Georgia Statewide Opioid Strategic Planning Meeting to Address the Opioid Epidemic

Georgia Health Policy Center

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Georgia’s Office of the Attorney General, Department of Behavioral Health and Developmental Disabilities (DBHDD), Department of Community Health (DCH) and Department of Public Health (DPH) jointly hosted a working meeting Dec. 18-19, 2017, to build dialogue and collaboration for developing strategies to address Georgia’s growing opioid crisis. Over 200 people from about 90 organizations participated. The meeting identified key goals and objectives, as well as measures of success to inform Georgia’s strategic plan.

Attorney General Chris Carr, Commissioner J. Patrick O’Neal (DPH), Commissioner Judy Fitzpatrick (DBHDD), and Deputy Commissioner Andrew Johnson (DCH) opened the meeting. Senator Kay Kirkpatrick made opening remarks and Senator Renee Unterman closed the meeting.

**SUCCESS IN GEORGIA MEANS:**

- Decreasing opioid and other substance misuse and eliminating all opioid-related deaths
- Identifying root causes of substance misuse and addiction in Georgia
- Treating substance misuse and addiction as medical conditions, not criminal behaviors
- Criminalizing illegal and abusive drug distribution*
- Reducing opioid prescribing and dispensing and increasing prescriber and dispenser education
- Increasing patient education on opioid risks, storage, and disposal
- Increasing trauma-informed prevention in schools and other settings, as well as to families in recovery*

- Responding successfully to the opioid epidemic at all levels of government, across all sectors, and with data systems to support accountability and sustainability
- Addressing both the current opioid epidemic and upstream prevention of future substance misuse
- Creating a coordinated, sustainable, fully funded, accountable, outbreak response
- Appropriately funding state policies and best practices for prevention, treatment, and recovery that reduce barriers to access*
- Increasing available, affordable individualized treatment and recovery services in settings where people feel they can safely seek help

**HOW CAN GEORGIA GET THERE?**

- Identify the needs of Georgians and keep these needs at the forefront of the response
- Recognize substance use disorders as a chronic medical conditions, and not as criminal behaviors
- Establish an incident command center to track and report on opioid activities*
- Encourage collaboration between law enforcement, public health, and other entities to overcome cultural differences and break down silos to coordinate response
- Identify resources to sustain existing statewide opioid initiatives and law enforcement activities*
- Increase the number of public health educators and peer support specialists*
- Improve access to alternative pain management therapies that are accepted by insurance and Medicaid*
- Increase access to Medicaid and insurance parity for mental health and substance use services*
- Identify available, affordable, evidence-based overdose reversal, treatment, and recovery services and supports*
- Prevent future substance use problems by improving socioeconomic conditions and employment opportunities for all

(* indicates legislative priorities)
INITIAL GOALS IDENTIFIED FOR STRATEGIC PLAN

Prevention Education
1. Increase resources that support the identification of root causes, the correlations of misuse and addiction, and substance misuse prevention programs*
2. Adopt best practices to educate all partners in the health care system on substance misuse prevention and the opioid crisis
3. Increase community awareness of the nature of opioid misuse and prevention*

Data and Surveillance
1. Improve data sharing; determine who has what data, how it is used, and any data gaps; and build coordination among stakeholders
2. Assess data needs among partners and stakeholders
3. Determine how to present and distribute data appropriately for different partners

Prescription Drug Monitoring Program (PDMP)
1. Implement PDMP interoperability between participating states by July 2018*
2. Connect death data with the PDMP
3. Establish capacity and regulatory pathways for clinical workflow integration with PDMP*

Treatment and Recovery
1. Increase access to treatment and recovery supports*
2. End stigma and discrimination related to addictive diseases
3. Educate public and private sectors throughout Georgia about treatment and recovery options

Control and Enforcement
1. Improve communication between the medical community and law enforcement
2. Reduce the supply of opioids on the street
3. Improve and increase training and education for law enforcement and first responders

WHAT CAN GEORGIA DO IMMEDIATELY?
• Connect death data to the PDMP
• Fund prevention, treatment, and recovery services and supports*
• Fund PDMP interoperability and electronic medical record integration*
• Establish a focal point, tiers of responsibility, and a central database for the statewide opioid response*
• Improve information flow within law enforcement
• Educate medical providers on opioid prescribing guidelines and the use and benefits of the PDMP*
• Conduct statewide law enforcement training on safe handling of fentanyl and opioid overdose reversal with naloxone at the Georgia Public Training Center in Forsyth
• Use social media to distribute information and build networks
• Synthesize and disseminate easily understood reports from existing data to inform response
• Increase storytelling by people and families with lived experience
• Expand the state budget to address harm reduction as treatment without judgment*

(* indicates legislative priorities)

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