Summary of Recommendations for Milwaukee County from Local Organizations Working to Reduce Opioid Overdose

In an effort to better understand the work being done to reduce opioid-related overdoses as well as identify gaps in services in the Milwaukee community, Milwaukee COPE developed a voluntary survey for community organizations. This survey allowed us to develop an inventory of local organizations working to reduce opioid overdose in Milwaukee County as well as to identify specific organizational needs and these organizations' perspectives on the broader Milwaukee County needs to effectively combat the opioid-related overdose epidemic.

The following recommendations are the result of a thematic analysis of 48 organizations' responses to the question: "In your opinion, what are the top 3 things that need to happen in Milwaukee County to reduce heroin and opioid overdose deaths." The following is a list of the general themes developed from those responses. The list is organized logically and does not in any way represent the magnitude of the number of organizations who made a particular suggestion:

- Increase availability, access, and funding for detoxification facilities and in- and out-patient treatment and recovery programs for opioid use disorder including Medication Assisted Treatment (MAT) such as Naltrexone (Vivitrol®).
- Develop collaborations between the justice and health care systems through drug courts and other methods to connect those with opioid use disorder to treatment rather than or in addition to incarceration.
- Decrease the supply of drugs in our community through law-enforcement, incarceration, and other deterrent efforts against those who sell drugs illegally.
- Provide more education, interventions, and other opportunities to discourage substance use and increase awareness of the
 risks of developing opioid use disorder.
- Understand the root causes of substance use and abuse and create alternative options (e.g., positive spaces and activities) for individuals choosing not to begin recreational drug use.
- Through education, improved inter-provider/payer communication (e.g., Prescription Drug Monitoring Program (PDMP)), and policy changes, decrease the amount of opioids that are available in the community through physician prescriptions.
- Improve availability and access to non-opioid pain treatment.

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- Create and initiate a coordinated and well-resourced community plan to address the opioid epidemic as a public health crisis.
- Increase the availability and access to Naloxone throughout the community (e.g., law enforcement officers, lay-bystanders, security guards, librarians) and provide evidence-based, lay-provider education for its use.
- Provide harm reduction information, opportunities, and facilities to improve safety for those who use opioids including heroin and reduce the risk of overdose.
- Learn more about who is overdosing and how to prevent death among those who use opioids.
- Create policy and system changes that link overdose survivors directly to care for underlying substance use disorder at the time
 of their care for the overdose. These services should be available to emergency departments as well as within the community
 for peer initiated overdose reversals.
- Educate the public in an effort to reduce the stigma associated with opioid use disorder (e.g., identify as a disease rather than a lack of will power or moral failing).
- Provide opportunities and education to encourage the safe disposal of unused medications.

This list and the organizational inventory are considered living documents. If you would like to complete a survey, and have your organization represented, please go to: https://www.surveymonkey.com/r/mkeopioidprevention