

Governor's Opioid Addiction Crisis Datathon 2017

Battling Virginia's Opioid Crisis





Datathon Objective

Objective: How can Virginia harness data analytics to develop preventative and treatment approaches to address the growing opioid epidemic across the state?

1. How can we evaluate areas of risk vs. need related to opioid-overdose deaths, based on Virginia's socio-economic/regional profile?
2. How might we increase accountability & transparency of the funding provided towards battling the opioid crisis?
3. How might we refocus the strategy to ensure accountability of the money spent towards prevention/treatment versus detection/incarceration?



Risk-Based Prioritization

\$22.5 Million

**Unused
Funding
available for
Assistance**

Problem Statement: *Is there a need for greater transparency & accountability of resources allocated to Virginia's Community Service Boards to manage opioid treatment and prevention?*

Solution:

1. Identify rate of abuse by drug type using Virginia Health Opportunity Index (HOI) Indicators
2. Calculate Amount of Federal Awards obtained for substance abuse and opioid prevention
3. Calculate Amount of Expenditures actually spent towards treatment and prevention
4. Align spend with HOI indicators & rates of abuse by drug type.

Impact: Opportunity to reprogram up to \$22.5 Million in funding for Virginia's counties requiring most assistance, based upon strategic health opportunity index indicators.



Way Forward

- Increased transparency and oversight related to opioid programs. The Federal government is moving towards a dedicated fund to monitor opioid spending.
- Maximize obtaining discretionary Federal grant money to combat opioid use. Currently, only receiving 4 percent of available Federal funding.
- Reevaluate distribution of funds based upon need and related risk factors.



Opioid Abuse across Counties

- **Total Deaths:** 1,268
- **Opioid Overdose Growth:** 10% Year over Year
- **Central & Eastern** regions prefer fentanyl/heroin
- **Northern & Southwest** regions prefer prescription opiates

Risk Rating determined by

- Highest rate of accidental deaths caused by opioid use
- Correlation between HOI Indicators

VDH Health Region By Type



Locality	Opioid Related Accidental Death Rate	Population	Community Opportunity	Consumer Opportunity	Economic Opportunity	Youth Well Being Index	Wellness Disparity	Total Funding by CSB
State of VA Average	15.1	8,018,582	0.38	0.69	0.32	0.6	0.38	4,149,692
Petersburg	50.2	32,326	0.44	0.59	0.33	0.5	0.46	0
Westmoreland	45.4	17,532	0.32	0.69	0.26	0.37	0.23	1,560,900
Winchester	43.6	26,587	0.46	0.7	0.31	0.53	0.44	0
Orange	42.2	24,759	0.36	0.67	0.33	0.63	0.68	2,588,792
Dickenson	40.1	15,749	0.26	0.61	0.21	0.44	0.43	0



Data Sources

Publicly Available

Demographic data

State & Local Financials

Federal Award Data



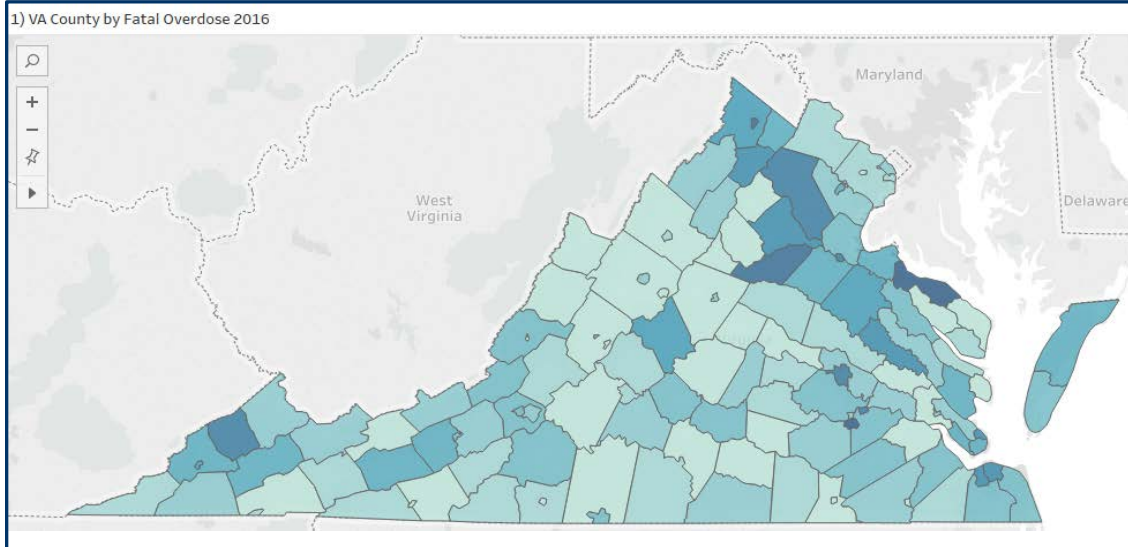
Compile
Reconcile
Extrapolate



Analysis

1. Pinpoint area of highest risk
2. Calculate the location with the greatest amount of funding
3. Determine if a realignment of resources is required

Measuring Effectiveness of \$\$

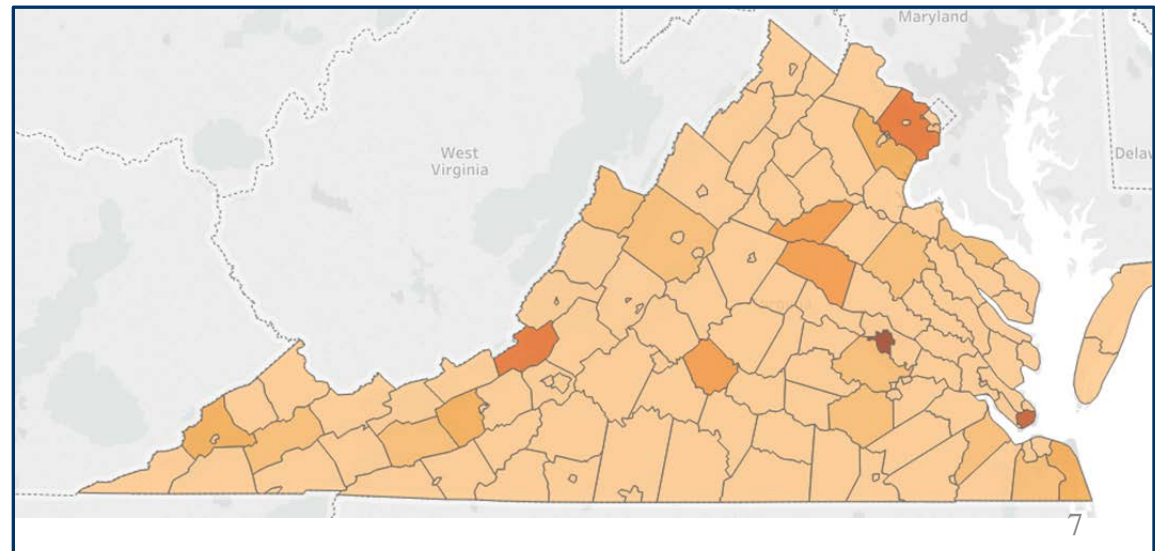


The diagram (left) shows the regional profile of fatal overdoses

Light Blue = fewest
Dark Blue = most

The diagram (right) shows the regional profile of funding related to substance abuse programs

Light Orange = lowest
Dark Orange = greatest





Funding Discrepancies

The diagram below represents the discrepancy between amount of fatal overdoses and level of funding.

Red is the greatest amount of funding for the least level of opioid overdoses.

Yellow is the least amount/insufficient level of funding when compared to the level of opioid overdoses

