

Background

Minnesota: Drug overdose deaths continue to rise in Minnesota. Opioids and other drugs have been especially harmful in Black, People of Indigenous backgrounds, and BIPOC communities.

Overdose Data to Action: Minnesota Department of Health (MDH) utilizes the OD2A grant from the Centers for Disease Control and Prevention (CDC) to address overdose deaths in the state. Part of this grant funding supports the facilitation of culturally specific overdose fatality reviews (OFRs) in communities most impacted by overdose.

Bureau of Justice Administration Comprehensive Opioid, Stimulant, and Substance Abuse Program (COSSAP): This funding source supports regional emergency medical services providers to facilitate overdose fatality reviews (OFRs) across the state.

What is an OFR?

Overdose Fatality Reviews: This is a person-centered, evidence-informed prevention tool that is intended to identify system gaps between agencies and community conditions to prevent future overdose deaths. This innovative, community-specific overdose prevention strategy involves in-depth reviews of the lives of people who have died of an overdose.

By blending input from public health, public safety, healthcare providers, and the community; OFR teams develop recommendations to improve coordination and collaboration between agencies and community conditions to prevent future overdose deaths.

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Social Ecological Model of Overdose Prevention

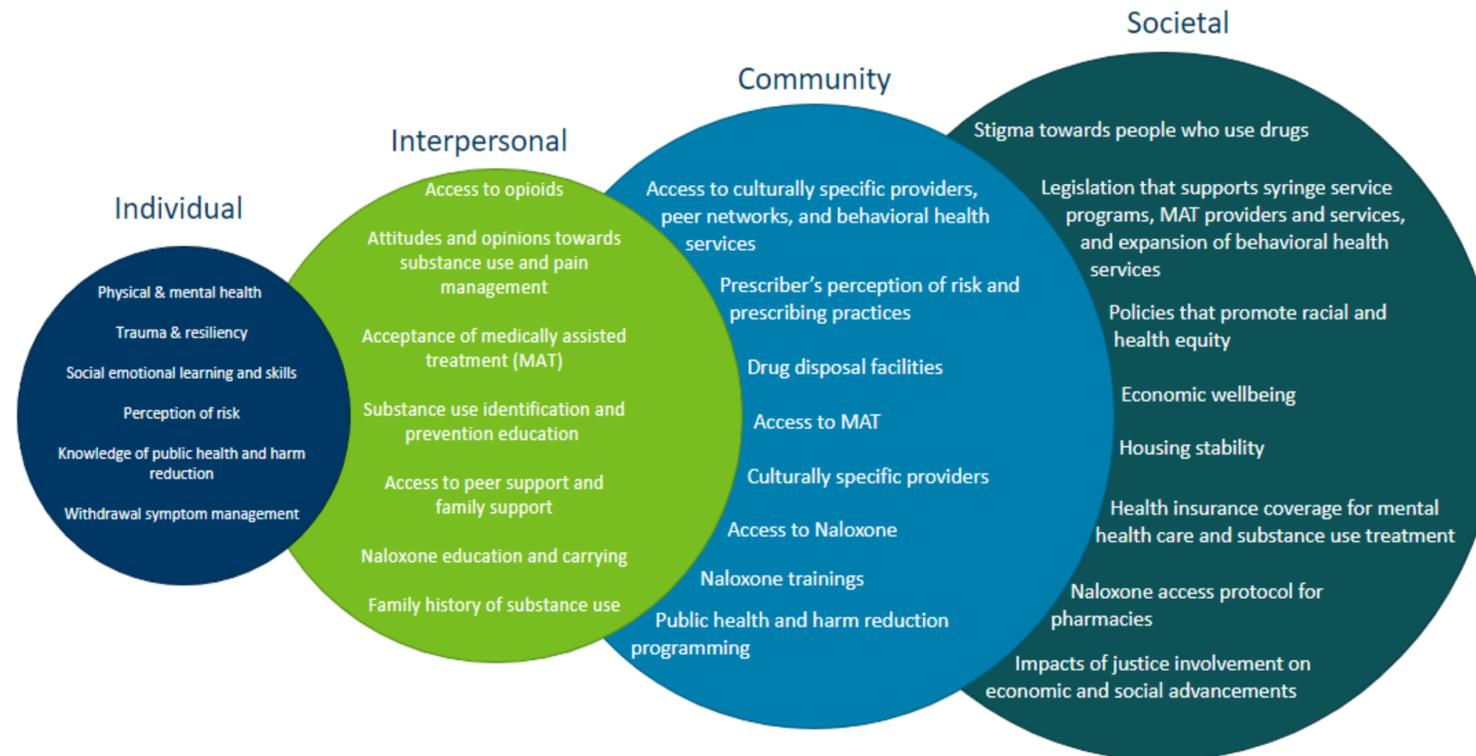


Image description: The complex interaction between many different factors is displayed as a social-ecological model (SEM). A SEM can be helpful to understand the upstream factors of issues and health disparities. We have created a SEM displaying some of the individual, interpersonal, community, and societal factors that can influence substance use and overdose prevention.

OFRs in Minnesota

In 2018 and 2019, MDH contributed to two pilot Overdose Fatality Review projects across Minnesota.

- Team one:** Focused on a diverse array of decedents concentrated in Minneapolis (Minnesota's urban center) and was co-led by MDH, local public health, and public safety agencies.
- Team two:** Focused on decedents from a Tribal Nation in rural Minnesota and was led by a Tribal Health Department.

In the recent round of Overdose Fatality Review projects beginning in July 2020, MDH has piloted ten Overdose Fatality Review projects across the state with two culturally-specific teams and eight Emergency Medical Service (EMS) teams.

Recommendations

Recommendations: Our partners know that action is the only way to prevent overdose deaths from happening and have recommended the following small process improvements and local interventions.

Examples from our two pilot OFRs:

- Increase culturally specific treatment and wraparound services availability.
- Leave additional naloxone at the site of overdose events by first responders.
- Increase medication-assisted therapy access in correctional settings.

Strategy identified: A warm hand-off' protocol between two local agencies.

OFRs as Prevention

Preventing substance use, misuse, and overdose in Minnesota requires all of us working together. OFRs are based in the social-ecological model (SEM), which identifies the interrelationships between risk factors across the four levels of individual, interpersonal, community, and societal levels.

By utilizing this model factors contributing to risk and health disparities can be identified further upstream contributing to the use of more effective protective interventions.

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