HRETA

Harm Reduction Education & Technical Assistance

WINNIPESAUKEE

This snapshot summarizes narrative findings from learning sessions held with key regional stakeholders identified by the Public Health Networks and community agencies. Data sources are listed under corresponding infographic.

INVOLVE PEOPLE WITH LIVED EXPERIENCE IN PLANNING & EVALUATION

PROVIDING NON-

COLLABORATION

CONTINUUM OF CARE

ACROSS THE

STIGMATIZING

SERVICES

Nursina

Most organizations use client satisfaction surveys. Many organizations have people in recovery on their staff or on leadership teams.

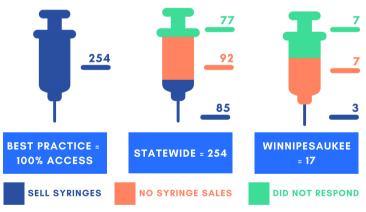
Trainings on cultural humility and focus on personcentered language. Greater need for resources in languages other than English. High utilization of strengths-based conversations with clients. Unique program offered for parents in recovery.

Strong partnerships reported between the Public Health Network, the Doorway, treatment providers, Lakes Region Mental Health Center, and Greater Tilton Family Resource Center.

INFECTION PREVENTION

Lack of access to safe injection equipment, syringe service program is needed. HIV/ Sexually Transmitted Infections/ Hepatitis C testing available in region via local partnerships, need for low-barrier Hepatitis C treatment and HIV prevention education.

PHARMACY SYRINGE ACCESS



SOURCE: SURVEY OF ALL NH RETAIL PHARMACIES CONDUCTED BY UNH IN 2020 (N= 174: TOTAL NH RETAIL PHARMACIES = 254; RESPONSE RATE 68.5%)

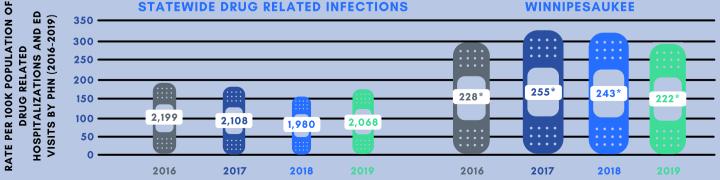
SYRINGE SERVICES PROGRAM ACCESS



*DISTANCES TO CLOSEST SYRINGE SERVICES PROGRAMS FROM PUBLIC HEALTH NETWORK IN LACONIA, NH

> SOURCE: SYRINGE SERVICE PROGRAMS REGISTERED IN NH, VT, AND ME

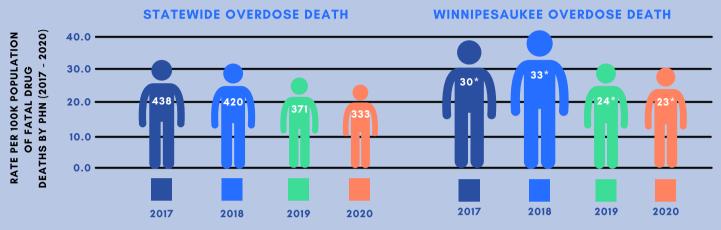
HOSPITAL DISCHARGES WITH CONCURRENT INFECTION AND OPIOID USE^STATEWIDE DRUG RELATED INFECTIONSWINNIPESAUKEE



*THE SIZE OF THE BANDAGE IS THE RATE PER HUNDRED THOUSAND, TO ALLOW FOR COMPARABILITY. THE NUMBER ON THE BANDAGE REPRESENTS THE ACTUAL NUMBER OF ED AND INPATIENT DISCHARGES WITH CONCURRENT INFECTION AND OPIOID USE CODES. SOURCE: OFFICE OF HEALTH STATISTICS AND DATA MANAGEMENT, BUREAU OF PUBLIC HEALTH STATISTICS AND INFORMATICS, NH DEPARTMENT OF HEALTH AND HUMAN SERVICES ^INCLUDED CASES OF CELLULITIS, ABSCESS, SKIN INFECTION, BACTEREMIA, SEPTIC ARTHRITIS, OSTEOMYELITIS, OR ENDOCARDITIS AND OPIOID USE, OPIOID ABUSE, OPIOID DEPENDENCE, OPIOID POISONING, OR ADVERSE EFFECT OF OPIOID ACCESS TO NALOXONE

Naloxone is readily available for providers via the Doorway, health centers, and fire departments. No reported targeted outreach to those at greatest risk.

REFERRAL TO SUD TREATMENT SERVICES Doorway is the dominant Buprenorphine provider but refers to a variety of other agencies. Uniquely, multiple agencies highlighted the importance of addressing social determinants of health within Medications for Opioid Use Disorder (MOUD) service provision.



*THE SIZE OF THE PERSON IS THE RATE PER HUNDRED THOUSAND, TO ALLOW FOR COMPARABILITY. THE NUMBER ON THE PERSON IS THE ACTUAL NUMBER OF OVERDOSE DEATHS. SOURCE: OFFICE OF THE NH MEDICAL EXAMINER (2017-2020)

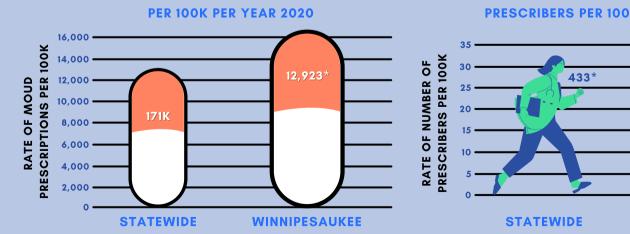
HOUSING

Sober housing options in the region but few accept individuals taking Medications for Opioid Use Disorder (MOUD). There is inadequate access to low-barrier shelters and affordable housing.

ACCESS TO MEDICATIONS FOR OPIOID USE DISORDER (MOUD*)

TOTAL RX MOUD PRESCRIPTIONS

MOUD (methadone and buprenorphine) is readily available in the community from local organizations or the Doorway.



*THE SIZE OF THE ICON IS THE RATE PER HUNDRED THOUSAND, TO ALLOW FOR COMPARABILITY. THE NUMBER ON THE ICON IS THE ACTUAL NUMBER OF PRESCRIPTIONS OR PRESCRIBERS. SOURCE: THE NH PRESCRIPTION DRUG MONITORING PROGRAM (2020)



IMPACT OF COVID-19

Telehealth services expanded, peer support meetings held remotely. More flexibility for clients with takehome medications. Increased social isolation reported. Fewer options for folks experiencing homelessness.

NUMBER OF ACTIVE BUPRENORPHINE PRESCRIBERS PER 100K PER YEAR 2020

15*

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