



The Opioid Crisis:

Exploring the Effects on First Responders and Healthcare Professionals

Dawne Frain, MSW Student and Rachel Lubischer, MSW Student

Faculty Advisor: Jeanette Harder, Ph.D., CMSW

DETAILS OF THE PROBLEM



Opioid crisis declared a public health emergency in 2017.⁹

Nebraska ranks among the states with the lowest number of drug overdose deaths.

Rising opioid use creates safety concerns for first responders and healthcare professionals, and leads to strained resources in many jurisdictions.

EFFECTS ON PROFESSIONALS NATIONWIDE

First Responders

Attitudes towards overdose victims

- Law enforcement officers and emergency medical technicians were reported to insult overdosing addicts after resuscitating them.¹¹
- EMS providers reported that, **“overdoses are a necessary risk and a consequence of the patient’s choices”**.¹¹
- Law enforcement officers indicated feelings of futility regarding limited local drug treatment, the cycle of addiction, and their inability to affect the prescribing practices of doctors.¹²



Dangers at the scene of an overdose

- Mississippi Fire Chief Charles Yarbrough, **“Administering Narcan reverses their (the person overdosing) high instantaneously, and after coming down from it, the person will often be very combative.”**¹³
- 77% of officers (n=251) surveyed in Seattle, Washington, indicated they needed to be at the scene of an overdose to protect medical responders.¹⁴

Barriers to addressing compassion fatigue

- Most common stigma items experienced by first responders:
 - Fear services would not be confidential,
 - Fear that seeking psychological services would impact their career,
 - Feelings of judgment from coworkers and leadership.¹⁵



Healthcare

- Medical students and physicians failed to identify which factors put a patient at the highest risk for opioid overdose.¹⁶
- In Maryland, 20% of physicians (n=405) experienced difficulty accessing the prescription drug monitoring program.¹⁷

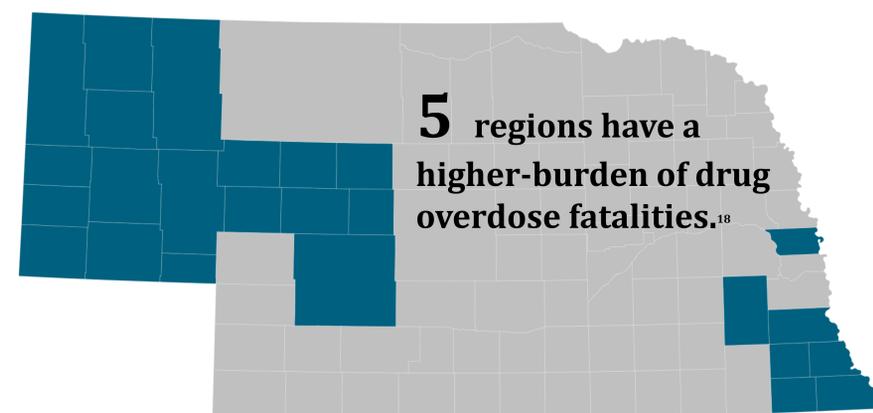
POLICY RESPONSES



Nebraska Legislation and Prevention Efforts

In response to rising opioid use, prevention efforts to increase public access to naloxone, provide training for first responders, and share prescribing information for healthcare professionals are being implemented.

- LB 471: Enhanced the program that tracks each prescription drug, including strength, quantity, and to whom it is dispensed within Nebraska.³
- LB 223: Required mandatory training to use the prescription drug monitoring program(PDMP).³
- LB 390: Granted immunity from administrative action or criminal liability for health professionals who dispense naloxone, friends and family members who administer naloxone in good faith, and emergency responders who administer naloxone.³
- The Nebraska Medical Association and DHHS partnered to create Nebraska Pain Management Guidelines, which align with the CDC Guidelines for Prescribing Opioids for Chronic Pain.⁴
- Nebraska DHHS’s Division of Public Health conducted a needs assessment with first responders, pharmacists, healthcare professionals, and substance abuse treatment facilities on awareness and accessibility of naloxone. Results guided the development of educational videos and a media awareness campaign.⁵
- Nebraska MEDS Coalition, the Nebraska Pharmacists Association, the Nebraska Medical Association, and the Nebraska Regional Poison Control Center continue to expand pharmacy drop-off locations for unused prescriptions.⁴



FAST FACTS

United States



47,600 opioid-related overdose deaths in 2017

42,000 opioid-related overdose deaths in 2016



56 million people in the U.S. filled a prescription for an opioid in 2016.

11 million people age 12 and older reported opioid misuse within the past year.

Nebraska



59 opioid-related overdose deaths in 2017

44 opioid-related overdose deaths in 2016



35% of all drug overdose deaths were due to opioids in 2016.

72.8 opioid prescriptions were written per 100 people in 2015.

Other State Efforts

- Iowa - “Public entities”, such as EMS and first responders, were able to purchase naloxone at a reduced price of \$75 for a two-pack kit of the nasal spray.⁶
- In Maryland, the Baltimore Health Department requested that doctors provide a naloxone prescription with every opioid pain pill prescription.⁷
- In Arizona, all opioid prescriptions written in counties with high opioid overdose rates must be sent digitally to pharmacies (e-prescribing) by January 1, 2019.⁸



Source: CDC, 2018; National Institute on Drug Abuse, 2018

Source: National Institute on Drug Abuse, 2018; NeDHHS Vital Statistics, 2018



UNIVERSITY OF NEBRASKA AT OMAHA
SUPPORT AND TRAINING FOR
THE EVALUATION OF PROGRAMS

