

# Opioid Abuse Community Prevention Pilot Projects

While opioid overdose and addiction is preventable, it continues to be a major public health problem in Minnesota. Preventing opioid abuse and overdose requires a multi-sector collaboration.

Eight Opioid Abuse Community Prevention Pilot Projects were selected from 19 applicants with the goal of reducing opioid abuse across the state through community-wide coordination of abuse-prevention initiatives.

In May 2017, the Minnesota Legislature approved about \$1 million in funding to establish the pilot projects, which aim to reduce opioid abuse across the state by providing community prevention teams \$100,000 or \$75,000 grants starting this year. Each project will include controlled substance care teams that will implement tested strategies developed by CHI St. Gabriel's over the past three years that focus on reducing inappropriate use of opioids through care coordination, addressing unmet social service needs, prescriber education and assistance, proper opioid disposal, and engaging partners outside the health care system. CHI St Gabriel will provide technical assistance to grantees to maximize successful implementation of strategies.

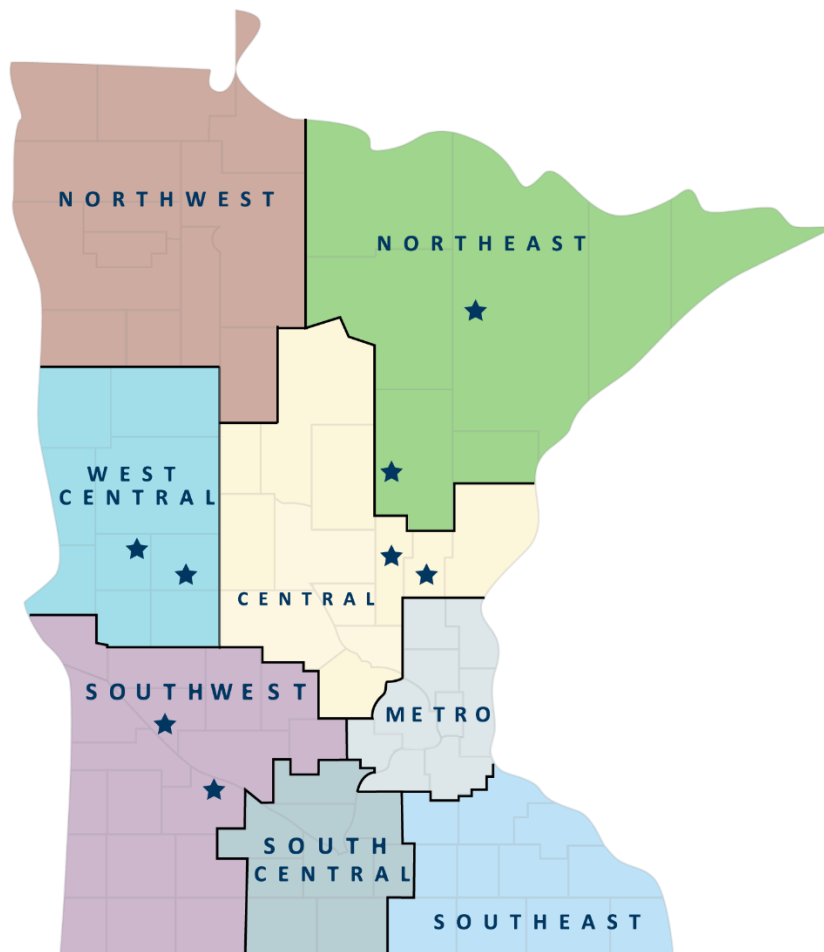
## St. Gabriel's Approach

In 2015, CHI St. Gabriel's developed a model focused on reducing inappropriate use of opioids through care coordination, addressing unmet social service needs, prescriber education and assistance, proper opioid disposal, and engaging partners outside the health care system. Through their care team, they worked together to review patient cases and create a plans to help patients taper off opioids, while preventing new opioid dependencies.

CHI St. Gabriel's new approach was successful. In 2014, before the project began, therapeutic drug monitoring was the number one diagnosis in their emergency department. In November of 2015, therapeutic drug monitoring diagnoses did not even make the Top 20. Over 400 patients had opioids, benzodiazepines, or stimulants discontinued by Controlled Substance Care Team intervention, resulting in 500,228 fewer pills/units prescribed in a year, an estimated cost savings of \$3.5 million per year.

## THE OPIOID ABUSE COMMUNITY PREVENTION PROJECTS MUST:

1. Reduce emergency room and care provider visits due to opioid use or abuse, and reduce rates of opioid addiction;
2. Create controlled substance care teams, that may consist of physicians, pharmacists, social workers, nurse care coordinators, and mental health professionals;
3. Deliver health care services and care coordination to reduce the inappropriate use of opioids and opioid addiction;
4. Address unmet social service needs that create barriers to managing pain effectively and obtaining optimal health outcomes;
5. Provide prescriber and dispenser education and assistance;
6. Promote the adoption of best practices related to opioid disposal and reducing opportunities for illegal access to opioids; and
7. Engage partners outside of the health care system, including schools, law enforcement, and social services, to address root causes of opioid abuse and addiction at the community level.



## Grantees Selected:

Alexandria Clinic, A Service of Douglas County Hospital (\$75,000)

Carris Health Redwood Falls Clinic (\$100,000)

Chippewa County Montevideo Hospital (CCMH) (\$75,000)

Fairview Mesaba Clinics (\$100,000)

FirstLight Health System (\$75,000)

Lake Region Healthcare (\$75,000)

Mille Lacs Band of Ojibwe (\$100,000)

Riverwood Healthcare Center (\$100,000)

## Evaluation

These grants will be evaluated by the changes in the number of opioid prescriptions, the number of ER visits related to opioid use and other health care provider visits resulting from opioid use, changes in rates of opioid addiction in the community, and a strengthened community system to respond to – and prevent – drug overdose. The strength of the community system measure will be developed, tested, and revised by the individual community pilot prevention projects.

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