

OPIOID CRISIS IN HOOPA VALLEY:



KMC's Holistic Approach

AGENDA

The Hoopa Valley and KMC

- The Lay of the Land
- Primary Care Medical Home

Departmental Presentations

- Medical Clinic
 - Local opioid crisis
 - Opioid response
- Behavioral Health
 - Integrating mental health
- Pharmacy
 - Curbing the high demand for prescription opioids



THE HOOPA VALLEY

Na:tinixwe which means "people of the place where the trails return"

Tribe located in traditional territory – life and culture linked to this river and this land

Remoteness protected tribe from colonization longer than most

Many culture and traditions of the Hoopa people have remained intact and are still a part of their everyday lives - prayers, world renewal and seasonal dances, medicine and healing ways

GEOGRAPHIC CHALLENGES

Ambulance transport is one hour from Emergency Departments

Periods of severe weather/environmental conditions:

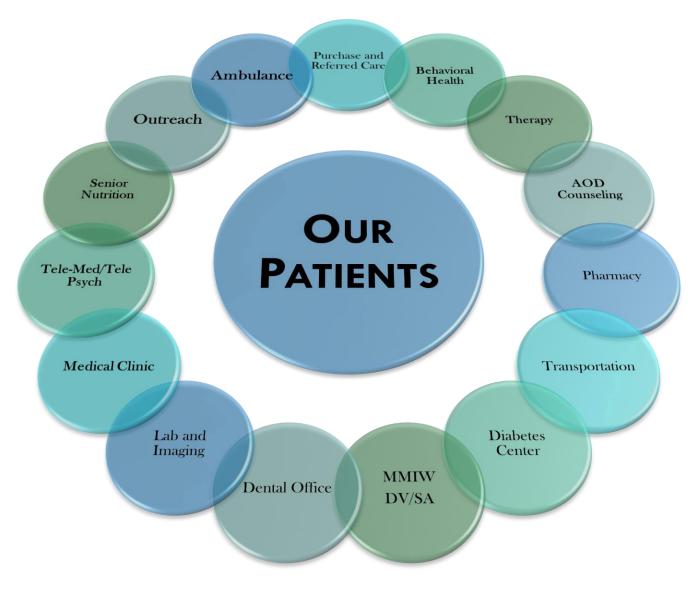
- Rockslides
- Snow
- Wildland fire and smoke

Cell service limitations



Photo source: Hoopa TEPA

K'IMA:W MEDICAL CENTER MODEL



MEDICAL CLINIC



A Joint Commission Accredited Primary Care Medical Home

Alcohol and Other Drugs-related Deaths by Substance

Total Count: 49

4% Drug & Other - toxic levels of an illicit substance found but were not the only cause of death

20% Alcohol - includes intoxication, chronic alcohol abuse or alcoholism 21% Opioids - includes heroin and precription drugs, such as tramadol, codeine, morphine, oxycodone and fentanyl

8% Drug & Alcohol

18% Multiple Drugs

29% Stimulants includes methamphetamine, amphetamine, cocaine and MDMA

1000 N=201 TC1

Source: Humboldt County Sheriff's Office

HUMBOLDT COUNTY SNAPSHOT

Graphic by Catherine Wong — The Times-Standard



IMPACT ON HEALTH

Addiction

- Chronic disease
- Can span the full life cycle
- Polysubstance use/misuse

Pregnancy complications

Neonatal Abstinence Syndrome

Social effects

- ACEs increased for children of addicts
- Family systems assuming greater roles
 1 stress
- Added caseload for family services

Life threatening infections

- Phlebitis and abscesses
- Sepsis
- Endocarditis

Co-morbidity Risks

- Hepatitis C
- HIV
- Syphilis

Overdose

- Limited treatment beds for survivors
- Death



IMPACT ON HEALTH, CONT'D



RESPONDING TO THE EPIDEMIC

Primary Prevention: Education

Secondary Prevention: SBIRT screening, early intervention, referral

Tertiary Prevention: Taper, Medication Assisted Treatment (MAT)

Risk mitigation: naloxone, CURES, drug testing



ACCOMPLISHMENTS

Utilizing a Public Health Model Pain committee implemented in 2005 **Embracing CDC 2016 Guidelines** Integrating Behavioral Health Increasing access to naloxone (opioid overdose antidote) Starting a MAT program Signing on as a Spoke with **AEGIS**





NALOXONE DISTRIBUTION

Collaboration with AEGIS and Humboldt County Health and Human Services

Trainings and naloxone distribution at community meetings

MEDICATION ASSISTED TREATMENT

Dispensed first script on May 22, 2018

Two waived providers

Consulted with AEGIS, Open Door, and Chapa-De Indian Health

Utilizing holistic approach

- Medical
- Nursing
- Behavioral Health

Created Welcome, Pre-Induction, and Induction packets

• Flow chart of process

CHALLENGES

Lack of universal trauma informed care training across the entire organization

Medically and socially complex care

Outreach staff are generally not reimbursable, but are critical to assist families in crisis and to provide prevention interventions

Space – fitting an integrated PCMH primary care clinic into a building designed as a small hospital

Staff recruitment difficulties

THE FUTURE

Expansion of naloxone distribution & training

Auditing patient charts to ensure long-term opioid users are aware they, and their family and friends, have access to free naloxone

Patient education in lobby & restrooms

Many fatal overdoses happen in public bathrooms. CHECK YOUR BATHROOMS Your actions could save a life.

Signs of an OD:

- Person is unresponsive
- Slow or no breathing
- Blue or gray lips/fingertips
- Death rattle
- "Air hunger"

- What to do:
- 1. Call 911 immediately
- 2. Do rescue breathing
- 3. Administer Narcan
- *If you leave the person, put
- them in the recovery position

Recommended Safety Protocols

- Call 911 right away if someone is in trouble!
- Do regular bathroom checks (e.g., every 10 minutes).
- Ensure that someone on shift always has a master key/code to the bathroom.
- Regularly review Bathroom Safety Protocol with staff.
- Have Narcan on hand, and know how to use it.

THE FUTURE, CONT'D

Increasing

Installing

Increasing KMC's capacity to meet the MAT needs of the Hoopa Tribe Installing a safe syringe drop-off kiosk on KMC property

Installing

Installing a safe medication return kiosk in KMC lobby







BEHAVIORAL HEALTH

KMC BH ACCOMPLISHMENTS

65 people completed assessments with a counselor from our department

10 people were sent to detox

31 people were sent to residential treatment Two new mental health clinicians have been hired

CTAS FUNDS

Starting a transitional living program for men and women

Case manager and outreach prevention worker hired with these funds

Men's Sober Living house is up and running

Women's house has been identified and is awaiting interior renovation

MAT

BH alcohol and drug counselor will start as AOD MAT Lead next week

BH is facilitating Seeking Safety groups twice a week for MAT program

Five days of outpatient groups



BH CHALLENGES

Not having direct funding to pay for inpatient treatment

Long waiting lists for inpatient treatment

Transportation for clients coming to clinic and when traveling to treatment

Placement for clients/patients that are dual diagnosed

Space and ability to be co-located and fully integrated into patient's healthcare

