

Partnerships and Grant Funded Programs

MAT Expansion: The Public Health Institute of Metropolitan Chicago has funded an expansion of medication-assisted treatment (MAT) to address opioid use disorder within the Cook County Jail utilizing maintenance methadone and buprenorphine in conjunction with behavioral support. Participants receive care coordination while in jail and following release, and are offered continuity of care. Health educators and recovery coaches provide warm handoffs to a community-based clinic, which includes making appointments (and sometimes accompanying the patient to the first one) and helping to address barriers such as transportation.

Comprehensive Opioid Abuse Site-based Program: The U.S. Department of Justice has funded a program for three years enabling CCH and the Office of the Chief Judge to expand efforts to reduce the prevalence of opioid addiction in the Adult Probation Department in Cook County. The goals of the project—Universal Opioid Screening in Adult Probation to Reduce Usage and Overdose—are to engage activities around opioid addiction, and to facilitate training for probation officers and staff, along with inter-agency partnerships for screening, assessment and coordination of care.

State Targeted Response to the Opioid Crisis

Multiple grants have been awarded to Cook County Health by the Illinois Department of Human Services, Division of Alcoholism and Substance Abuse/Substance Use Prevention and Recovery to address the opioid crisis, providing funding for:

- **Primary Healthcare Setting Recovery Coach/Peer Counselor and “Warm Handoff” Services:** Recovery coaches provide an introduction to the recovery process, identify options available to support recovery, offer harm reduction techniques, provide group sessions, support the development of a recovery plan, and address the social determinants of health.
- **Correctional Health Services – Women with Opioid Use Disorder Pilot:** Specialized pre-release identification and education services, and linkage case management for women with OUD following release from Cook County Jail.
- **Correctional Health Services Vivitrol Pilot Enhancement:** Provision of an allied health provider to track clinical data, education prior to administration, and injection sequencing. This program provides support for the physician, expands the number of participants, and

supports the addiction counselor follow-up and care coordination upon release from the jail.

- **Opioid Use Disorder Homeless Linkage/Case Management Services:** Linkage case management of individuals in OUD treatment to housing services.
- Supported by CCH, the State of Illinois, and the Department of Human Services, the **Westside Community Triage and Wellness Center (WCTWC)**, operated by Habilitative Systems, Inc. and the Bobby E. Wright Comprehensive Behavioral Health Center, provides 24/7 access for urgent behavioral health needs. Services include screening and assessments, crisis intervention, intensive case management, and warm handoffs and linkage to treatment for those needing OUD treatment. Opened in August 2018, the WCTWC works closely with the Chicago Police Department and offers an alternative to arrest for individuals with mental health and/or substance use issues. The WCTWC is the second CCH-supported triage center following the 2016 opening of one in the Roseland community.

Addressing the opioid epidemic requires broad, cross-system collaboration and innovation. CCH leads in innovative clinical treatment intervention at our facilities. Our unique position also allows us to decrease risks for vulnerable populations at the jail and partner with community-based organizations for efficient, preventive treatment. Through advocacy and relationships with law enforcement, we seek to have a systems-change approach to the opioid conversation in Cook County. We are grateful to all the partners who help us make an impact in the lives of the patients and communities we serve.

TACKLING THE OPIOID EPIDEMIC

We are in the midst of a national crisis. For the first time in over a century, the average U.S. life expectancy has declined and the nation’s escalating drug crisis is a primary driver of this downward trend in its third consecutive year. Opioids, including illegal narcotics such as heroin and prescription pain medications such as oxycodone and hydrocodone, are involved in 70% of fatal drug overdoses, with the rising number of deaths corresponding to the growing use of synthetic opioids known as fentanyl.

Opioid-related deaths are increasing at an alarming rate—on average someone overdoses from opioids every 11 minutes—and more Americans are dying from overdoses than from motor vehicle crashes, falls, or gun violence. The U.S. Centers for Disease Control and Prevention reports that Americans represent only 5% of the global population, yet they are consuming 70% of the world’s opioids.

Substance Use Disorder (SUD) varies in different regions throughout the U.S., and in Cook County most opioid deaths are from the street drugs heroin and fentanyl. In 2017, there were more than 1,100 opioid overdose deaths in Cook County, a number that continues to rise year after year. Chicago saw a 533% increase in the rate of fentanyl overdose fatalities between 2015 and 2017.

At Cook County Health (CCH), there were nearly 3,500 opioid-related patient encounters in the Emergency Department in 2017. According to the National Institute on Drug Abuse, up to 36% of individuals who use heroin enter the corrections system each year, and an estimated 65% of the U.S. jail and prison population is thought to have a substance use disorder.

Our access to high-risk populations, coupled with the ability to reach individuals in dozens of sites of care across Cook County, places Cook County Health in a unique position to help tackle the opioid epidemic and join the crisis response using a cross-systems, collaborative and community-based approach.

**MAKING
AN IMPACT.**

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Cook County Health Is Committed

- Cook County Health offers a variety of evidence-based treatment options and treatment linkages, including medication-assisted treatment (MAT), in community health centers, the emergency department, correctional health, and the inpatient setting. A combination of FDA-approved medication and behavioral health support, MAT is considered the gold standard approach to substance use disorders (SUD) treatment. CCH had more than 5,000 patient encounters with a MAT clinician or coach in 2018.
- CCH implements tools to assist providers in making safer prescribing decisions, including embedding the Illinois Prescription Monitoring Program into systemwide electronic medical records. CCH has tracked a 36% decrease in opioid prescription volumes since 2017.
- CCH embraces a harm-reduction approach and uses evidence-based treatment options for those in the Cook County correctional health system. For example, treatment includes all three FDA approved medications for opioid use disorder—methadone, buprenorphine, and naltrexone—a practice that is not the case in most jails and prisons across the U.S. The goal is to link the patient with the best treatment modality based on the patient’s needs.
- Individuals who are discharged from a correctional system setting are particularly vulnerable to overdose in the period immediately following discharge, with a 40x greater risk in the first two weeks post release compared to the general population. CCH initiated Illinois’ first naloxone training program in the jail to combat this trend. Since starting in August 2016, more than 5,000 detainees have received naloxone education at the Cook County Jail and over 3,500 naloxone kits have been provided upon release.
- CCH has implemented an expanded opioid screening tool to include fentanyl, hydrocodone, oxycodone, and other synthetic opioids. More than 2,000 expanded screenings have been administered at testing sites that include the Stroger Emergency Department, Stroger Trauma and Burn Unit, primary care health centers, Pain Clinic, CORE Center, and Correctional Health Services at Cook County Jail.
- Recognizing there is no one-size-fits-all solution, CCH actively leverages partnerships and grant opportunities, and convenes stakeholders to engage in broad-based efforts to address the opioid crisis.



A Profile in Recovery

Patience is a spirited, compassionate woman with a strength that rivals an army. She is also a success story. After a 23-year battle with opioid addiction and countless attempts to beat her habit—she can claim victory.

Starting at age nine, Patience would drink cough medicine and take anything else she could find in the medicine cabinet at home. In her early teens, she suffered from migraine headaches and toothaches which led to frequent trips to the dental office. After receiving several prescriptions for pain medications, she quickly became addicted to the high. Several years later she suffered from the pain from her wisdom teeth, and she then spiraled from pain killers to narcotics. Following several traumatic life events, Patience found herself with an addiction that spanned more than two decades.

After suffering a heroin overdose, Patience was determined to change her life. She was directed to Cook County Health, where she was introduced to the medication-assisted treatment (MAT) program, a move that Patience credits with saving her life. She received a prescription for Suboxone and began counseling sessions all with the support of a recovery coach. She was able to go back to school, practice yoga, and deepen her religious faith, which all contributed to her recovery success. And without an opioid craving in more than a year and a half, Patience is a yoga instructor, a manager at a specialty food delivery service, and an advocate for the support of CCH’s MAT program.

Her journey was long and hard, but Patience’s story exemplifies the potential for the millions of others who struggle with their own substance use disorder, a battle that knows no bounds and that is being waged each and every day across America.

Cook County Health Supports Policies That:

1

Protect health insurance coverage gains made through the implementation of the Affordable Care Act and Medicaid expansion in Illinois.

2

Increase access to naloxone for individuals at risk of an opioid overdose, including efforts to provide family and friends with naloxone.

3

Ensure that people with both public and private insurance are able to access all forms of evidence-based substance use treatment.

4

Provide linkages and warm handoffs to services at CCH as well as link patients to community behavioral health providers.

Drug overdoses KILL MORE than cars, guns, and falling



Falling

28,360 deaths



Guns

32,351 deaths



Traffic accidents

33,692 deaths



Drug overdoses

41,340 deaths
(16,917 from opioid pain medicine)

Source: CDC Wide-ranging OnLine Data for Epidemiologic Research (WONDER) on Mortality, [http://wonder.cdc.gov/mortsql.html\(2011\)](http://wonder.cdc.gov/mortsql.html(2011))