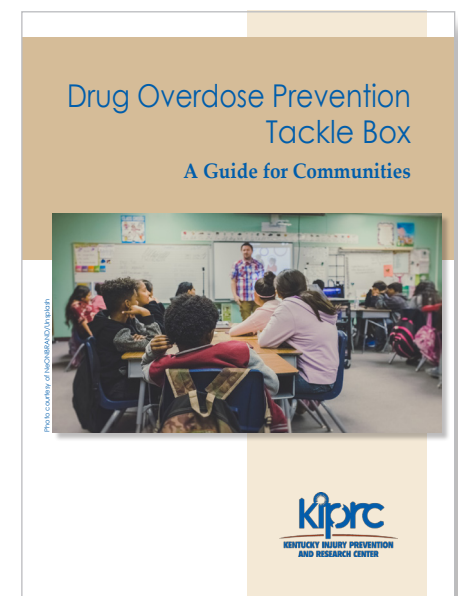
The individual and social impacts of the drug overdose epidemic have left many communities searching for effective ways to reduce substance misuse and drug overdoses. The complex nature of the problem requires widely accepted and evaluated intervention strategies for community leaders, public health officials, and health care providers.

This complex problem requires a multifaceted approach, especially at the community level. Multiple strategies and programs are required to target varying age groups—from teens and young adults through working-aged adults to seniors—and individuals with widely varying education and income levels. KIPRC created

The Drug Overdose Prevention Tackle Box: A Guide for Communities to help Kentucky’s communities, especially rural and small-town Kentucky.

According to Drug Overdose Community Interventions Program Manager Genia McKee, the Tackle Box is for individuals and agencies that make up the whole community. She said it’s not written with only health departments in mind.

“It is to assist local communities, stakeholders, new coalition members—anyone interested in coalition building and community-based overdose prevention,” McKee said. “It’s a good, free resource for people new to coalition building and a nice refresher for those who have been doing coal-



tion work for a while.”

The Drug Overdose Prevention Tackle Box contains two sections. The

first outlines how to design an overdose prevention strategy best-suited for a particular community. McKee said most communities already have programs. With that in mind, one aim of the Tackle Box is to encourage communities to leverage the work, energy, and resources of a community and to not duplicate work.

“Part I is useful for all kinds of community-based and coalition work, not only harm reduction and drug overdose prevention. Its chapters are also designed to stand alone, to be

read when needed,” she said.

Part II is a listing and vetting of more than 40 evidence-based, evidence-informed, and promising practices. McKee said the list is not complete nor is it designed to be, but it is a starting point.

“Our intent in Part II was to start a listing of programs that are easy to sort through and compare and are compatible with most Kentucky communities and, if possible, to address program cost, program evidence base, and pros and cons of each,” she said.

McKee added she would like citizens and professionals to send other programs that they think might be good to add to Part II. She said the plan is to update Part II as new information and programs become available. Program suggestions can be sent to genia.mckee@uky.edu.

To view the Tackle Box, visit <https://kiprc.uky.edu/programs/drug-overdose-community-interventions> and click on the Explore link.

UPCOMING EVENTS

Kentucky Data 2 Action Community Summit, April 29, 2021, 1:30–2:00 PM

Join data analysts from KIPRC for a virtual discussion of trends and patterns in drug overdose deaths that occurred in 2020, with a special emphasis on the types of drugs involved in these deaths and the age groups that experienced the greatest increase in deaths. To register, visit https://uky.zoom.us/webinar/register/WN_OT-8PpDzQUGY4vb2UxHXBw. Contact Meghan Steel at meghansteel@uky.edu.

The Local Lens is a new podcast created and presented by the Powell County (Kentucky) Health Department and Powell County CARES. Each week, host Nate Brooks and special guests talk about different aspects of Powell County’s experience with the drug epidemic. To listen to episodes, visit <https://www.youtube.com/channel/UCYvQAsq61I-jLmTtpa4QOfWw>.

NEW REPORTS

Cooper HL, Cloud DH, Freeman PR, Fadanelli M, Green T, Van Meter C, Beane S, Ibragimov U, Young AM. [Buprenorphine dispensing in an epicenter of the U.S. opioid epidemic: A case study of the rural risk environment in Appalachian Kentucky](#). *International Journal of Drug Policy*. 2020 Nov;85:102701. DOI: 10.1016/j.drugpo.2020.102701. Epub 2020 Mar 26. PMID: 32223985; PMCID: PMC7529684

[KSURE Brief # 10: Five Major Overdose-Related Substances in Kentucky](#), January 1, 2017–March 31, 2020 [Possession and Trafficking Citations, Drug Overdose Related Deaths, Emergency Department Visits, Hospitalizations, Submissions to State Police Lab, and General Drug Overdose Related Events).

[K-SURE Brief # 9: Report: A Three-Year Review of Substance Use and Distribution in Kentucky, 2017–2019](#). A report examining possession and trafficking citation, drug overdose-related death, emergency department visit, hospitalization, and state police lab submission data aggregated at the state and Kentucky State Police post levels.

Tyndall Snow LM, Hall KE, Custis C, et al. [Descriptive exploration of overdose codes in hospital and emergency department discharge data to inform development of drug overdose morbidity surveillance indicator definitions in ICD-10-CM](#). *Injury Prevention*. 2021;27:i27-i34. DOI: 10.1136/injuryprev-2019-043520 PMID: 33674330 PMCID: PMC7948180

Yang H, Pasalic E, Rock P, Davis JW, Nechuta S, Zhang Y. [Interrupted time series analysis to evaluate the performance of drug overdose morbidity indicators shows discontinuities across the ICD-9-CM to ICD-10-CM transition](#). *Injury Prevention*. 2021 Mar;27(S1):i35-i41. DOI: 10.1136/injuryprev-2019-043522. PMID: 33674331; PMCID: PMC7948182